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Executive Committee Members:

Sabine Sarnacki (Chair, Programme Committee) Paris, France

Sajid Qureshi Mumbai, India

Paul Losty Liverpool, UK

Eiso Hiyama Hiroshima, Japan

Stephen Shochat (Past-President) Memphis, USA

IPSO Newsletter: February 2017

Dear Friends

Season greetings to all! 2017 has just begun. As we looked back at 2016, we had a very good annual congress in Dublin. We anticipate that the coming year will be filled with excitement as the plans for our calendar unfolds.

This newsletter includes:

- Changes to the IPSO Executive Council
- IPSO Webpage
- About 2017 Congress in Washington DC
- A review of the 2016 Congress, held in Dublin
- Minutes of the 2016 AGM
- Messages from your Secretary & President



The abstract submission deadline is 28 March 2017

Remember: Only paid-up IPSO members get a discounted rate

Once more IPSO is offering a Scholarship to help a member attend the Annual Congress Please turn to page 5 for details

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Renew Your Membership Today ! Log onto http://ipsosurgeons.org

Changes in the IPSO Executive Council

With the completion of the annual meeting in Dublin and the elections soon after, the Executive Council was reconstituted. We are happy to announce that:



Robert Shamberger (USA) has taken over as President of IPSO.



Stephen Shochat (USA) completed his term as President and will serve as Past-President this year.



Sabine Sarnacki (France) has been re-elected for a second term and will serve as the Chair of our Programme Committee.



Jörg Fuchs (Germany) will serve as our representative to the SIOP Scientific Committee. He also serves as Treasurer.



Eiso Hiyama (Japan) has been newly elected and will serve as member of the Executive Council.



We say *Thank-You* to these 2 wonderful individuals:

Simone Abib (Brazil) relinguished her position in the Executive Council after 4 years. She served as Chair of our Programme Committee and will continue as its co-chair in the coming year.



Piotr Czauderna (Poland) has completed his term as IPSO representative to the SIOP Scientific Committee (4 years).

Honorary Membership



Honorary Membership was awarded to Daniel Aronson and Larry Hadley for their significant contribution to our knowledge of paediatric cancer and the mission of IPSO. Larry was however unable to be present in Dublin.

IPSO Webpage

The IPSO webpage is up and running at <u>www.ipsosurgeons.org</u>. Please go to the webpage and obtain your log-in information. Only active members will be able to login. Once you login you will be able to access the members-only site which contains interesting educational material as well as a chat room. If you encounter any problems, pelase notify our webmaster Sajid Qureshi (sajidshafiques@hotmail.com). Feedbacks are welcome.

Renew your IPSO membership

A fiscal year is a period that we use for accounting purposes. IPSO's fiscal year is January 1 – December 31. Therefore members need to pay dues or subscriptions early every calender year. Members who pay dues timely will benefit from access to newsletters and members-only areas on IPSO website, reduced registration fees at annual meetings, voting rights and committee memberships. *So, please pay your dues today !* Log onto www.ipsosurgeons.org to renew your membership.

UPCOMING

IPSO Congress in Washington DC Oct 12-15, 2017



Highlights:

- Minimally invasive surgery in pediatric oncology
- Controversies in management of NRSTS
- Thyroid tumors in children

IPSO's annual congress will be held in Washington DC this year. It will be held in conjunction with the annual SIOP meeting. The congress will continue to have highlights in the IPSO Keynote Lecture, IPSO-SIOP-PROS joint symposium, Daniel Hays Surgical Skills Symposium, Problem Case Session and more. Details will be announced in due course.

Anthony Sandler MD is our local organizer who will be coordinating our congress activities.



You can contribute

by submitting your abstracts for presentation. Abstract submission is available online until March 28, 2017. Find out more at our IPSO website(<u>www.ipsosurgeons.org</u>), or you may also navigate through <u>www.siop2017.kenes.com</u>



Submit your abstracts in the correct ABSTRACT CATEGORY

If you would like your papers to be presented and discussed at the IPSO congress, make sure you submit your abstracts under "2. Discipline, Surgery (IPSO)".

