

## ITOG Members Participate in New York Masters Course in Endocrine Surgery



ITOG is pleased to report that four ITOG members will be moderators and/or panelists in the 2<sup>nd</sup> Annual New York Masters Course in Endocrine Surgery, December 6-7 at Icahn School of Medicine at Mount Sinai, New York, New York. The course will be an intensive review of key endocrine surgery topics, with special focus on current trends and techniques. This will include viewing live demonstrations of minimally invasive surgery for thyroidectomy and parathyroidectomy. Online registration is available at: <http://www.mastersinendocrine.com>

Friday, December 6th

### **Well-differentiated Thyroid Cancer: Part 1**

Moderator, James Fagin, MD

Presenter, Michael Tuttle, MD, "Staging and Risk Stratification"

### **Familial Conditions and Multiple Endocrine Neoplasia**

Moderator, Thomas J. Fahey, III, MD

Presenter, Ross Cagan, PhD, "Development of New Therapeutics Targeting MTC"

Saturday, December 7th

### **Video Symposium: How I Do It**

Presenter, Thomas Fahey III, MD, "Conventional Thyroidectomy"

### **Adrenal Disorders**

Moderator, Thomas Fahey, III, MD

### **Well-differentiated Thyroid Cancer: Part 2**

Moderator, Michael Tuttle, MD

Presenter, James Fagin, MD, "Radioiodine Therapy: Who Needs It, Who Does Not and How to Make it Work Better"

Presenter, James Fagin, MD, "What are We Learning from Whole Genome Sequencing of Thyroid Cancer"

Presenter, Ross Cagan, PhD, "Novel, Targeted Therapeutic Treatments"

**Posted:**

Nov 13, 2013

## ITOG Remembers Jean Vicks



Jean Vicks

Jean G. Vicks passed away on April 5, 2013 after her fourteen year battle with medullary thyroid cancer (MTC). She was 49. The diagnosis of MTC in 1999 resulted in seven surgeries, two clinical trials and three additional chemotherapy regimens in her desire to be well. Jean was honored as the inspiration for ITOG at the ITOG Annual Meeting at the Mayo Clinic in April. Jean's grace, selflessness and enthusiasm in the face of overwhelming challenges are an inspiration to all who knew her.

When Jean was diagnosed, she made a goal to live long enough to see her children begin college. Jean achieved this goal by a couple of months. She was convinced that the work of ITOG members made the difference in her achieving this most cherished goal. Jean was on Caprelsa during its clinical trial phase for thirty-six months and shared her positive experience by testifying before the FDA in December 2010.

After graduation from Miss Porter's School, Jean attended the University of Virginia, where she played varsity field hockey, majored in French and International Relations, and earned a Bachelor of Arts with Distinction in 1985. She joined The Bank of New York in New York City and soon became a corporate lending officer. It was here that Jean met her husband, Dwight Vicks; the two were wed on June 13, 1987. Jean was an officer in the private lending division of Chemical Bank before the couple moved to Ithaca, NY, where she worked in Alumni Affairs and Development at Cornell University. With the birth of her twins, Sara Jane and Dwight Hatfield in 1991, Jean devoted her energies to raising her children. Her youngest, Emily Kathryn, was born in 1994.

The desire to give back and her passion for field hockey led Jean to a second career as coach and mentor to dozens of young women. She coached at New Hartford, Whitesboro and Clinton High Schools, and the USFA Futures program. The Section 3 coaches and referees honored Jean by dedicating the 2010 Section 3 Field Hockey tournament to her. She had the privilege of coaching her daughters Sara and Emily. Exercise was one of Jean's passions, including the Masters Swim Program at Hamilton College, Swim Across America, numerous triathlons and the Boilermaker Road Race. She loved biking, cross-country skiing and walking her dogs either at the Bridgehampton Beach or the Root Glen at Hamilton College. Jean's strong faith was in evidence as a member of St. James Episcopal Church in Clinton, NY, where she sang in the choir.

### **Posted:**

Oct 18, 2013

## TA Associates Realty Selects ITOG as Charitable Beneficiary



Dwight Vicks, Michael Ruane, Steven Sherman, Elizabeth Ruane, and Lori Wirth at the TA Associates Realty Charitable Golf Tournament

TA Associates Realty is one of the leading investors in commercial real estate in the United States. Michael Ruane, a founding member of TA Associates Realty, created an event to provide a valuable business gathering, golf at exceptional courses and raise funds to donate to worthy charities selected by the TA Associates team. ITOG was selected as the 2013 Charitable Beneficiary for the event held on July 29<sup>th</sup>. The day began with an informative business forum including a round table of leading executives from across the country. After lunch, participants played the historic Blue Hill Country Club near Boston.

