EDITORIAL - BREAST ONCOLOGY



## 23rd Annual Meeting of the American Society of Breast Surgeons: Back to In-Person Scientific Exploration

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Welcome back to in-person meetings for the American Society of Breast Surgeons (ASBrS) and what better place to gather than Las Vegas, NV, which has always been one of the most popular destinations. Fortunately, our meeting came at a time of a lull in the coronavirus disease 2019 (COVID-19) numbers, allowing our members to participate in-person and to see old friends after 3 years. The in-person attendance for the Society's 2022 annual meeting was 1393 attendees, which included 89 international attendees representing 25 countries. As of today, an additional 235 attendees have participated in the Online Experience. This year we had 285 scientific abstracts submitted. We accepted 12 oral presentations and 8 quick shots as well as 234 posters. Due to the large venue, we were able to accommodate a broad representation of our membership to attend the meeting, exchange ideas, and showcase their research. New to this year, the Social Media Subcommittee of the Publications Committee organized by Drs. Mediget Teshome, Chandler Cortina and Puneet Singh tweeted out the scientific sessions.

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## **GENERAL SESSION HIGHLIGHTS**

The theme of this year's program was the patient experience, which took us from breast cancer prevention to survivorship. This content was centered by an engaging, heart-warming, and educational patient-perspective session. As in years past, we maintained a focus on surgical innovation, especially related to the significant changes in healthcare over the past 2 years. The John Wayne Cancer Institute's Critical Issues in Breast Cancer Forum addressed impacts of screening and surgical delays, COVID-19 and timing of multigene assays, and same-day mastectomy. The Surgical Innovation Forum reviewed management of inflammatory breast cancer, the role for surgery after neoadjuvant care, surgery for stage IV disease, and supraclavicular and contralateral axillary disease management. With a focus on the value of delivering care, we also featured presentations on decreasing costs in our practice and de-escalation of therapy. Not surprisingly, the great debates did not disappoint! We witnessed entertaining and informative discussions of axillary surgery (is it obsolete?) and the use of neoadjuvant endocrine therapy.

The ASBrS President, Dr. Julie Margenthaler, delivered an eloquent presidential address on her career as a breast surgeon and member of the ASBrS.<sup>1</sup> We were thrilled to welcome one of her mentors in this path, Dr. V. Suzanne Klimberg, to deliver our Keynote Address. Dr. Klimberg, an innovative and accomplished surgeon, discussed "When is Local Therapy Enough?".<sup>2</sup>

The meeting finished with some dynamic sessions on survivorship, creating longevity for breast surgeons, and the always popular topic of benign breast disease. Will we revisit some of these next year? You bet!

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## ORAL AND SCIENTIFIC SESSION HIGHLIGHTS

Congratulations to all the participants in our scientific sessions. We had great representation in many areas of breast cancer surgical treatment. This year, the George Peters Award for the best abstract presented by a breast fellow was presented to Dr. Christina Pestana from the Levin Cancer Institute in Winston-Salem, NC, for her paper titled "Young Women with Breast Cancer: Does Surgical Approach Impact Overall Survival?". This paper highlighted the oncologic safety of breast conservation even in young women who traditionally have sought more aggressive treatment. The Outstanding Scientific Presentation Award for the best paper presented by a medical student, resident, or fellow was awarded to Dr. Anna Chichura, a fellow from the NorthShore and University of Chicago in Evanston, IL, for the paper entitled "The Male WhySurg Study: Patient and Surgeon Experience", an innovative survey conducted on surgeons and male breast cancer patients highlighting breast conservation is the preference for men as well as women.<sup>3</sup> The Scientific Impact Award for the best paper, as voted on by the audience, was awarded to Dr. Giacamo Montagna from Memorial Sloan Kettering Cancer Center in New York, NY, for his paper entitled "Is Nodal Clipping Beneficial for Patients Receiving Neoadjuvant Chemotherapy?".<sup>4</sup> This paper suggests that as long as a thorough sentinel node procedure is performed, including excision of more than three sentinel nodes with utilization of dual tracer, this approach is oncologically safe even if the clipped node cannot be located intraoperatively in patients who had positive nodes prior to neoadjuvant therapy. The Best Poster Award was given to Dr. Rachel Sargent, a general surgery resident from the University of Southern California Keck School of Medicine in Pasadena, CA, entitled "Risks and Benefits of Routine Breast MRI in Addition to Digital Breast Tomosynthesis in Patients With Newly Diagnosed Breast Cancer", showing routine breast MRI identifies additional disease but more often has a high false positive rate.

This year we were able to present results from surveys vetted by the research committee and completed by the ASBrS membership. We had an oral talk presented on "Margin Management and Adjuvant Therapy for Phyllodes Tumors: Practice Patterns of the American Society of Breast Surgeons Members", presented by Dr. Emilio Diego and demonstrating a high variability in practice patterns raising the prospect of a future registry<sup>5</sup> Other invited manuscripts from our scientific sessions focus on breast conservation, such as a meta-analysis showing improved survival with breast conservation and the economic impact of breast re-excision.<sup>6</sup> Included in this issue are papers on breast imaging, such as text-based intervention to improve

screening,<sup>7</sup> accuracy of contrast-enhanced digital mammography,<sup>8</sup> and abbreviated MRI for screening.<sup>9</sup> Additionally, we had papers exploring aspects of breast sensuality in survivors and sexual health education.<sup>10,11</sup> Lastly, we had several papers examining axillary response to neoadjuvant treatment in the age of tumor genomic testing supporting de-escalation of axillary surgery in situations where it may not impact adjuvant treatment decisions.<sup>12,13</sup>

Despite these turbulent times during the COVID-19 pandemic, the science of breast cancer surgical treatment continues as we study ways to refine our techniques and indications in the face of unforeseen challenges and improve surgical treatment for patients. We never stop asking questions and studying the answers. This issue deals with a wide array of topics for surgeons who treat breast cancer.<sup>14–34</sup> Lastly, we want to thank the members of the Publication Committee for reviewing abstracts and diligently reviewing the ensuing manuscripts to produce what we believe is an excellent and thought-provoking October issue of *Annals of Surgical Oncology*.

**DISCLOURE** Carla S. Fisher, Mediget Teshome, and Sarah L. Blair have no disclosures to declare.

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