The 61st Annual Meeting of the Japanese Society for Gynecologic Oncology (JSGO) was held from July 4th to 6th, 2019, at the Tokki Messe International Convention Center in Niigata, Japan, with Prof. Takayuki Enomoto serving as the Congressional Chair (Fig. 1). The theme of this meeting was “Precision Medicine in Gynecologic Oncology: From Bench to Clinic” and there were two invited lectures, three special lectures, three symposiums, four workshops, three mini-workshops, five young-doctor’s seminars, 117 oral presentations in 25 sessions, 513 poster presentations and an Asian Gynecologic Oncology Submit. A list of the invited and special lectures is shown in Table 1. More than 2,000 participants, from 8 countries/regions (Australia, Italy, Japan, S. Korea, Malaysia, Taiwan, Thailand, and USA) attended this meeting (Fig. 2). In a reflection of increasing internationalization of the JSGO, there was the first poster presentation from South Korea.

Two invited lectures were held; invited speaker Dr. Ryuji Hamamoto, Chief of the Division of Molecular Modification and Cancer Biology at the National Cancer Center Research Institute,
and a pioneer in the field of medical artificial intelligence (AI), lectured on the history of AI progression and development. He presented his thoughts on the current status and issues surrounding medical AI, especially in Japan. In his lecture, a robot “LabDoid”, capable of providing experimental results with high reproducibility, was introduced. Several clinical applications of medical AI were exampled.

Invited speaker Prof. Anil K. Sood, Professor and Vice Chair for Translational Research for the Department of Gynecologic Oncology at the University of Texas MD Anderson Cancer Center, and a giant in the field of ovarian cancer research, presented his group’s novel findings associated with the role of platelets in cancer progression and opportunities for disrupting such effects. His talk covered the roles of platelets in tumor growth and tumor cell extravasation and metastasis.

Three special lectures were also held. The first special speaker, Prof. Nicoletta Colombo, gave a clear exposition of the SOLO1 trial [1]. In SOLO1, patients with advanced-stage BRCA-mutated ovarian cancer—with a complete or partial response to platinum-based

| Session       | Speaker               | Affiliation                          | Title                                                                 |
|---------------|-----------------------|--------------------------------------|----------------------------------------------------------------------|
| Invited Lecture | Ryuji Hamamoto        | The National Cancer Center            | Medical AI Research Aimed at Clinical Applications                     |
| Invited Lecture | Anil K. Sood          | The University of Texas MD Anderson Cancer Center | About Trouseau, Platelets, Angiogenesis and Cancer Patients            |
| Special Lecture| Nicoletta Colombo     | The University of Milan-Bicocca       | Olaparib Maintenance in the First-line Treatment of Patients with BRCAm Ovarian Cancer (OC): A New Standard of Care |
| Special Lecture | Suzanne Garland       | The University of Melbourne           | How to Achieve Cervical Cancer Elimination - Dual Strategy Utilizing Vaccination and Screening |
| Special Lecture | Warner K. Huh         | The University of Alabama Birmingham | HPV Vaccination and Eradication of Cervical Cancer: Is This Feasible? |

Three special lectures were also held. The first special speaker, Prof. Nicoletta Colombo, gave a clear exposition of the SOLO1 trial [1]. In SOLO1, patients with advanced-stage BRCA-mutated ovarian cancer—with a complete or partial response to platinum-based
chemotherapy—were randomized to receive olaparib or a placebo as maintenance. The olaparib-treatment group demonstrated a substantial progression-free survival versus placebo (hazard ratio=0.30; 95% confidence interval=0.23–0.41; p<0.001). In addition, olaparib was generally as well tolerated as the placebo. Based on these results, Prof. Colombo suggested that all BRCA-mutated patients should be identified at diagnosis.

The second special speaker, Prof. Suzanne Garland, explained the elimination strategy for cervical cancer that the World Health Organization (WHO) has proposed be globally introduced, in all countries, by 2030. The WHO plan involves human papilloma virus (HPV) vaccination with a 90% coverage, a 70% rate of cervical cancer screening with a high precision test, occurring at least twice in a lifetime, and a 90% treatment rate of women with cervical disease. She also presented on Australia’s national immunization program and its great effectiveness on HPV infection and disease [2].