DO NOT submit under "disease orientated" that will end up in other non-IPSO sessions.

Jesse Ternberg Scholarship 2017

Eligibility & benefits

In 2014 the IPSO Executive Committee launched the first IPSO scholarship. This has been named after Jesse Ternberg MD since 2016. It is intended to assist a young surgeon in attending the IPSO annual congress.

The scholarship will include:

- Free registration for the Annual Congress
- Up to €1500 towards travel and accomodation
- A ticket for the annual IPSO Dinner

To be eligible a surgeon must be aged 40 years or younger, must come from a low or low-middle income country, and must have an abstract accepted for oral presentation at the Annual Congress in Washington DC. The scholarship will be awarded to the eligible applicant who has the highest abstract score. Abstract scoring is entirely blind with regard to the author, so we believe that this will ensure fairness & transparency.

How to apply

We expect that surgeons who are submitting an abstract for the meeting will have the opportunity to register to be considered for the scholarship at the time of abstract submission, and it will be important to <u>send proof of eligibility to the IPSO secretary</u> at the same time to ensure that your application is valid.

LOOKING BACK

IPSO Congress in Dublin 2016



The 2016 IPSO Annual Congress was held in Dublin in October. The meeting was very successful, special thanks to Sri Paran (Dublin) and Alistair Dick (Belfast), our local organizers. The occasion started with an Education Day held on Oct 18, 2016 at the Royal College of Surgeons in Ireland, followed by the 2 days of annual congress held at the Convention Centre of Dublin.



IPSO Education Day Albert Hall, Royal College of Surgeons in Ireland





The IPSO Education Day was held on Oct 18, 2016 at Albert Hall, Royal College of Surgeons in Ireland. The program started off with a session on central venous access. Sri Paran (Ireland) dealt with the open central line access and difficult acess, while David Rea (Radiologist, Ireland) spoke on ultrasound guided access. Marc Wijnen (Netherlands) ended the session with a lecture on postoperative complication. After lunch, the second session of the day was on lymphoma. Cormac Owens (Ireland) gave an overview of lymphoma, while Phil Hammond (Scotland) lectured on open lymph node biopsies. Michael McDermott (Pathologist, Ireland) spoke on histopathology of lymph node biopsies. Finally, the day ended with a session on rare chest tumors in infants by Jonathan McGuiness (Ireland), rare abdominal tumours in infants by Sri Paran (Ireland), and Indications and contraindications of MIS in paediatric surgical oncology by Alistair Dick (Ireland).

IPSO Annual Congress Oct 19-21, 2016 The Convention Centre Dublin, Ireland





The IPSO congress kicked off with a large audience in Liffey A Hall. The day started with a session on Neuroblastoma. Daniel Hays Surgical Skills Seminar was immensely popular among the audience. Ed Kiely(UK) shared his words of wisdom in "Tips and tricks in advanced neuroblastoma surgery". He emphasized on the need for a good team, a meticulous surgeon who should also be dedicated in the postoperative care. Helene Martelli(France) shared her experience in bladder-slavage operation in Bladder/Prostate RMS, whilst Guido Seitz(Germany) spoke on the topic of radical resection in Bladder/Prostate RMS. Helen and Guido spoke on two different approaches in the management of this challenging group of patients.





The session on Renal Tumours saw at least 3 presentations that dealt with caval thrombosis with or without intracardiac extension. Nephronsparing surgery and long term renal function after uninephrectomy were also discussed. Problem Cases Session saw a large number of cases

being presented before a local interdisciplinary panel of radiation oncologist, radiologist, paediatric oncologist and paediatric surgeon. The cases were exciting and the audience participated actively.

