CALL FOR ABSTRACT SUBMISSIONS

Deadline: October 26

The AAN is now accepting abstract submissions for the 2016 Annual Meeting, which will take place Thursday, April 15, through Friday, April 21, in Vancouver, BC, Canada. As the world’s largest gathering of neurologists, the Annual Meeting offers an unparalleled opportunity to gain exposure for research, make connections, foster collaboration, and learn from experts across a wide range of subspecialties.

Neuro-oncologists interested in presenting their work are strongly encouraged to do so. Last year, over 100 scientific abstracts were submitted on a broad range of topics, including the latest in glioma therapeutics, quality-of-life, symptom management, rare tumors, paraneoplastic disorders, and neurologic complications of cancer. The deadline for submission is Monday, October 26. Submit your abstract today!

CALL FOR AWARD NOMINATIONS

Deadline: October 28

Neuro-oncology Scientific Award

The Neuro-oncology Section is pleased to announce nominations are open for the new, annual, endowed Neuro-oncology Scientific Award (supported by the friends of Al Yung, MD). The section has successfully raised funds to support this award in perpetuity and would like to thank everyone who contributed.

This award will honor scientists or physicians from any discipline who have published a major scientific contribution to the field of neuro-oncology in the year preceding the nomination deadline (i.e. October 2014 – October 2015). A Scientific Award Selection Committee has been established to review nominees. This award will serve to complement the Neuro-oncology Investigator Award, which focuses on young investigators. The first awardee will be announced at the 2016 AAN Annual Meeting. The deadline for applications is October 28, 2015. Apply or nominate a candidate.

Wai-Kwan Alfred Yung, MD, is a professor of neuro-oncology and has served as the chair of the Department of Neuro-oncology at MD Anderson Cancer Center since 1999. He is also the Margaret and Ben Love Chair of Clinical Cancer Care and professor of cancer biology. He served as director of the Brain Tumor SPORE and co-director of the Brain Tumor Center at MD
Anderson. He has over 300 peer-reviewed publications in high-impact journals covering diverse laboratory and clinical research topics with a focus on therapeutic approaches, including oncolytic adenoviral vectors and small molecule inhibitors of the PTEN/PI3K and EGFR pathways. His extensive contributions to basic, translational, and clinical research, spanning over two decades, are the inspiration for the Neuro-oncology Scientific Award.

**Neuro-oncology Investigator Award**

The Neuro-oncology Section is pleased to announce nominations are open for the annual, endowed Neuro-oncology Investigator Award (supported by the friends of Jerome Posner, MD, FAAN). 2016 will be the second year this award has been offered by the AAN. This award is focused on young investigators in the field of Neuro-oncology. Elizabeth Gerstner, MD, was the inaugural recipient in 2015. The Investigator Award Review Committee will assess all nominations. The **deadline for applications is October 28, 2015.** [Apply or nominate a candidate.](#)

**MEMBER PROFILE**

**Tobias Walbert, MD, PhD**

Quality-of-life as a measurable health care outcome is a relatively recent concept, but over the past two decades there has been a gradual shift from exclusive reliance on traditional end points such as overall and progression-free survival toward incorporation of measures that assess a patient’s subjective experience. Most clinical trials today include some type of health-related, quality-of-life measure, and few would disagree with the notion that physicians ought to assess more than just a patient’s physical state when offering treatment recommendations. Despite this more holistic perspective, quality-of-life research is fraught with challenges, including shifting definitions, lack of standardized instruments, and questions of interpretation. Fortunately Tobias Walbert, MD, PhD, is taking on these challenges. His research on palliative care among patients with brain tumors has highlighted the need for more uniform practice standards. Equally important is his focus on end-of-life care that has brought an oft-neglected aspect of patient experience into the research forum.

