

## **PRESIDENTIAL ELECTION 2020**

### **Interview with Jana Jaal**

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#### **1. What is your vision of Radiotherapy? Does ESTRO's strategy resonate with your vision and your perspective for the future?**

ESTRO team, including current and past presidents, has done a tremendous work to create a new strategic vision. ESTRO vision 2030 clearly resonates with my vision, since it includes parts that are important for me, such as research, education as well as the wish to widen the scope of radiotherapy. Along with activities that are in line with ESTRO strategic vision, I would simply put more emphasis on fields I feel I can improve using my previous knowledge and experience.

#### **2. What do you perceive as the most pressing issues or challenges of ESTRO as a RO society today?**

ESTRO has three pressing issues that have to be addressed in following years: understanding regional differences, the changing role of radiotherapy and widening the scope of radiotherapy. Although it may seem similar on a larger scale, every European country has differences and therefore distinct needs and possibilities to fulfill ESTRO strategic priorities. For example, measures that ESTRO can offer to support educational activities may be different for Eastern-European and Western-European countries. Here I also see clear possibilities to plan and undertake collaborative actions with national societies and International Atomic Energy Agency.

It is also important to adapt with the changing role of radiotherapy. Nowadays, radiotherapy is not only an important curative treatment modality in local/locoregionally advanced disease, but it is also being incorporated into the management of metastatic cancer. Moreover, radiotherapy is more frequently administered in combination with systemic treatments, including immunotherapy. I especially believe that the combination of radiotherapy and immunotherapy will have a profound impact on cancer care, showing the need for extensive research and education from radiobiology to clinical management of cancer.

Lastly, radiotherapy is not just a dose we deliver and the way we deliver ionizing radiation. Radiotherapy should be a part of broader practice of oncology that includes early detection of the disease, effective treatment of cancer with minimal side effects, optimal follow-up as well as the need to deal with issues, such as ageing, increasing incidence of cancer and higher proportion of patients with multiple cancers. Therefore, it is important that ESTRO would not concentrate only on technical and clinical aspects of radiotherapy delivery but also guides activities that are important in whole cancer care.

**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 achieve them? What barriers could be in your way?**

My activities would be clearly in line with ESTRO strategic vision 2030. Within this, my goal is to collect and analyse information on regional differences. By knowing needs and possibilities of different regions and countries in detail, more effective measures can be developed to support and strengthen ESTRO activities, including research, education and all aspects of oncopolicy. To succeed, close collaboration with national representatives and societies, universities and patient groups is needed. By prioritizing patients, there should not be any barriers to do that.

**How to do you envision the interdisciplinary aspect of our Society?**

ESTRO has been for a long time a joint society for radiobiologists, technicians, radiation oncologists and physicists. It is reasonable, since radiotherapy is based on extensive radiobiological research and the delivery of radiation is a team-effort. Nevertheless, being a clinical oncologist and having training in both radiotherapy and medical treatments, I feel that topics related to medical treatments can be better addressed in our society. Latter is also important for other ESTRO specialties, since increasing proportion of patients receive radiotherapy concomitantly with systemic treatments and immunotherapy.

**How do you envision the multidisciplinary aspect of the oncology field and ESTRO positioning on that matter?**

Radiotherapy should be a part of broader practice of oncology that includes early detection and treatment of cancer as well as follow-up of cancer patients. Taking into consideration the increasing use of radiotherapy in all stages of cancer, numerous finished and ongoing clinical trials that combine radiotherapy with systemic treatments and immunotherapy, it would be more logical if ESTRO would take stronger initiative in all aspects of cancer care.

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

ESTRO has already done a lot to improve patients' outcomes. ESTRO HERO project and ESTRO strategic vision 2030 are just some recent examples of that. Nevertheless, patients' outcomes are influenced on a number of things that precede (e.g. early detection, waiting times) or follow the delivery of radiotherapy (optimal follow-up procedures, early detection of recurrences, multiple cancers). To succeed, all these aspects of cancer care should be optimal and here I see the room for improvement.

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

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I am very grateful to prof. Umberto Ricardi who asked me to think about the possibility to run for this position.

Up to today, I have been involved in different areas of oncology, such as teaching, research, clinical work and oncology. During last years, I have also gained experience in general health care management being council member of Tartu University Hospital net-hospitals and organizing cancer care not only in one hospital but in the whole region. Due to a broad range of experience, I feel that I have something that I can share for the benefit of our society and all cancer patients in Europe.

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

I have been involved in ESTRO since 2002. ESTRO21, held also in 2002, was the first international conference in my life where I presented the first results of my PhD studies on radiation-induced side effects in the urinary bladder. After intensive animal *in vivo* studies on radiation-induced urinary bladder dysfunction, I was awarded ESTRO/VARIAN Research Award in 2006, which has been one of the most remarkable acknowledgements in my life so far. Subsequently, I have been actively involved in ESTRO activities up to today, participating in clinical radiotherapy committee and different scientific, advisory, program as well as abstract reviewing committees of ESTRO conferences.

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

I like to listen to music. The last event I really enjoyed was a Festive Advent Concert at the Frauenkirche Dresden. This was an emotion filled with good music and nice memories from the city I lived during my PhD studies.