Day 2 of the IPSO congress started with the Robert J. Arceci Best of IPSO session. We heard 4 highqualiy presentations of very different topics. E Hiyama (Japan) presented the Japanese experience in hepatoblastoma patients treated under the JPLT-2 protocol. H Martelli (France) presented her results on conservative surgery and brachytherapy for bladderprostate rhabdomyosarcoma in 100 children. HM Wang (China) presented a novel way of using microwave resection of liver malignancy in 320 cases. C Virgone (Italy) shared the data from the Italian TREP project on pheochromocytomas and paragangliomas in children. Following this exciting session was the next session on liver tumours and germ cell tumours.

In the afternoon, IPSO-PROS joint symposium on management of chest wall tumours was held. U Dirksen (Germany) provided the audience with a comprehensive overview followed by Bob Shamberger's (USA) "Surgical Techniques and



Chest Wall Reconstruction". M Krasin (USA) anchored this session with the role of radiotherapy in this group of tumours. The IPSO Keynote lecturer this year was Roly Squire (UK). He gave a very comprehensive lecture on Vascular Tumours of Childhood. His lecture was concise with many excellent pictorial illustrations. The next session was on rhabdomyosarocoma and miscellaneous topics. Besides presentations on

rhabdomyosarcoma, there were presentations on osteosarcoma, gastrointestinal posttransplant lymphoproliferative disorder, and haemangiomas.

On October 21, the IPSO-PROS-SIOP Symposium on Local Management of High Risk Neuroblastoma was held. A Laprie(France) shared on the current advances in neuroblastoma radiotherapy, whilst A Yoneda(Japan) shared on the Japan Neuroblastoma Study Group Trial on delayed local treatment for high risk neuroblastoma. It is interesting to hear a different perspective in the surgical management. Finally, T Simon(Germany) shared the oncologist's perspective and summed up the entire symposium.





Jesse Ternberg Scholarship 2016

This year's IPSO scholarship was awarded to Dr Aparajita Mitra (India). Her submitted abstract on "Evaluating urologic outcomes in the survivors of rhabdomyosarcoma bladder prostate: 14 year experience at a tertiary care centre" scored highest among the scholarship applicants.

Best Oral Presentation

This year's oral presentations were of very high standards. The judges decided that the best oral presentation award would be won jointly by Sharon Cox (South Africa) and Helene



Martelli (France).

Sharon (left) presented "Surgical management of 12 cases of Wilms tumor with intra-cardiac extension - a single centre experience".

Helene (right) presented "Conservative surgery and brachytherapy for bladder-prostate rhabdomyosarcoma: outcome and functional results for 100 children treated in a single institution"





Best Poster

Jonathan Karpelowsky (Australia) won the Best Poster presentation with his paper entitled "Elevated pre-operative neutrophil-lymphocyte ratio is predictive of poorer prognosis in paediatric solid tumours"

IPSO Dinner

Oct 20th, 2016 at Columba Suite, Spencer Hotel



The IPSO Dinner was held at Spencer Hotel, just 3 minutes walk from the convention centre. Its close proximity to the the scientific meeting allowed all of us sufficient time to catch-up with old friends and make new ones. The food was just excellent. Big thank-you to Sri Paran for the thoughtful arrangements.

Invited Reflections IPSO 2016 – Raising not just the bar by Aparajita Mitra

There are some moments in life which appear almost surreal because of either the magnitude of the event or the enormity of the cause. The cause for which we had all gathered in Dublin this October was childhood cancer and the participation was, to say the least, incredible.

What struck me most was a sense of kinship



which bound the crusaders, from those who deal with the clinical aspects of cancer in children to those who combat the more intangible manifestations of this disease. To be able to strike up a conversation about pediatric oncology with just about anybody and come away enthused and invigorated is perhaps one of the most wonderful opportunities this platform gives. But the best gift of all, one which is sadly elusive most of the times, is hope.

