

Meeting Report



The 1st Indonesian Society Gynecologic Oncology Scientific Meeting (INASMEET), November 12th to November 13th, 2022

Tricia Dewi Anggraeni 🕞,¹ Brahmana Askandar Tjokroprawiro 🕞 ²

¹Division of Gynecologic Oncology, Department of Obstetrics and Gynecology, Faculty of Medicine Universitas Indonesia, Jakarta, Indonesia

²Department of Obstetrics and Gynecology, Medical Faculty, Universitas Airlangga, Surabaya, Indonesia



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Correspondence to

Tricia Dewi Anggraeni

Indonesian Society of Gynecologic Oncology, Jl. Diponegoro No. 71, Jakarta 10430, Indonesia. Email: anggi73@gmail.com

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ORCID iDs

Tricia Dewi Anggraeni (D)
https://orcid.org/0000-0002-8876-3138
Brahmana Askandar Tjokroprawiro (D)
https://orcid.org/0000-0003-1658-3477

Conflict of Interest

No potential conflict of interest relevant to this article was reported.

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INTRODUCTION

The Indonesia Society of Gynecologic Oncology (INASGO) held its 1st Indonesian Society Gynecologic Oncology Scientific Meeting (INASMEET) under the theme of "Breaking the Boundaries in Gynecology Cancer Care" as an international hybrid event in Stones Hotel Bali, Indonesia from 12th to 13th November 2022. This meeting was convened in conjunction with the *Journal of Gynecologic Oncology (JGO)* editorial board meeting of the official journal of the Asian Society of Gynecologic Oncology. It was a 2-day symposium that became the first offline conference meeting of Indonesia Society of Gynecologic Oncology after the coronavirus disease 2019 (COVID-19) pandemic. It was part of several meeting events organized by INASGO prior to our biennial meeting.

This meeting aimed to provide and elucidate the latest management in gynecologic cancer based on scientific research and to utilize Indonesian big data as a part of research that could be acknowledged in Asian society. From the various sections that we offered, we tried to give an overview of different various sides of research and updates, such as comparative studies, not only for gynecologic oncologist but also for general gynecology field especially in the future.

Our symposium was held at one of the most beautiful places on Earth, Bali (**Fig. 1**). Despite the intense program, we hoped that participants were able to get a glimpse of the Island of the Gods and enjoyed the conference while exchanging ideas.





Fig. 1. Bali, Indonesia.





Fig. 2. Dr. Tricia Dewi Anggraeni, Dr. Brahmana Askandar Tjokroprawiro, and Dr. Yudi M Hidayat (left to right).

Four hundred seventy-two general gynecologists and general practitioner from all around Indonesia joined the meeting. The farthest area of participants joining this event came from Aceh (Sumatra), Lombok (West Nusa Tenggara), and Fak Fak (West Papua). There were also some participants coming from Singapore. In addition to that, there were 108 gynecologic oncologists from 24 provinces in Indonesia, as well as representatives from Korea, Singapore, and the Netherlands who attended the meeting as the participants and speakers.

The event was filled with various exciting and updated topics from national and international speakers, which focused on gynecologic oncologist, general gynecologist, and general practitioners. There were 67 lectures within 22 sessions. The meeting provided participants the opportunity to be updated on cutting-edge innovations in medicines of gynecologic oncology and various other topics from pioneers and experts in the subject to improve their daily practice and their surgical techniques and skills.

In the opening ceremony, Dr. Brahmana Askandar Tjokroprawiro as the president of INASGO, Dr. Yudi M. Hidayat as the president of Indonesian Society of Obstetrics and Gynecology and Dr. Tricia Dewi Anggraeni as the chairperson of INASMEET delivered the opening remarks. This was continued by Professor Jae-Weon-Kim from South Korea as the president of Asian Society of Gynecologic Oncology (ASGO), Dr. I Made Sudarmaja as a representative of the Indonesian Medical Doctors Association of Bali who joined the count down at the stage by pressing the opening button to officially start the event (**Figs. 2-4**).



Fig. 3. Countdown of the opening ceremony of the 1st INASMEET (Professor Jae-Weon-Kim, Dr. Brahmana Askandar Tjokroprawiro, Dr. Yudi M Hidayat, and Dr. I Made Sudarmaja). INASMEET, Indonesian Society Gynecologic Oncology Scientific Meeting.