Walbert is an assistant professor of neurology at Wayne State University and an attending neuro-oncologist at the Henry Ford Hospital in Detroit, Michigan. In addition to his duties as neuro-oncology fellowship director and medical co-director of the Hermelin Brain Tumor Center, he is the principal investigator for numerous multicenter clinical trials. Walbert also serves on the editorial board of the *Journal of Neuro-oncology Practice* and *Palliative Medicine and Nursing*. He has completed several investigator-initiated trials and is widely published. Walbert has also proven himself as an enthusiastic educator. He routinely presents on quality-of-life-related issues at national conferences but can also be found serving his own community in smaller venues hosted by patient support groups.
Walbert graduated from the Friedrich Schiller University in Jena, Germany, with a combined MD-PhD in 2000. He received a Fulbright Scholarship to study at the Harvard School of Public Health and earned a master of public health degree from Harvard with a focus on health care management and quality-of-care. Upon returning to Germany in 2003, Walbert put his degree to use studying the socioeconomic implications of neurologic disease but soon decided to pursue a clinical career—one that would afford him the chance to influence and study health at the patient level. In 2004 he returned to the US and began his training at Case Western Reserve in Cleveland. During his internship he developed a strong interest in oncology, which he maintained throughout his neurology residency. A fellowship in neuro-oncology was a natural choice and he started his training at MD Anderson Cancer Center in 2008.

It was in Texas that Walbert met Eduardo Bruera, MD, FAAHPM, Chair of the Department of Palliative Care and a recognized leader in his field. Walbert credits time spent with Bruera and his team for his decision to pursue successful certification in palliative medicine and for fostering his research interests. He also saw an opportunity to apply his public health training to address oft-neglected and poorly understood aspects of neuro-oncology. According to Bruera, “During his rotation as a trainee, Walbert identified a knowledge gap in neurology and particularly neuro-oncology practice regarding the disciplined assessment and management of brain cancer patients nearing end of life.” Asked to describe the motivation for his research, Walbert shares an observation he had during fellowship training: “While everyone was working on finding a cure [for brain cancer], there seemed to be a more obvious, unmet need at hand. One of the big issues is how to support patients and families in a more standardized, systematic way.”

Walbert believes that evidence-based guidelines can be developed to help physicians achieve better quality-of-life outcomes. However, he acknowledges that there are challenges unique to the field of neuro-oncology. Notably, patients with brain tumors almost invariably face the loss of decisional capacity. In response, he proposes that earlier involvement of palliative care might benefit both patients and their caregivers, but he recognizes that prospective studies are necessary to demonstrate the value of palliative care, as has been accomplished in lung cancer. “It has to be done in a scientific way,” he emphasizes.

It won’t be easy, but the questions Walbert hopes to answer with his research are important ones: “How do we develop more symptom-based assessments for use in clinical trials? What are the most important interventions for patient quality-of-life; [and ultimately], how do we facilitate realistic end-of-life planning without challenging the paradigm of hope?” He has a supporter in Bruera, who has been an advocate for work of this kind for over 25 years. “His research and teaching are hard to fund and less flashy than other aspects of neuro-oncology,” Bruera says, “but they have a profound impact on patients and families and the potential to greatly improve bedside care while reducing burnout among neuro-oncologists.”

For readers interested in learning more about the intersection of palliative care and neuro-oncology, Walbert will be directing a new course entitled “The Palliative Care Guide in Neurology: What You Must Know About Neuro-oncology” at the 2016 Annual Meeting in Vancouver. As outlined in the program, he and invited faculty will provide a brief history of palliative care, outline its goals, and clarify the distinction between palliative care and hospice care. In addition, there will be a segment on communication with patients and families with an emphasis on how to disclose bad news and how to provide honest, yet compassionate, information. Concepts of quality of life and the importance of trust will be addressed as well.
2016 AAN MEETING UPDATES

Highlights and Expanded Educational Content

Maciej M. Mrugala, MD, PhD (University of Washington), Antonio M. P. Omuro, MD (Memorial Sloan Kettering Cancer Center), and Sonia Partap, MD (Stanford University) will serve as the Neuro-oncology Co-chairs for the 2016 Annual Meeting to be held April 15 through April 21, 2016, in Vancouver, BC.

In these roles, Mrugala, Omuro, and Partap will serve as champions for the neuro-oncology-related events at the Annual Meeting and will communicate with members regarding abstract submissions and nominations for the two endowed awards.