Hope, Optimism, Tenacity and Passion are the pillars on which our community stands. And they only reflect the qualities which are the hallmark of our little patients and their families. The thrill of seeing a "no residual disease detected" competes with the despair of "findings suggestive of recurrence" on an almost daily basis. But what trumps everything is the grim determination behind a "proceed for second line chemotherapy" or a "work-up for redo excision". While conferences such as these imbue the participants with a sense of purpose, they also force them to reflect on their current practice and raise numerous questions. It certainly provided me with a lot of food for thought and compelled me to take a long hard look at the current situation of pediatric surgical oncology in my country. I imagine delegates from other developing countries must have been similarly affected by the potential for change and growth in this particular field.

The multidisciplinary approach is deeply ingrained in my psyche having trained in one of the largest public sector hospitals in India. When the best of expertise can be distilled into a single plan of management, the patient wins. For example, it is heartening to be able to decide the ideal chemotherapy schedule with the medical oncologist and subsequently get a cardiothoracic surgeon on board for the excision of a large mediastinal tumour. The radiation oncologist then weighs in for the remainder of the local tumour control. Unfortunately, this degree of departmental integration is only available at a few centres, which greatly restricts the total number of children who can be treated in a resource challenged nation (RCN) like ours.

Limited resources translate into a long waiting list for essential services like radio-diagnosis and radiotherapy. Such lag periods before consecutive steps in the management of tumours are undesirable. One of the ways in which more centres can get involved with oncology is by orienting the pediatric surgical trainee to the diagnosis and management of children with solid tumours so that more than half the work-up has already been done at the grass root level prior to referral to a tertiary care centre. Encouraging the creation of tumour boards with medical and radiation oncology colleagues will ensure a holistic assessment of individual cases. The proliferation of hospitals with technical and academic expertise will certainly decongest the larger referral centres and streamline treatment.

A large percentage of the scientific content of the conference was contributed to by interinstitutional collaborative studies. The information gleaned from the large datasets so obtained is invaluable. The rarer tumours in particular can be analysed in great depth by collating information from various groups. Anecdotes and personal opinions cannot substitute for facts. Although meta-analyses are published regularly, multi-institutional studies allow us to go back to the data at will and possibly follow patients prospectively. Publications emerging from the developing countries would gain even more credibility and significance if they could emulate the oncology working groups in America and Europe.

Another area which would gain from large scale collaborative studies is tumour biology and race-specific behaviour. Much of how tumour cells interact with the immune system and evade destruction remains an enigma. It may be worthwhile to focus attention on the tumour microenvironment and the effect of genetic predisposition and environmental factors on the survival of the tumour cells. There are bound to be a multitude of differing observations from around the globe which will establish conclusively the role of racial origin in long-term survival. Such studies are quite expensive and the teaching institutions in the RCNs are often cash-strapped. One way around this is greater allocation of financial resources to the health sector which will translate into more funds for large scale studies at the apex institutes. It finally boils down to convincing governments about the magnitude of childhood cancer and its financial implications. The pre-pubertal and adolescent age-group now accounts for a majority of the population in many RCNs and requires a lot of investment in terms of health and education to plan for a healthy workforce in the future.

Governments often look to committees of experts for the final word on resource allocation. This means that in order to be heard, the community of pediatric cancer specialists should actively band together and form a structured national level organization. This is already happening in my country with the revival of the oncology subsection of the national association of pediatric surgeons. Interdigitating with the medical oncologists during short but intensive national level meetings at least twice a year will definitely go a long way in enhancing academics and speeding up the formulation of tumour-specific protocols. A national protocol is naturally more superior for comparing data with other countries when compared to a cacophony of disparate voices and opinions.

The world is rapidly shrinking and the advent of social media has allowed us to connect almost at the speed of thought. While conferences allow us to gather physically every year to

present the best of our research, technology has made it possible to share it with the click of a button. The sheer volume of information available on the web is staggering. A summary of the best of evidence-based medicine on a weekly basis is quite essential to keep abreast. One must laud the IPSO for building digital libraries for the current and future generations of pediatric surgical oncologists. Newer members should be encouraged to tap into these resources in order to share this knowledge with their students and colleagues.