Fig. 4. Committee and speakers at the opening ceremony.

SCIENTIFIC SESSIONS

During the scientific programs, sessions were divided into two categories. One being Gynecologic Oncology session and the other General Gynecology session (**Figs. 5-8**).

1. Gynecologic Oncology section

The Gynecologic Oncology section had 12 sessions and 38 diverse topics, with four international and 10 local speakers on the first day. Dr. Wong Chiung Ing from Singapore spoke about the "Concept of Maintenance Therapy in Ovarian Cancer: Digging into Molecular Characterization of High-grade Ovarian Cancer." Her topic concluded that poly (ADP-ribose) polymerase inhibitor (PARPi) with niraparib was recommended as a first-line treatment and olaparib for the patient with tumor breast cancer gene (tBRCA) mutations and olaparib plus bevacizumab should be considered for patients with tBRCA mutations and/or genomic instability if they have responded to bevacizumab plus chemotherapy.









Fig. 5. Indonesian and Korean speakers.







Fig. 6. Scientific sessions.





Fig. 7. Tumor board. On the screen: upper left, Professor Rene H M Verheijen (The Netherland); upper right, Dr. Joseph Ng (Singapore); lower left, Dr. Yuri feharsal (Indonesia); lower right, Dr. Tantri Hellyanti (Indonesia). Cochaired by Dr. Tofan Widya Utami, Dr. Brahmana Askandar Tjokroprawiro, and Dr. Dong Hoon Suh.



Fig. 8. JGO session.

Moreover, single-agent PARPi was recommended to patients with no prior PARPi exposure, regardless of BRCA mutation status, for second-line treatment, for patients who were a response to platinum-based chemotherapy. Additionally, Professors Els Witteveen, who discussed "Bevacizumab in the Maintenance Therapy of Ovarian Cancer: Bevacizumab, Olaparib, or Combined," emphasized that, even though a combination therapy of olaparib and bevacizumab for tBRCA mutations and/or genomic instability increased the progression-free survival (PFS) based on results of the PAOLA-1 trial, the therapy itself still shows the high adverse effect; therefore a treatment using bevacizumab only should be considered, and further studies are needed [1-3].

Dr. Brahmana discussed low-grade serous ovarian cancer in session 5. He explained that low-grade serous ovarian cancer is a rare disease that accounts for <10% of ovarian cancer cases and is chemo resistant. Surgery plays a role as first-line therapy and in the treatment of recurrence. He also emphasized and invited the public to explore the part of hormonal treatment, the role of effective chemotherapy regimens, and the role of targeted therapy on low-grade serous ovarian cancer. The session continued with Professor Ronald Zweemer, who talked about "Current Update in Management of Borderline Ovarian Tumor (BOT)," providing fascinating insights. He presented the different management options when dealing with BOT in young and older patients. Whereas he indeed proposed a more conservative approach than standard hysterectomy plus bilateral salpingo-oophorectomy, would



recommend the contrary for older patients in whom surgery might even need to include peritoneal staging (omentectomy and biopsies) [4,5].

Apart from managing cancer patients, this scientific session also touched on academic writing and publication, with "How to Write and Structure Academic Article for Publication" as the topic of discussion. Dr. Indah Suci Widyahening (Indonesia) described in length and discussed, among other things, how to opt for a title, write an abstract, and compose a well-structured manuscript. She emphasized that an abstract and manuscript should be precise and have a clear and exciting message to attract and engage the reviewer. The discussion got more fascinating with the additional topic by Professor René Verheijen (The Netherlands), who discussed "Trial and Error in Writing Papers." He explained that we should know how to catch the editor's attention, prepare and anticipate the reviewer's comments, and know how to attract and target the readership [6].

On the second day, 31 speakers provided fruitful education in five sessions with 17 different topics. The Young Gynecologic Oncologist session, started off with a Tumor Board session. Clinical diagnosis, pathologic conference and management of 3 cases were discussed, "Resistant Advance Stage Germ Cell Ovarian Cancer" by Dr. Yuri Feharsal (Indonesia), "Advance Cervical Cancer management in Low Resources Setting" by Dr. Pungky Mulawardhana (Indonesia), and "Brain Metastases in High Risk Gestational Trophoblastic Neoplasm" by Dr. Vidiatma Agbar (Indonesia) (**Fig. 9**). The international panelists were Professor René Verheijen and Dr. Joseph Ng (Singapore). There was a similarity between the three cases where the patients often come in advanced stages and limited availability of equipment for cancer diagnosis and therapy, such as lab tests and radiotherapy, resulted in long waiting time. This indicates a need for actions (or a plan of action) taking into consideration local conditions that might not be in accordance with international guidelines.