Michael's wife Elizabeth has Hürthle Cell Carcinoma, a rare form of thyroid cancer. Through their journey to obtain the best treatment options, they have consulted and work with ITOG member physicians. The Ruane's believe in the mission of ITOG. Michael and Elizabeth have experienced first hand the outstanding work of ITOG, and the hope it provides thyroid cancer patients with challenging diagnoses.

Michael Ruane introduced ITOG Chair Dr. Steve Sherman, Secretary Dr. Lori Wirth and Treasurer Dwight Vicks who shared with the 350 attendees background of ITOG and the exciting achievements that continuing to build. The membership of ITOG is most grateful for the generous support of the Ruane family and TA Realty Associates.

**Posted:**

Oct 17, 2013

## 16th International Thyroid Cancer Survivors' Conference



### October 9, 2013

The 16<sup>th</sup> annual International Thyroid Cancer Survivors' [www.ThyCa.org](http://www.ThyCa.org) conference took place from September 27-29, 2013 in Philadelphia. A record breaking 550 attendees came to the meeting. Through this conference, ThyCa is able to bring together the latest research, advances in treatment, follow-up and coping skills for the well-being of thyroid cancer survivors and their caregivers.

Dr. Steven Sherman, Dr. Lori Wirth and Dwight Vicks, ITOG board members, led two sessions in the conference. The sessions, *Learn about the International Thyroid Oncology Group (ITOG), Its Cooperative Relationship With ThyCa*, and *What ITOG is Doing To Advance Thyroid Cancer Research Now and in the Future*, were well received.

Dr. Sherman and Dr. Wirth presented ITOG's mission which is to find and develop therapies for the most difficult to treat advanced thyroid cancers. They explained the unique collaboration between its members who include leading physicians, scientists, and advocates to design, coordinate and prioritize state-of-the-art clinical trials and correlative science.

Patients and their caregivers learned that ITOG's four main goals are to: 1. Develop novel treatments to not just stabilize disease but also to *reduce* tumor burden and improve both the duration and quality of life. 2. Decipher the biology of how treatments work... and don't work 3. Foster interest of new generations of medical professionals to pursue a career in thyroid cancer research and 4. Facilitate getting the science from the lab to the patients... Safely and quickly.

Patients have now been enrolled in ITOG's first clinical trial, a major milestone for the organization. It is a *phase II trial of cabozantinib as 2<sup>nd</sup> line therapy for DTC that progresses on first line anti-VEGFR therapy*

The doctors also announced that four additional ITOG trials are now in development and planning stages. News, updates and other information will appear regularly on ITOG's newly developed website- [www.ITOG.org](http://www.ITOG.org)

Dwight Vicks, founder and Treasurer of ITOG began each session by describing the origins of ITOG. Dwight's wife Jean was diagnosed with an aggressive medullary thyroid cancer in 2004. There were few, if any, therapies and there was virtually no coordinated research being done to treat these rare and aggressive thyroid cancers. Dwight and Jean saw the urgent need, and with the help of a number of physicians formed ITOG. Now, in 2013, ITOG has over 60 members, has raised over \$1,000,000 and is well on its way to fulfilling its mission.

Rick Abrams, ITOG member and thyroid cancer patient shared his enthusiasm for ITOG after attending the last two annual meetings and doing some committee work. He commented, "I have rarely, if ever, observed such a sincere and committed group of people working together towards a common goal. All patients with advanced thyroid cancer can be even more hopeful because of work they are doing."

Both sessions were well attended There was lots of time for lively and informative Q&A and back and forth between attendees and presenters.

Dr. Steve Sherman summed up his enthusiasm by saying, "I always enjoy presenting at the annual ThyCa conference. As a physician, I don't often get to speak to, and learn from a large group of patients at the same time. I am always inspired and motivated by the people I meet, and the stories I hear. With ITOG on its way to fulfilling a deep medical need, I am even more excited about the opportunity to present here and work with ThyCa."

After the ITOG sessions, Gary Bloom, Executive Director of Thyca: Thyroid Cancer Survivors' Association ([www.thyca.org](http://www.thyca.org)) said, "ThyCa's mission of being the organization committed to support and education for all people impacted by a thyroid cancer diagnosis complements ITOG's mission of developing new treatments for advanced thyroid cancer. I look forward to strengthening our relationship with ITOG and its members in the years ahead."