As the conference drew to a triumphant conclusion this year, the IPSO dinner brought home the best of this group of surgeons. The warmth of the camaraderie and sparkling conversations helped cement old friendships and forge new bonds. As diverse as all of our backgrounds and ethnicities are, we are united by the fierce desire to deliver the best of care to our patients. It doesn't really matter whether one is more at home with a scalpel in hand or in an obscure laboratory trying to coax a flow cytometer to work, together we are truly more than the sum of our parts.



Album











































IPSO Business Meeting 2016: Minutes

Wednesday 19 October 2016: 17.00-18.00

Venue: The Liffey A Dublin Convention Centre Dublin, Ireland

Chair:Stephen Shochat, IPSO PresidentIn attendance:62 IPSO members

Agenda

- 1. Welcome
- 2. Minutes from the IPSO Business Meeting: held in Cape Town on 8 October 2015
- 3. Report from the President
- 4. Report from Programme Committee
- 5. Report from By-laws Committee
- 6. Report from New Members Committee
- 7. Report from Webmaster
- 8. Report from Education Committee
- 9. Report from the Secretary
- 10. Report from the Treasurer
- 11. Invitation to IPSO Washington DC 2017
- 12. Confirmation of new IPSO members
- 13. Awards
- 14. New Business
- 15. Transfer of Presidential Chain of Office
- 16. Adjournment

Minutes of Meeting

- 1. The President welcomed members to the meeting.
- 2. The minutes from the IPSO Business Meeting held in Cape Town on Oct 8, 2015 were agreed and signed off.
- 3. Report from the President:
 - a) Steve Shochat thanked Sriparan and Alistair Dick, our local organizers in Dublin, for an excellent job in making all the local arrangements for our Education Day and the IPSO meeting.
 - b) We remembered Drs Daniel Hays and Jessie Ternberg who passed away this year. A moment of silence was observed to remember these individuals who were instrumental in the birth and

development of IPSO. The surgical skills symposium has been named after Daniel Hays while the IPSO scholarship has been named after Jessie Ternberg.

- c) This year marks the 25th anniversary of IPSO.
- d) Steve thanked the Executive Committee for their contributions in past year.
- e) Steve highlighted the accomplishments and the future plans of the IPSO Executive Committee over the past year. These included:
- Accomplishments
 - Successful marketing plan. IPSO embarked on a marketing plan that had resulted in an increase in the number of new members. A record-high number of 46 new members joined IPSO in the past year. Members are reminded that the IPSO brochure can be reproduced online to be distributed to their colleagues.
 - Improved collaboration with SIOP Board. The EC had 2 meetings with the SIOP president in the past year. We were able to discuss issues cordially. We have made significant progress in our relationship.
 - Reorganization of the program committee. Our program committee has been reorganized and is chaired by Simone Abib. Her committee met regularly to produce this year's program.
 - Updated by-laws. The By-laws committee has made amendments to the document and the revised document has been sent out to the membership 2 months ago. A ballot will be expected in November to vote on the changes in the by-laws.
 - Launched New IPSO Webpage. The new IPSO webpage has bee launched and all members are encouraged to log-on and use the facilities available. These included the educational materials and the chat-room. If there are any problems with the access, members may contact Sajid Qureshi, our webmaster.
 - Establishment of Education committee. This is a new committee established and is chaired by Jan Godzinski. The committee has been tasked to look into educational opportunities.
 - Initiated 3-5 year strategic plan discussion. The EC has embarked on strategic plan discussion.
- Future direction
 - Continuation of Strategic Plan Project
 - Regional Education Program. One of the goals was for IPSO's presence in our continental meetings. In May 2016, Chan Hon Chui represented IPSO in the SIOP-Asia meeting.
 - We are planning fundraising initiatives and this will be shared with the membership in due course.
- 4. Report from the Program Committee: The program committee had the participation of more members with monthly conference calls. All the members of the committee reviewed and scored the abstracts received. The committee managed the program in Dublin and also in the upcoming meeting in Washington DC. It acted as the bridge to SIOP in joint symposiums. The Best of IPSO session consisted of abstracts with the highest scores. The APSA-IPSO symposium was held in San Diego this year. Simone, Andrea Hayes-Jordan and Max Langham worked together to come up with a program for the symposium. They partiticpated in conference calls, and the APSA cancer committee meeting. 270 attended the symposium which was a record high. Evaluation at the end of the symposium showed that 75% rated the symposium "excellent".
- 5. Report from the By-laws Committee: The revised document of the By-laws was sent to the membership a few months ago. Chan Hon presented the concept of creating a nominating committee before the elections of offices. This would include the 8 members of the EC and 2 non-EC active members. The latter 2 active members will have to be proposed and elected by the membership. The purpose of this new system would allow a multi-membered committee to nominate members rather than nomination by a single member. Piotr Czauderna raised his objection as this may mean that the EC, who has 8 members in the nominating committee, will

