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Full Reference (including all authors (presenter in bold) & title):

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Title: Circulating Tumour Cells Detection in Recurrent Oral Squamous Cell Carcinoma Patients

Conference/Meeting Name: Australian and New Zealand Head & Neck Cancer Society 24th Annual Scientific Meeting

Location (city, state, country): Hunter Valley, NSW, Australia

Dates: 10-12 August

Presentation Type (invited keynote, oral, poster): Oral



Image from the end of my oral presentation acknowledging my team, clinical collaborators and funding bodies including Sydney Cancer Partners/Cancer Institute NSW for the conference support.

The Australian and New Zealand Head and Neck Cancer Society Annual Scientific Meeting is the premier head and neck cancer meeting in Australia. It was the first time that this Scientific Meeting was held in a regional area as well as having a convenor who was an allied health professional, a physiotherapist. As head and neck cancer is a predominately surgical cancer, a number of sessions were focussed on the improvements in surgical techniques and treatments: radiation therapy. However, it was also great to see a large number of sessions focussed on the multidisciplinary approach with research studies lead by physiotherapists, speech pathologists, and psychiatrists.

The meeting had two highlight international speakers: Prof Anil D'Cruz from India and A/Prof Jorgen Johansen from Denmark who presented their experience from their own centres. They provided a different perspective, particularly since they were both from high-volume centres with long follow-up

data and established registries. These provided many interesting insights and sparked many discussions including a debate on whether we should be treating the elderly as well as treatment strategies (surgery vs radiation). Both debates did not have a clear winner with similar votes on both sides, illustrating the controversies and differing views on these topics.

A few interesting and surprising things that I learned during this conference were the disparities in outcomes for head and neck cancer patients. For example, they experience one of the highest rates of mental health issues of all cancers: 59.2% of patients will experience mental health issues within the first 12 months. Head and neck cancer also had the highest mortality gap between ATSI (Aboriginal and Torres Strait Island) and non-ATSI among all cancers, at 24%. ATSI patients were more likely to refuse therapy or not complete their therapy regimen with accessibility (rural location) postulated as a possible reason. Patients from low social-economic background were also found to have 10-20% worse survival outcomes in a study of the Danish registry. These inequalities support my liquid biopsy research approach where accessibility is pivotal to reducing this disparity. Through this conference, I have formed networks with researchers working in these rural/regional/ATSI areas to potentially explore potential collaborations as well as their advice in expanding the clinical impact of my research.

I had the privilege to present my research as an oral presentation. It generated quite a bit of interest where I was asked how my research could be expanded to other centres such as their own hospital in a regional area. It highlights the translational potential as well as illustrates the clinical importance of my research. After the session, several clinicians reached out to me wanting to know more as well as to collaborate.

This conference was a great opportunity to meet my study's clinical collaborators such as the surgeons, who provided us with blood samples from their patients, as well as the research coordinators/managers. We have only met virtually on zoom meetings so it was wonderful to finally meet them in person!

The conference was held in the heart of the Hunter Valley so was surrounded by beautiful scenery as well as lovely wineries. The conference dinner was held at a winery called, Calais Estate, in a room lined with wine barrels that were being aged. Along with lovely wines, a magician amazed diners with quick slight-of-hand card and disappearing magic trick, indeed a wonderful and entertaining dinner.

Finally, I would like to thank the Sydney Cancer Partners/Cancer Institute for their support to allow me to attend and present at this conference. I have learned a lot about this cancer which I had not known or fully appreciated. This opportunity has provided me with useful feedback on my current research as well as assisted in identifying the patient cohort where my research could have the most benefit and help reduce the outcome disparities observed in this cancer.