On the second day, Professor Yoo-Young Lee (South Korea) presented a video about type 2 radical hysterectomy based on various classification. Dr. Myeong-Cheol Lim (South Korea) gave some points on upper abdominal surgery and reminded us to really know our anatomical and surgical plane before operating in upper abdomen [7]. Dr. Joseph Ng explained the Singapore experience of laparoscopic and robotic surgery in gynecologic cancer and the learning process of both modalities. Professor Jeong-Yeol Park, finally, gave tips and tricks in achieving zero residual tumor in advanced ovarian cancer. He also emphasized the importance of complete cytoreduction as a prognostic factor after debulking surgery for advanced epithelial ovarian cancer and the use of several parameters such as tumor marker, imaging study, and/or diagnostic laparoscopy to predict resectability [8,9].







Fig. 9. Tumor Board case presentation (left to right). Dr. Pungky mulawardhana, Dr. Yuri feharsal, and Dr. Vidiatma Agbar.



On the last morning of the event, the official journal of ASGO, *JGO*, held a session. We had the privilege to have all South Koreans' prominent speakers chaired by Professor Jae-Weon Kim and co-chaired by Dr. Nam Kyeong Kim. Lectures were given by Professor Dong Hoon Suh who elaborated on the *JGO*, Professor Seung-Hyuk Shim (South Korea) who explained how to write a valuable paper and Professor Jeong Yeol Park who spoke about how to prepare randomized clinical trials, concluding that it is important to perform randomized controlled trials (RCTs) to generate evidence and improve the management of patients [10]. Based on Dr. Rina Agustina one of the Indonesian speakers explained that Indonesia is an ideal country to conduct RCTs because of its heterogeneity, complexity, and diversity [11]. Indonesia could also be a source of a wealth of material to analyze with a promise of new findings. The discussion continued with Dr. Brahmana Askandar Tjokroprawiro who introduced INASGO and followed by Dr. Tricia Dewi Anggraeni who elaborated on how to build and manage Indonesian big data as a part of a research that can acknowledge in the Asian society.

The Oncology sessions proceeded with an update in management of gynecology cancer. Professor Jeong-Yeol Park presented the controversy to complete radical hysterectomy or abandon it when positive lymph node was found intraoperatively. In his institution, the radical hysterectomy is routinely completed due to better survival and less morbidity for (lower dose) adjuvant chemo-radiation therapy compared to primary concurrent chemoradiotherapy. In addition to this, the discussion with Professor René Verheijen highlighted how this approach on focusing on and completion of surgery would also be necessary because of limited and delayed availability of radiotherapy, although that does not diminish the need for further and more advanced RCT research. Professor René Verheijen also elaborated on the role of advance imaging in cervical cancer, such as magnetic resonance imaging, ultrasound, and positron emission tomography-computed tomography in a work up before treatment, during radiotherapy, and the follow up after therapy [12]. His final message was true that for low- and middle-income countries, such as Indonesia, limited resources will necessitate prioritization of treatment options that might perhaps be less efficacious but at least available.

In the middle of the event, there was a collaboration meeting between INASGO and *JGO* board members, which discussed the Indonesian Nationwide Cancer Registry-based Study (INACRES) and found the solution to the research and publication issue in Indonesia regarding data and infrastructure limitations. Dr. Dong Hoon Suh, the editor-in-chief of *JGO*, suggested starting to collect retrospective data. They reminded us that the amount of data and its quality are also even more critical in elaborating and composing the data (**Fig. 10A**).





Fig. 10. (A) INASGO and JGO collaboration meeting. (B) INASGO and ASGO board members meeting; ASGO 2024 preparation. ASGO, Asian Society of Gynecologic Oncology; INASGO, Indonesia Society of Gynecologic Oncology; JGO, Journal of Gynecologic Oncology.