have more influence on determining which members may be nominated. Dan Aronson felt that the current system where every active member will have a chance of being elected to office was more democratic. The By-laws document will be put forward for online voting in November.

- 6. Report from the New Members Committee: Andrea Hayes-Jordan reported that the committee met once every 3 months. The committee members were tasked to recruit 5 new members each. It was also suggested that there should be monthly webinar, an international web-based forum for discussion of cases. This should also include the ability to show images. Media distribution for marketing including electronic and paper dissemination, handout cards for annual paediatric surgery meetings in member countries, and social media blasts during the annual meeting and during the year were suggested. There should be better communication around the Education Day.
- 7. Report from the Webmaster. Sajid presented the new webpage and the login procedures. Those who have not logged-on are encouraged to do so. Once the passwords have been requested, it would take up to 48 hours for the passwords to be processed. Technical support is available 24/7.
- 8. Report from the Education Committee: Jan Godzinski reported that his committee has members from eastern and western Europe, Asia, both Americas and Africa. There were 3 calls for ideas, work-up of feedback and reports to EC in the past year. 3 proposals were submitted: (1) a web-based consultation platform for young doctors, (2) organisation of professional visits to leading centres in paediatric oncology for young specialised surgeons, and (3) preparation of educational videos on classical oncological operations (internet-based).
- 9. Report from the Secretary. The IPSO scholarship (2016) has been awarded to Dr Aparajita Mitra from India. Her abstract scored highest among a list of scholarship contenders. This year, we saw a record-high number of new members (46) and our membership now has 181 registered members. A membership report prepared by Kenes was presented. Two positions in the EC are due for elections. They include Sabine Sarnacki who will be due for re-election for a second term, and another vacancy as Simone Abib completes her term this year. The nominees for this position are Dr Eiso Hiyama (Japan) and Dr Marc Wijnen (Netherlands). Their CVs will be sent to eligible voters together with the online voting notifications.
- 10. Report from the Treasurer. Joerg presented the financial report Oct 1, 2015 to Oct 1, 2016.
 IPSO has a "Capital" of 34,923.09€. "Incomes" from membership fees 2015 amounted to 8944.87€. "Expenses" from membership dues 2235€, IPSO best oral paper 300€, cost of banking 321.78€, and notary costs for EC member 202.36€. We have a positive balance of 5885.70€ before this year's Dublin meeting expenses.
- 11. Next year's IPSO congress. The IPSO local organisers for next year's annual congress in Washington DC were unable to come to Dublin.