The third special speaker Prof. Warner K. Huh, provided a comprehensive discussion of HPV vaccination. He reviewed the history of the HPV vaccine and its related safety concerns, the vaccine’s population impact, its impact on cervical cancer screening, and recent clinical updates. He also discussed eradication of cervical cancer from a global viewpoint.

Three symposiums were held. The subject of the first was “Current status and Issues of Clinical Sequencing in Precision Medicine”, tailored to the theme of this meeting. Just one month before this meeting, two types of clinical sequencing systems, OncoGuide™ NCC Oncopanel Systems and FoundationOne CDx, received health insurance coverage for use in cancer genome profiling in Japan. Therefore, this symposium was very timely. Dr. Katsutoshi Oda presented pan-cancer genomic profiling data based on the Todai OncoPanel that was developed in his institution and he discussed various issues in clinical application of sequencing data. Dr. Kentaro Nakayama introduced clinical sequencing results from Shimane University, and he raised issues regarding clinical sequencing, such as the current lack of viable treatment options for patients with druggable gene mutations. Dr. Akira Hirasa focused on germline variants, and presented ethical issues regarding clinical sequencing. Dr. Kumiko Oseto presented numerous issues of clinical sequencing and future efforts to resolve these issues—from the viewpoint of a certified genetic counselor.

The subject of the second symposium was “Thinking of Hereditary Breast and Ovarian Cancer Syndrome (HBOC) and Lynch Syndrome in the Era of Clinical Sequencing”. The clinical application of genomic profiling tests based on high-throughput sequencing is expected to provide us with not only druggable gene alterations but also secondary findings, especially or HBOC and Lynch syndromes. The first speakers, Dr. Reiko Yoshida and Dr. Koji Nishino, lectured about HBOC; Prof. Naohiro Tomita and Dr. Kokichi Sugano spoke about Lynch syndrome. Dr. Yoshida presented on the current status and issues in clinical management for breast cancer patients or carriers with BRCA1/2 germline mutations in terms of a breast specialist. Dr. Nishino presented how he and his colleagues set up their management system in the Niigata Prefecture for BRCA1/2 mutation carriers, as well as breast and ovarian cancer patients with BRCA1/2 germline mutations. Because Lynch syndrome is a genetic disease of autosomal dominant inheritance that increases the risk of colon cancer, endometrial cancer, and several other cancers, Prof. Tomita explained several issues in Lynch syndrome management from the perspective of colon cancer. Dr. Sugano presented comprehensive commentaries on Lynch syndrome from the viewpoint of gynecologic cancers, especially endometrial cancer.
The subject of the third symposium was, “A New Era of Surgical Education”. Symposium on surgical education was a novel first attempt for the Annual Meeting of JSGO. Dr. Masanori Isobe presented on the “How” and “Why” we educate young doctors and medical students—based on his own experience and theory in medical education. Dr. Hiroyuki Kanao presented on how to teach surgical methods with high difficulty and low frequency of use—in terms of understanding of precise anatomy, surgical procedure and technique. Prof. Tsutomu Tabata introduced a unique education system, “The OBGYN Surgery Club” for medical students, that he developed, and the results of his 18-year education effort. Dr. Yo Kurashima raised the big problem that there is no common training program for young surgeons in Japan and he presented several approaches to improve the quality of training for young surgeons. Dr. Yusuke Watanabe presented his talk, Fundamental Use of Surgical Energy, and its effectiveness for surgeons. Finally, Dr. Isobe used a Google survey form to investigate the satisfaction level of the audiences in real-time, and demonstrated the increase of interest in surgical education among gynecologic oncologists.

The Asian Gynecologic Oncology Summit was also held on July 5th. The aim of this symposium was to maintain a good relationship among Asian countries to encourage international collaborations through clinical trials for gynecologic cancer. The first speaker was Prof. Yong Mang Kim (President of the Korean Gynecologic Oncology Group [KGOG]). He presented the recent activities of KGOG, such as the ongoing joint research with Japanese Gynecologic Oncology Group (JGOG), including KGOG3011/GCIG/JGOG3017, KGOG3026/JGOG3019/GOTIC-001, and KGOG3035/JGOG3020 [3,4], as well as the KGOG-JGOG Young Doctors’ Meeting and the regular exchange program of young medical scientists between KGOG and JGOG. Prof. Seung Cheol Kim (President of the Korean Society of Gynecologic Oncology [KSGO]) presented a history of KSGO and the Journal of Gynecologic Oncology (JGO), especially the recent relationship with JSGO [5-7].