Eighteen medical and scientific presentations were made by ITOG members in addition to the ITOG overview sessions described above.

In alphabetical order by last name, they were:

Douglas W. Ball, M.D., Endocrinologist, **The Current Status of Molecular Targeted Therapeutics for the Treatment of Advanced Medullary Thyroid Cancer.** and  
**Medullary Thyroid Cancer: Ask a Doctor Your Questions.**

Kenneth D. Burman, M.D., Endocrinologist, **Overview of Papillary and Follicular Thyroid Cancer.**

Maria E. Cabanillas, M.D. Endocrinologist, **Novel Chemotherapies for Patients With Metastatic Papillary, Follicular, or Hurthle Cell Thyroid Cancer.**

Ross Cagan, Ph.D., Regenerative Biologist, **Addressing Complexity in Thyroid Cancer: Center for Personalized Cancer Therapeutics.**

Herbert Chen, M.D., F.A.C.S., Endocrine Surgeon, **Medullary Thyroid Cancer: Surgical Management and Long-Term Treatment Options.** and

**Update on Medullary Thyroid Cancer Research Funded Through the American Cancer Society.**

Robert F. Gagel, M.D., Endocrinologist, **Medullary Thyroid Cancer: Clarifying Any Confusion.**

Barry D. Nelkin, Ph.D., Researcher, **Medullary Thyroid Cancer: What do We as Scientists Hope to Learn Now, and in the Future.**

Eric J. Sherman, M.D., Oncologist, **Anaplastic Thyroid Cancer: Treatment, Research, Clinical Trials.** and

**Systemic Therapy for RAI Refractory Thyroid Cancer, Both Current Treatment Options and Potential Future Advances.**

Steven I. Sherman, M.D., Endocrinologist, **Medullary Thyroid Cancer: Non-Surgical Approaches to Systemic Treatment.**

Julie Ann Sosa, M.D. M.A. Surgeon, **The Surgical Approach to the Patient with Residual or Recurrent Lymph Node Metastases.** and

**Anaplastic Thyroid Cancer: Surgical Management, Post-Surgical Treatment, and Coping With Side Effects.**

R. Michael Tuttle, M.D., Endocrinologist, **Research Advances in Differentiated and Medullary Thyroid Cancer- Where Are We, and Where Do We Go From Here?** and

**A Discussion About Anaplastic Thyroid Cancer**

and

**Evaluation of Thyroid Nodules Both to Determine a Thyroid Cancer Diagnosis As Well As to Diagnose a Recurrence.**

Lori J. Wirth, M.D., Oncologist, **Pros and Cons of Novel Chemotherapies for Refractory (Non-RAI Avid) Disease.**

**Posted:**

Oct 16, 2013

## Sorafenib Improves Thyroid Cancer Outcomes

(ASCO, June 2, 2013) A large phase III clinical trial reported that sorafenib improves progression free survival for patients with radioactive iodine refractory, differentiated thyroid cancer.

June 2, 2013 marks a major milestone in thyroid cancer, as ITOG member Marcia Brose, MD, PhD, Assistant Professor of Medicine, Hematology/Oncology and of Otolaryngology and Head and Neck Surgery in the Abramson Cancer Center and Perelman School of Medicine at the University of Pennsylvania in Philadelphia, presented the results from the DECISION trial, the first randomized, phase III clinical trial of systemic therapy in patients with differentiated thyroid cancer (DTC) resistant to radioactive iodine therapy (RAI)\*. Dr. Brose presented the results of DECISION in the plenary session at the 49th Annual Meeting of the American Society of Clinical Oncology (ASCO) in Chicago. This international study showed that sorafenib (Nexavar) improves progression-free survival (PFS) in RAI-refractory DTC, a disease for which there has been no FDA-approved new therapy for the last 40 years. DTC is the most common type of thyroid cancer, accounting for about 85% of cases each year. Although DTC generally has high cure rates following surgery and RAI, some patients will develop RAI-resistant disease. The only FDA-approved treatment is doxorubicin, which is rarely used because of low efficacy and high toxicity. Sorafenib is an oral multikinase inhibitor that targets VEGF receptor kinases 1-3 and Raf, which control cell division and new blood vessel formation. At present, sorafenib is FDA-approved for advanced kidney cancer and liver cancer. In the DECISION study, 417 patients with RAI-resistant DTC that had progressed within the past 14 months were randomly assigned to receive sorafenib or placebo. Patients in the placebo control arm were allowed to cross over to the sorafenib arm upon disease progression. The primary endpoint was PFS, which was 10.8 months with sorafenib vs 5.8 months with placebo (hazard ratio=0.58; 95% CI, 0.45–0.75;  $p<.0001$ ). Tumor shrinkage of at least 30% was achieved in 12.2% of patients on sorafenib, and an additional 42% of patients had stable disease for at least six months. Thus, the disease control rate with sorafenib was 54%, compared to 34% in the placebo arm. Overall survival data are not yet mature, but are anticipated to be impacted by cross over from placebo to sorafenib. While sorafenib, made by Bayer HealthCare Pharmaceuticals and Onyx Pharmaceuticals, which funded the study, has now has proven benefits in RAI-resistant DTC, it is associated with side effects, the most common of which include hand-foot syndrome, diarrhea, rash, fatigue, weight loss, and hypertension. These and more rare side effects require that patients and providers weigh the potential risks and benefits prior to starting therapy. It is expected that the DECISION trial will form the basis for a supplemental New Drug Application to the FDA later this year.

