ESTRO

Presidential Election 2022
Interview with Yavuz Anacak
Ege University Faculty of Medicine & Hospital
Izmir, Turkey

1. **What is your vision of radiotherapy? Does the strategy of the European SocieTy for Radiotherapy and Oncology (ESTRO) resonate with your vision and your perspective for the future?**

I prefer using the term "radiation oncology" over "radiotherapy" to define my vision for our profession; I am an "oncologist" who treats cancer patients with radiation. The members of ESTRO - radiation oncologists, medical physicists, radiation biologists, dosimetrists, nurses and radiation therapists - all belong to the medical discipline of "radiation oncology". Radiotherapy is the visible process of an extraordinarily rich and sophisticated science that operates hidden behind a curtain and which is mostly unknown to other medical specialities and the public. We know fundamentals of molecular oncology, nuclear sciences, chemotherapy, immunotherapy, endocrine therapy, oncologic surgery, medical imaging and cancer pathology more than the specialists in these areas know about radiation oncology. In the book titled *The Ultimate Guide to Choosing a Medical Specialty*, Stephanie Weiss from Harvard describes radiation oncology as "*one of the best kept secrets in medicine*" that "*remains poorly understood, even by other physicians*". We should change this perception and move our excellent science from behind to the front of the curtain, into a position that will keep our discipline as an indispensable oncologic speciality.

ESTRO's new vision statement for 2030, "*Radiation Oncology: optimal health for all, together*" reflects the global vision of a European Society in which "*radiation science from research to practice, a strong profession, a strong society and strong partnerships*" are the main pillars, and which is described by ESTRO as "*ambitious, expansive, inclusive and open to the future*". This is a correct strategy that I support wholeheartedly, and I believe it is supported by all members of the Society, from the most junior member to the president.

ESTRO's vision for the next decade also matches exactly the universal values of the 2030 agenda of the United Nations: "*leave no one behind*". We should find ways to provide optimal care for all cancer patients globally, and ESTRO should be among the drivers of this journey.

2. What do you perceive to be the most pressing issues or challenges of ESTRO as a radiation oncology society today?

Radiation oncology is a speciality that uses the most advanced medical equipment and software. Unprecedented achievements in technology have provided us with various tools to use for planning and treatment, while brilliant advances in molecular oncology have helped us to improve our understanding of tumour biology. Today we apply radiotherapy with more confidence, cause fewer and less serious side effects and provide higher treatment success than we did in the early days. We have expanded the use of radiotherapy to the treatment of liver and lung metastases, oligometastatic disease and early-stage prostate and lung cancers, which were not in our domain previously. This performance has brought us to a more prestigious position than before. However, technology comes at a considerable price; extensive investment is required to install new equipment, which requires painstaking quality control measures to ensure its successful operation. We need extensive research and continuous training to translate the data from the basic science into our daily practice. I believe that a typical radiation oncology staff member will require more training in the future than they do today, and we should plan comprehensive education and training programmes to keep everybody updated and "*inside the circle*".

3. If you are elected ESTRO president, what will be your goal(s) or the focus area for your term? What priorities would help you to achieve them? What barriers could be in your way?
How do you envision the future of the interdisciplinary aspect of our Society?
How do you envision the future of the multidisciplinary aspect of the oncology field and ESTRO positioning on that matter?

My top priority will be raising the quality and standards of our speciality to a higher level than we currently achieve. This includes enhancement of the capacity of the radiation oncology workforce through provision of in-person and online training programmes, support for translational research, implementation of new technologies in daily practice, and keeping an active oncopolicy programme that enables access for all stakeholders to

support the position of radiation oncology. ESTRO is a pan-European society; however, as in many other European issues, there are geographical, cultural, economic and political invisible lines that run east-west and north-south. This is a challenge we must overcome. It will be among my priorities to increase and harmonise all members' participation in and contribution to ESTRO activities. I strongly believe that every member should feel that he/she is a part of ESTRO and should not feel left behind.

We are not the only oncology speciality that has benefited from recent scientific advances. Brilliant surgical methods and new equipment have provided better surgery with fewer complications, and targeted drugs and immunotherapy have lifted systemic cancer therapy to unprecedented levels. Treatment of a cancer patient is more individualised today than before and requires a team effort that is reflected through multidisciplinary management. These main oncology disciplines should not compete with or challenge others. Instead, they should work together to find the best treatment for each cancer patient. Radiation oncology should continue to hold a strong position among oncology specialities, and ESTRO, which is among the strongest representatives of radiation oncology globally, should continue to be the flag carrier of the radiation oncology community.

4. In your opinion, is ESTRO doing enough to improve patients' outcomes?

From the first day of its establishment to today, improvement of patient care has always been the number one priority of ESTRO. All our science and efforts are targeted to improve patients' outcomes; longer survival times, better palliation and reduced side effects are constant goals, and these principles are best reflected in the ESTRO 2030 vision: *"tailor radiation therapy towards the needs of every individual patient*".

5. Why should ESTRO members vote for you as next president? Why did you decide to run for this position?

My career in radiation oncology has spanned three decades. When I started in this profession, I used cobalt machines and simple 2D planning. I have witnessed all the major achievements of radiation oncology, from conformal treatment to stereotactic body radiotherapy, from cobalt to magnetic resonance linear accelerators, from the linear quadratic model to hypofractionation. My involvement with the International Atomic Energy Agency (IAEA) and my presidency of the Turkish Society for Radiation Oncology

(TROD) have provided me with different visions regarding the challenges of radiation oncology at the national, regional and global levels. Besides my research and teaching activities, I am experienced in capacity building, health economics, oncopolitics, and the planning and execution of in-person and online scientific and training events. I strongly believe that I am capable of being the president of ESTRO and of directing the Society to reach the goals of the ESTRO 2030 vision.

6. Could you tell us about your current and past involvement in ESTRO? What made you become involved in the first place?

I was a first-year radiation oncology resident when I attended the ESTRO training courses. I wrote a letter to ESTRO to seek financial support to participate in the ESTRO physics course in Leuven; I still remember the day I received the letter that offered me a travel grant amounting to 300 European currency units (which preceded the Euro), signed by dear Germaine Heeren. Since then, I have always retained close contact with ESTRO, believing that "*if I get something from someone, I should give more in return*", to enrich it and to create a butterfly effect. I supported the participation of young radiation oncologists, medical physicists and radiation therapists in ESTRO events and courses through generous grants from the TROD and the IAEA. ESTRO is the common ground of radiation oncology in Europe and every worker in radiation oncology on this continent should be a part of it.

I have been the TROD representative in ESTRO since 2012, which has given me opportunities to participate in many ESTRO activities, including policy meetings and national society days; also, I am the local organiser of ESTRO courses in Turkey.

7. On a lighter note, what do you like to do for fun?

I consider myself to be an advanced amateur photographer; I focus on nature and daily-life photography. My most enjoyable moments occur when I travel in and photograph antique cities of Turkey. I also enjoy collecting old maps and engravings on specific subjects.