For the second consecutive year, neuro-oncology educational content will expand at the Annual Meeting. The following Education Program courses (with directors) will be offered to attendees:

1. Palliative Care in Neuro-oncology (Tobias Walbert, MD, PhD) – New!
2. Neuro-oncologic Emergencies (Nimish A. Mohile, MD)
3. Primary Brain Tumors (Erin M. Dunbar, MD)
4. Neurologic Complications of Systemic Cancer (Patrick Y. Wen, MD, FAAN)
5. Case Studies in Neuro-oncology (Amy A. Pruitt, MD)

CLINICAL TRIAL PROFILE

Phase II trial of SMO/AKT and NF2 inhibitors in progressive meningiomas with SMO/AKT/NF2 mutations (A071401)

This is an innovative trial of personalized therapy for patients with meningiomas. Recent sequencing studies identified several targetable mutations in meningiomas (Brastianos PK, et al Nat Genetics, 2013; Clark VE, et al Science, 2013). The tumor suppressor NF2 is disrupted in approximately half of meningiomas. A subset of meningiomas lacking NF2 alterations harbor recurrent oncogenic mutations in AKT1, a member of the PI3K/AKT/mTOR pathway, and SMO, a key component of the hedgehog pathway. Therapies that target these alterations are currently in clinical use or trials in other cancers. As meningiomas lack effective therapies, the potential for targeted therapy is of great interest. Priscilla Brastianos, MD, director of the CNS Metastasis Program at Massachusetts General Hospital, is the principal investigator for the trial, which is being conducted within the National Cancer Institute-sponsored Alliance Cooperative Group.

Tumors are centrally screened for the presence of AKT1, SMO, and NF2 mutations, and if present, they will receive the respective inhibitor that targets those mutations. There will be 24 evaluable patients assigned to each treatment group based on their tumor mutations. Within each mutation treatment arm, there will be 12 patients accrued to the grade I cohort and 12 patients accrued to the grade II/III cohort. Key inclusion criteria include histologically proven intracranial meningioma, presence of SMO, AKT, or NF2 mutation, and progressive or residual measurable disease. The co-primary end points are progression-free survival at six months
(PFS6) and response rate. If successful, this study represents a potential novel therapeutic approach in meningioma, a disease with a critical need for effective therapy.

A071401 is open to patient enrollment. The protocol and associated documents can be found on the Alliance website for sites interested in participating. Questions concerning this protocol can be directed to Brastianos, pbrastianos@mgh.harvard.edu, or Tamara Robles, MD, Protocol Coordinator, at roblest@uchicago.edu.

INSTITUTIONAL PROFILE

Princess Margaret Cancer Centre, Toronto, Canada

The Princess Margaret Cancer Center is home to one of the largest neuro-oncology programs in Canada. Led by Warren P. Mason, MD, The Gerry and Nancy Pencer Brain Tumour Center at Princess Margaret was established in 1998 with a mission to develop a multidisciplinary program for patients with primary brain tumors. The Center serves the Greater Toronto area—a population of six million people—and is part of the larger University Health Network of the University of Toronto that includes the Hospital for SickKids and the Sunnybrook Hospital.

The Center is comprised of 15 neurosurgeons, five radiation-oncologists devoted to treating CNS disease, and two neuro-oncologists. There are approximately 150 patient visits per week, and the center evaluates 300 patients with newly diagnosed glioblastoma each year. There is also a large effort in management of brain and spinal cord metastases. With such a high volume of patients, a large team of clinical and research nurses, a dedicated physical therapist, and a social worker are all part of the team supporting the clinic. In addition, the program houses a team of neuropsychologists focused on the care of adult brain tumor patients as well as the pediatric population at SickKids.

The Center is also a national and international leader in clinical research and development of novel treatments for glioblastoma. This has developed through Mason’s leadership in the Brain Disease Site Group of the National Cancer Institute of Canada Clinical Trials Group and collaborative translational efforts with The Arthur and Sonia Labatt Brain Tumor Research Center at the Hospital for SickKids. At any given time, there are six to 10 clinical trials ranging from first-in-man, phase 1 trials to multicenter, phase 3 trials. In addition to its contributions to
clinical and translational research for primary brain tumors, the Center also supports a neuro-oncology fellowship training program. Medical oncologists and neurologists from Canada, the United States, Europe, and Australia have graduated from the fellowship program, extending its influence across the world. Learn more about the Pencer Brain Tumour Center at Princess Margaret Cancer Center.

2015 SOCIETY FOR NEURO-ONCOLOGY MEETING

AAN cosponsors courses

The AAN Neuro-oncology Section and Society for Neuro-oncology (SNO) are cosponsoring two sessions at the 2015 Society for Neuro-oncology Annual Meeting in San Antonio, Texas, November 19 through November 22.