\*Brose MS, Nutting C, Jarzab B, et al. Sorafenib in locally advanced or metastatic patients with radioactive iodine-refractory differentiated thyroid cancer: The phase III DECISION trial. *J Clin Oncol.* 2013;31(suppl; abstr 4).

**Posted:**

Jun 13, 2013

## **Medullary thyroid cancer : Mutations predict response to oral chemotherapy**

For advanced non-resectable MTC (medullary thyroid cancer), there are now two FDA-approved drugs, vandetanib (Caprelsa) and cabozantinib (Cometriq). At the 2013 American Society of Clinical Oncology meeting in Chicago, ITOG investigators working with Exelixis, Inc. reported a major study of the impact of different gene mutations in MTC tumors on responses to cabozantinib. Using a large data set from the Phase III clinical trial that led to the approval of the drug earlier this year, the investigators retrospectively studied several key DNA mutations identified in previous studies of MTC tumors. 93% of the patients in the study had sporadic MTC and only 7% had familial MTC. In these sporadic patients, the DNA mutations are limited to tumor cells and are not seen in the whole body DNA.

A specific mutation in the **RET** gene, referred to as **M918T**, was present in about 60% of the sporadic tumors. Quite remarkably for this group, the average time to progression improved from 17 weeks for patients treated with placebo to 61 weeks for patients treated with cabozantinib. There was a smaller apparent benefit for patients with other RET gene mutations in their tumors. Patients found to have RAS gene mutations in their tumors also seemed to benefit. In contrast, the 15% of patients without evidence of RET or RAS mutations had little sign of benefit with this drug.

Discussing this presentation, lead author Dr. Steven Sherman of ITOG commented that there is now a very strong rationale for patients with advanced MTC to request genotyping of their tumors, especially for RET M918T. Other ITOG investigators who were co-authors on this presentation include Dr. Ezra Cohen, Dr. Rossella Elisei, Dr. Martin Schlumberger, Dr. Lori Wirth, and Dr. Marcia Brose. The research was funded and supported by Exelixis, Inc. The abstract for this presentation is available online via the ASCO website:

<http://meetinglibrary.asco.org/content/113710-132>

**Posted:**

Jun 11, 2013

## ITOG Annual Meeting 2013



### 13 Annual Meeting Dinner

ITOG held its 2013 Annual Meeting in Rochester, Minnesota at Mayo Medical Center on April 28-30th. The meeting was hosted by Drs. Keith Bible and Robert Smallridge. Highlights from the meeting included scientific sessions on Molecular Therapeutic Approaches to Thyroid Cancer. Dr. Steve Russell outlined his program for developing oncolytic viruses and described the efforts to bring these to the clinic. ITOG members had an orientation and overview of ACCRU, which included tours of Mayo/ACCRU research laboratories and specimen handling/archiving facilities. Scientific sessions included presentations highlighting preclinical models of thyroid cancer and discussion of future trials including novel agents for differentiated and medullary thyroid cancer. ITOG members had dinner at the Mayo Foundation House (pictured), the former home of Dr. and Mrs. William Mayo (<http://www.mayoclinic.org/tradition-heritage/foundation-house.html>) where they enjoyed a presentation by Dr. Thom W. Rooke, author of "The Quest for Cortisone: Adventures of a Thyroid Chemist." ITOG elected three new members to its Board of Directors: Dr. Michael Tuttle, Dr. Rossella Elisei, and Dr. Yuri Nikiforov and Dwight Vicks was re-elected to the Board. The meeting allowed participants to develop and plan new collaborations and clinical trials for thyroid cancer patients.

### Posted:

May 18, 2013

