ESTRO

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ESTRO background

I have been an ESTRO member for about 20 years, my main roles are summarised below:

ESTRO School:

- Teacher for the Multidisciplinary Management of Breast Cancer(2012-present), Haematological malignancies (2017-2019), Stereotactic Body Radiotherapy (2012-2014),
- Co-director (with Coen Rasch) for the Image-guided Radiotherapy course (2012-2018).

Teaching on ESTRO courses has been (and still is!) one of the most rewarding experiences I have had: in my opinion, multi-disciplinary education is one of the major strengths of ESTRO, and I am committed to ensuring the representation of physics in multidisciplinary courses.

Other roles:

- 2021-present: Mentor for the young ESTRO mentoring programme
- 2020-present: Physics Editor for Radiotherapy & Oncology
- 2019-present: Member of the Physics Committee
- 2019-present: Co-founder and chair of the Women in Physics group
- 2018-present: ESTRO representative on the Council of Cardio-Oncology created by the European Society of Cardiology

I have also recently joined the ESTRO-HERO initiative on health economics in radiotherapy.

Experience

Education:

2005	PhD in Physics from the Niels Bohr Institute, University of Copenhagen
2000	MSc in Medical Radiation Physics from McGill University, Montreal, Canada
1997	BSc from the National Institute of Applied Sciences (INSA), Rouen, France

Positions:

2017-pres.	Senior Lecturer, Radiotherapy Related Research, University of Manchester and Honorary Physicist, The Christie NHS Foundation Trust
2017-2021	Associate Professor, Nuffield Dpt of Population health, University of Oxford
2009-2016	Senior Research Physicist, Dpt of Oncology, Rigshospitalet, Denmark

2006-2009	Clinical Medical Physicist, Dpt of Radiation Oncology, Rigshospitalet, Denmark
2005-2006	Clinical Medical Physicist, Dpt of Radiation Oncology, Herlev, Denmark
1999-2001	Medical Physics resident, Sunnybrook Cancer Center, Toronto, Canada

I worked in the clinic for many years after my PhD, then gradually moved more and more towards research. My main clinical focus was image-guidance and motion management, especially Deep Inspiration Breath Hold in patients with breast cancer and Hodgkin Lymphoma. As part of this work, I spent a lot of time interacting with patients (training and coaching them to achieve a reproducible breath hold levels) and with RTTs at the treatment machine. In 2017, I moved to Manchester to work with Marcel van Herk and started my own group focusing on the late effects of radiotherapy, especially in childhood cancer, breast cancer and Hodgkin lymphoma. Though I do miss clinical work sometimes, I find working with young scientists of diverse backgrounds (physicists, RTTs, oncologists, but also biologists, radiologists and dentists!) immensely rewarding and I do still get to work closely with the clinical team.

Personal

I live in Manchester with two daughters (18 and 15 years old), and my husband, who works in vaccine research. I feel very grateful that they are still speaking to me after I made them move multiple times while chasing my dream job. I enjoy hiking, strength training, and curling up on the couch to watch old sci-fi movies with my family. I really (really) don't enjoy running but it does wonders for my stress levels so I still reluctantly do it (uh).

Election statement

Working in different countries gave me the opportunity to see the variations in the role and scope of practice of medical physicists. One fact didn't change: physicists are the drivers of technical innovation in the clinic. With the introduction of artificial intelligence in the clinical pathway, the role of the medical physicist will evolve: I see our next challenge as driving this evolution while ensuring the "roots" of medical physics (e.g. dosimetry, QA) are preserved.

Multi-disciplinarity is at the core of ESTRO. I am keen to support new ways to strengthen this, e.g. the new ESTRO physics workshops co-led with RTTs and Radiobiologists. I also aim to strengthen our links with EFOMP and AAPM, working together to close the gaps between research, first implementation and routine clinical use.

Though my current position is research-based, I believe my years clinical practice put me in a strong positon to advocate for all medical physics, and to never forget that even the most sophisticated innovations will be useless if they don't reach our patients. If elected to the board, I promise to bring all my energy to represent all physics members in the full breadth of our profession.