Prof. Tae-Wook Kong (Ajou University School of Medicine, Suwon, Republic of Korea) presented oncologic outcomes of minimally invasive radical hysterectomy after using parametrial invasion criteria on magnetic resonance imaging and vaginal colpotomy and concluded that the operation should be performed more cautiously, in optimal surgical candidates, to obtain en bloc resection without positive margin and tumor spillage, using vaginal colpotomy after CO2 evacuation [7-9]. Prof. Kung-Liahng Wang (President of the Taiwanese Gynecologic Oncology Group) presented updates regarding the controversies of laparoscopic or robotic surgeries for cervical cancer, and discussed the disagreement in the literature regarding the effect of utilizing laparoscopic or robotic surgery versus traditional laparotomy regarding the risk of decreasing survival among patients with cervical cancers [10,11]. Prof. Salikapan Wilailak (Past President of the Thai Gynecologic Cancer Society) presented on strategies and current topics of diagnosis and treatment of ovarian tumors during pregnancy. Prof. Jae-Weon Kim (Editor-in-Chief of JGO) insisted that because medical information is increasingly communicated through social networking systems, journals must evolve continuously to compete, and have already changed significantly to keep up with these new social environments. Prof. Young-Tak Kim (Chairperson of Oncology Committee of Asia and Oceania Federation of Obstetrics and Gynecology and Past President of KSGO) presented an overview of the global burden of HPV infection and HPV-related disease in Korea and emphasized that the impact of HPV vaccines in Korea will greatly depend on HPV vaccine uptake, coverage, availability, and affordability [12,13]. This symposium will play an important role in the maintenance of a good relationship between Korea, Taiwan, Thailand, and Japan.
After the mid-day JSGO meeting, a banquet was held in the Tokki Messe International Convention Center (Fig. 3). About 1,000 attendees gathered for the dinner, which deepened the chances for exchanges with each other, and they shared their impressions of the meeting.

In this meeting, the latest gynecologic oncologic topics focusing on “Precision Medicine” were discussed. All the speakers gave excellent presentations and the attendees actively participated in the discussions after each presentation. Due to the efforts of all the participant’s, the 61th Annual Meeting of JSGO was greatly successful.

Before this meeting, a collaborative meeting of JGOG/KGOG was held for 2 days, at the Spa Resort Hotel in Kahou on July 2nd and the Tokki Messe on July 3rd. JGOG and KGOG are both organizations conducting clinical trials in gynecologic malignancy, and this was the 4th Collaborative Meeting between them (Figs. 4 and 5).

After the opening remarks from Prof. Takayuki Enomoto (President of JGOG and Congressional Chair of the 61st JSGO) and Prof. Yong Man Kim (the President of KGOG), we discussed the current status, implementational system and various problem related to carrying out clinical trials in both countries. Prof. Kimio Ushijima (Japan-Korea Committee Chair of JGOG) and Prof. Sung-Jong Lee (Secretary General of KGOG) presented about each group’s situation in detail. We then held smaller meetings based on 3 disease committees (cervix, uterine corpus, and ovarian) to engage in joint clinical trials between Japan and Korea. After the first day of the meeting, we had a banquet at the Spa Resort Hotel Kahou, and all participants, 16 from JGOG and 10 from KGOG, gathered for a traditional Japanese dinner.

On the 2nd day, we again had a general meeting to discuss how to actually perform the JGOG/KGOG collaborative international clinical trials. Dr. Munetaka Takekuma and Prof. Dae-Yeon Kim, Cervical Committee Chairs, Dr. Kazuhiro Takehara and Prof. Suk-Joon Chang, Uterine Corpus Committee Chairs, and Dr. Muneaki Shimada and Prof. Sokbom Kang, Ovarian Committee Chairs, presented on the actual manner and the vision of JGOG/KGOG’s near-future collaborations. The next collaborative meeting, the 5th KGOG/JGOG, will be
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Fig. 4. Participants of the Japanese Gynecologic Oncology Group/Korean Gynecologic Oncology Group Collaborative Meeting in Niigata, Japan.

Fig. 5. Japanese Gynecologic Oncology Group/Korean Gynecologic Oncology Group Collaborative Meeting at the Spa Resort Hotel in Kahou, Japan.

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