The Neuro-oncology Review Course will be held for the second consecutive year on Wednesday, November 18, 2015. This full-day course is directed by Maciej M. Mrugala, MD, PhD, and targets practicing physicians, trainees, nurse practitioners, nurses, and anyone interested in reviewing and expanding their knowledge of clinical neuro-oncology. Topics include principles of radiotherapy and chemotherapy, primary brain tumors in adults, pediatric brain tumors, CNS metastatic disease, medical complications of brain tumors, and palliative care principles for neuro-oncology. All attendees will be able to receive CME credits.

The SNO Sunrise Session will be held on Friday, November 20, 2015 from 7:00 a.m. to 8:30 a.m. The session, Tumor Microenvironment/Heterogeneity, will be co-chaired by Mario Suva, MD, PhD and Patrick Y. Wen, MD, FAAN, and will be an up-to-date review of this “hot topic” in neuro-oncology.

NEW AAN SECTION LIASION

Katie Boyle, Manager, Member Relations

The AAN Neuro-oncology Section is pleased to announce that Katie Boyle, the AAN’s Member Relations Manager, has taken on the role of section liaison.

Within the AAN, there are 33 sections, ranging from Global Health to Sleep Medicine. Joining a section like Neuro-oncology offers members a means to focus their interests, improve networking opportunities, and advance specific issues through advocacy programs or funded research awards.

In her role as liaison, Ms. Boyle and her staff will provide a measure of continuity across the diverse sections with the goal of streamlining operations, improving communication, and increasing collaboration.
Ms. Boyle has been at the AAN since 2011 and previously worked as a project manager with AAN Clinical Practice where she was involved in the development and dissemination of guidelines.

AAN NEURO-ONCOLOGY SECTION ELECTIONS

Elections for the positions of Chair and Vice Chair of the Neuro-oncology Section will be held in fall 2015. Appointment of Executive Committee members will be at the discretion of the new Chair and Vice Chair. The deadline for nomination of candidates is December 1, 2015. Section members will be alerted by email when the nomination period and the voting period open. Voting will be by electronic ballot, and the new Chair and Vice Chair will be announced at the 2016 Annual Meeting in Vancouver, BC.

NEURO-ONCOLOGY CONFERENCES 2015-2016

<table>
<thead>
<tr>
<th>Conference</th>
<th>Dates</th>
<th>Location</th>
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<tbody>
<tr>
<td>Society for Neuro-oncology Annual Meeting</td>
<td>November 19 to November 22, 2015</td>
<td>San Antonio, Texas</td>
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<td>International Primary CNS Lymphoma Collaborative Group Annual Meeting</td>
<td>December 4, 2015</td>
<td>Orlando, Florida</td>
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<td>American Academy of Neurology Breakthroughs in Neurology</td>
<td>January 15 to January 18, 2016</td>
<td>Orlando, Florida</td>
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<tr>
<td>American Academy of Neurology Annual Meeting</td>
<td>April 15 to April 21, 2016</td>
<td>Vancouver, BC, Canada</td>
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<td>American Association for Cancer Research Annual Meeting</td>
<td>April 16 to April 20, 2016</td>
<td>New Orleans, Louisiana</td>
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<td>American Society of Clinical oncology Annual Meeting</td>
<td>June 3 to June 7, 2016</td>
<td>Chicago, Illinois</td>
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<td>Canadian Neuro-oncology Biennial Meeting</td>
<td>June 9 to June 11, 2016</td>
<td>Toronto, ON, Canada</td>
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<td>International Symposium on Pediatric Neuro-oncology</td>
<td>June 12 to June 15, 2016</td>
<td>Liverpool, UK</td>
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<td>Asian Society for Neuro-oncology Annual Meeting</td>
<td>September 11 to September 15, 2016</td>
<td>Sydney, Australia</td>
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<tr>
<td>American Academy of Neurology Fall Conference</td>
<td>October 2016</td>
<td>Las Vegas, California</td>
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<tr>
<td>European Association of Neuro-oncology Annual Meeting</td>
<td>October 13 to October 16, 2016</td>
<td>Mannheim/Heidelberg, Germany</td>
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