



ASCO 2023—partnering with patients: the cornerstone of cancer care and research

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For the 2023 annual meeting of the American Society of Clinical Oncology (ASCO), over 250 abstracts were finally selected for oral presentations, and over 2000 abstracts for poster presentation. To spread this enormous gain of knowledge, new ways of information exchange have become increasingly important. With webcasts and news tickers, presentations at international congresses can be followed in realtime from at home. Furthermore, continuing medical education events and published reviews illuminate the presented data from different perspectives. In this special edition, Austrian experts summarize the important and most clinically relevant data from this year's ASCO.

Jasmin Spiegelberg [1] gives an ASCO update on renal cell carcinoma. Several studies and analyses presented at ASCO addressed the role of combined treatment strategies of immune checkpoint inhibitors plus oral kinase inhibitors in the front-line setting. In this review, the author concludes that combined therapy strategies remain the standard of care. Variant histology renal cell carcinomas (vhRCCs) are a group of heterogeneous entities with different biology and prognosis. For these rare subtypes, promising immunotherapy-based combination treatment results were presented.

Patrick Reimann and Thomas Winder [2] review and discuss new data from pancreatic cancer. In the reviewed NORPACT-1 trial, perioperative mFOLFIRINOX was compared to adjuvant mFOLFIRINOX in localized, resectable pancreatic cancer. Compar-

ing to upfront surgery, neoadjuvant treatment with mFOLFIRINOX does not seem to be beneficial in this patient population. At ASCO, results from the NAPOLI-3 study were updated. NALIRIFOX, a multidrug regimen of liposomal irinotecan in combination with 5-fluorouracil, leucovorin and oxaliplatin was compared to nab-paclitaxel plus gemcitabine in the palliative first-line setting. Based on the positive trial results, the authors conclude that NALIRIFOX may be considered as a new first-line treatment option in metastatic pancreatic cancer.

Angela Djanani [3] gives an ASCO update on hepatocellular carcinoma (HCC) and cholangiocellular carcinoma (CC). In this interesting article, data presented from phase I and phase II trials are reviewed. Because these were early phase investigations, none of those strategies will change our clinical routine today. Nevertheless, tiragolumab (monoclonal anti-TIGIT antibody) and zandadatamab (monoclonal anti-HER2 antibody) have great potential to enter clinical routine in the future for the treatment of HCC and HER2-amplified CC, respectively.

Josef Pichler [4] gives an ASCO update on central nervous system (CNS) tumors. In the phase III INDIGO trial, vorasidenib, a dual inhibitor of mutant IDH1/2, was investigated in IDH1/2-mutated diffuse glioma. The encouraging results of this trial were presented in the plenary session. Vorasidenib will change the standard of care in this patient population. In this review, other new immunotherapy treatment approaches and targeted therapies are also summarized and discussed.

“Partnering with Patients: The Cornerstone of Cancer Care and Research” was the slogan of the ASCO annual meeting 2023. This emphasizes the importance of the partnership between us—both practitioners and scientists—and cancer patients to continue to achieve new goals in oncology together.

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I hope you enjoy reading these interesting articles.

Yours sincerely,
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Conflict of interest G. Rinnerthaler declares that he has no competing interests.

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