The following 46 new members were presented:	
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Lisa VanHouwelingen (USA) Waldo Concepcion (USA) Khalid Elmaik (UK) Deepak Mittal (India) Roshni Dasgupta (USA) Shuichiro Uehara(Japan) Bhanumathi Lakshminarayanan(UK) Akihiro Yoneda (Japan) Stefan Pokall (Austria) Noel McLennon(Jamaica) Tomoro Hishiki (Japan) Basant Kumar (India) Anjan Dhua (India) Richard Glick (USA) Matthew Krasin (USA) Denise B Klinkner (USA) Max Pachl (UK) Anna Borjesson (Sweden) Shahab Abdessalam (USA) Clare Rees (UK) Rebecca Stark (USA) William Murcia (Colombia) Tsugumichi Koshinaga (Japan) Tamas Budi (Hungary) Nicolas Jauquier (Switzerland) Monica Bhagat (India) Tamas Prokopp (Hungary) Anthony Sandler (USA) Derek Harrison (SA) Andrew Murphy (USA) Cornelis van de Ven (NL) Sabine Irtan (France) Bibekanand Jindal (India) Marat Grygorian (Ukraine)

Israel Fernandez/Aaron Seims Rebecka Meyers/Piotr Czauderna Stephen Shochat/Andrew Davidoff Sandeep Agarwala/Sajid Qureshi Rebecka Meyers/Dave Rodeberg Eiso Hiyama/Tatsuro Tajiri Robert Wheeler/Edward Kiely Eiso Hiyama/Tatsuro Tajiri Jan Goedeke/Joerg Fuchs Jean-Martin Laberge/Joseph Murphy Daniel Aronson/Eiso Hiyama Sandeep Agarwala/Sushmita Bhatnagar Sandeep Agarwala/Sajid Qureshi Jed Nuchtern/Peter Ehrlich Andrew Davidoff/Stephen Shochat Jed Nuchtern/Chan Hon Chui Paul Stevens/Kiely Edward Kristin Bjornland/Sharon Cox Robert Shamberger/Peter Ehrlich Kate Cross/Keith Holmes Ken Gow/Rebecca Meyer Chan Hon Chui/Simone Abib Tatsuro Tajiri/Eiso Hiyama Zoltan Jenovari/Piotr Czauderna Jim Wilde/Jean-Marc Joseph Sajid Qureshi/Sandeep Agarwala Zoltan Jenovari/Piotr Czauderna Stephen Shochat/Andrew Davidoff Sharon Cox/Larry Hadley Stephen Shochat/Andrew Davidoff Marc Wijnen/Sheila Terwisscha van Scheltinga Stephen Shochat/Jan Godzinski Sandeep Agarwala/Sajid Qureshi Andrew Ryabov/Jan Godzinski

- 13. Awards. The following awards were presented: (a) Honorary Memberships to Daniel Aronson and Larry Hadley, (b) Award of Recognition was given to Simone Abib for her contribution as EC member and Program Chair, (c) Award of Recognition was given to Piotr Czauderna for his contribution as the IPSO's representative to the SIOP Scientific Committee.
- 14. Transfer of Presidential Chain of Office. Steve Shochat handed the presidency to Robert Shamberger. Steve has made multiple significant contributions to transform IPSO in the past years. These included the new legal status as a charity, the formation of subcomittees to promote inclusiveness, increasing the participation of more members in IPSO's activities. A momento was presented to Steve in recognition of his contributions as president.
- 15. New Business
- 16. The meeting was adjourned at 1800hrs.

Secretary's Corner

It has been a great privilege to have been through the first year as your secretary. Being part

of the Executive Council and Programme Committee that organized the Dublin meeting was a very satisfying experience. I hope all of you have enjoyed the meeting as much as we have.

We look forward to your active participation in the upcoming meeting. Mark your calender, submit your work, and remember to register for the meeting early. I continue to look forward to your comments and feedback. Please feel free to contact me at secretary@ipsosurgeons.org.

Chan Hon Chui Secretary, IPSO

President's Corner

Robert Shamberger President, IPSO