INASGO also held the preparation meeting for the upcoming ASGO meeting 2024, with Professor Jae Won Kim as the President of ASGO and Professor Jeong Yeol Park as the secretary general of ASGO. ASGO meeting 2024 will be held from November 29 to December 1, 2024, at the Bali Nusa Dua Convention Center, Bali, Indonesia, with estimated 1,000–1,500 participants. The meeting will invite distinguished international speakers: 40% from ASGO members, 30% from non-ASGO members, and 30% from local speakers. The session will be divided into Oncology Gynecology and Gynecology sessions to gain more participation (**Fig. 10B**).

GENERAL GYNAECOLOGIST & GENERAL PRACTITIONER SESSION

The session was divided into a 2-day symposium and had ten sessions with 21 topics. All topics were designed with diverse topics related to daily practice and presented by national speakers who were experts in their respective fields.

On the last day, there were free paper competitions and oral presentation for all participants who had interesting case from their experiments or researches. The presentation was reviewed by Dr. Heru Priyanto (Indonesia) and Dr. Ali Budi Harsono (Indonesia). The winner was announced at the closing ceremony (**Fig. 11**).

SOCIAL EVENT

The gala dinner was arranged at the Pullman Hotel, Bali on November 12th, 2022. The gala was opened by Dr. Tricia Dewi Anggraeni and Dr. Brahmana Askandar Tjokroprawiro. Followed by a speech by representatives from *JGO* and continued with a terrific performance from Korean speakers (**Fig. 12**) and closed with Bali traditional dance musical performance and dinner.

During this event, we also took some time to honor our late teachers, professors, seniors and colleagues who passed away by playing video tribute to remember their remarkable achievements. in memoriam of the honorary Professor Suhatno, Professor. H.A. Arifuddin Djuanna, Dr. Sigit Purbadi, Dr. Andi Friadi, Dr. Kadek Dharma Widhiarta, and Dr. Amirah Novaliani.

Even though this symposium has ended, the idea to hold this symposium is not over yet. There are still some steps that should be done. We have to elaborate and identify together with *JGO* board members about what kind of research project that we are going to conduct from Indonesian society that can be acknowledged and contribute to Asian society data at least for one year ahead, considering the fact that Indonesia is a big country with a large population.

In conclusion, we would like to thank to all distinguished delegates from *JGO* board meeting for planning an excellent program together with INASGO scientific meeting and we hope that we can meet again in Bali for the ASGO meeting in 2024 (**Fig. 13**).



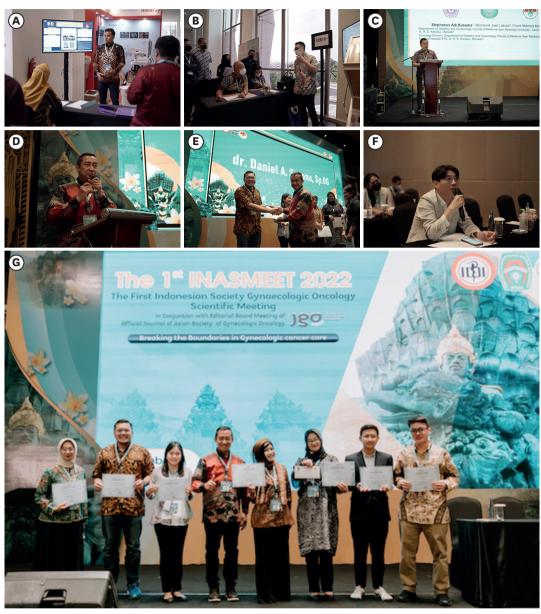


Fig. 11. Free paper & oral presentation competition and the juries. (D) Dr. Heru Priyanto and (F) Dr. Seung-Hyuk Shim.





Fig. 12. Performance at gala dinner from Korean representative. (A) Professor Jeong Yeol Park, Dr. Seung-Hyuk Shim, Professor Jae-Weon Kim, Dr. Nam Kyeong Kim, and Professor Dong Hoon Suh (left to right). (B) All INASGO members with national and international speakers at gala dinner. INASGO, Indonesia Society of Gynecologic Oncology.



Fig. 13. All committees at the end of the 1st INASMEET. INASMEET, Indonesian Society Gynecologic Oncology Scientific Meeting.

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