ESIR COURSE IN MUNICH

Tobias Jakobs chats to us about the upcoming ESIR course on therapies for liver cancers in Munich in June of 2019.





HCC from A-Z: Expert Training in Munich

Villejuif is fully booked — secure your place at the Munich course now! The ESIR Clinical Procedure Training courses have long offered IR professionals targeted, hands-on learning opportunities, with renowned experts guiding small groups through the latest data and technologies. Liver cancer will be addressed at a winter course in Villejuif (fully booked) and a summer course in Munich. We spoke to faculty member, and host of the Munich Clinical Procedure Training course, Tobias Jakobs about the field's relevance for IR and what to expect at the course.

CIRSE: CIRSE has two upcoming liver cancer courses planned – why is this such an important clinical topic for IRs right now?

Jakobs: One of the most rapidly expanding areas in the field of radiology today is image-guided tumour treatment. Indeed, minimally invasive IR procedures have evolved from experimental procedures performed in limited patient populations with no surgical options to well-recognised clinical procedures that are now being performed routinely in virtually all major academic hospitals and tertiary medical centres worldwide. Yet, on the basis of the extensive nature of this rapid growth, there is now a strong need for a systematic review encompassing advanced imaging techniques (e.g. cone-beam CT) and treatment options, with a focus on transarterial chemoembolisation.

CIRSE: Is there any new evidence or guidelines in this field that we should be paying attention to?

Jakobs: The maturing field of interventional oncology has garnered substantial worldwide interest and enthusiasm. This interest is reflective

of the utility of the methods and the continuing, and dramatic, technical advances and refinements in image-guided tumour therapy, as well as the marked expansion of techniques to allow treatment of disease in more tumour types. Recently, the American and European guidelines for the treatment of hepatocellular cancer have been updated and revised, strengthening the role of transarterial chemoembolisation in HCC, even in the era of emerging systemic treatment options with tyrosine-kinase and multi-kinase inhibitors.



CIRSE: What can attendees expect to learn at the course?

Jakobs: The workshop is intended for physicians who currently have some basic proficiency in interventional oncology or for those who want to update their knowledge of dedicated, minimally



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invasive cancer care. The workshop incorporates live cases of transarterial chemoembolisation (including the two most widely used techniques of conventional Lipiodol®-based TACE and TACE with the drug-eluting bead platform) and didactic instructions with practical, hands-on training. In different presentations, the armamentarium of minimally invasive, transarterial treatment options for liver tumours will be addressed. Clinical application will be emphasised through lectures, with a special focus on potential complications.

CIRSE: Complication cases feature prominently on this year's programme – why is this?

Jakobs: At all the meetings in the field of interventional oncology, you see experts showing fantastic cases with great patient outcomes. I frequently meet colleagues who wonder how they could potentially achieve comparable results. During this workshop we would also like to share "complex situations" we had to deal with while treating our patients and how we managed the situation. From my perspective, you can learn much more from cases which didn't run smoothly as well as take home valuable information and the confidence that, when faced with a difficult situation, you are trained and skilled to cope with it.

CIRSE: What is your personal highlight from this year's course?

Jakobs: There are many topics I like about this year's course. First of all, I love to see that key opinion leaders from various European countries will gather together to share their views on

transarterial treatment options, and secondly, I am really curious about the session focusing on complications. I am quite sure that we will all benefit greatly from the presenters' expertise and learn how to deal with complications in our daily practise, which will ultimately increase patients' safety and outcomes.

CIRSE: What are you looking forward to the most at June's HCC course in Munich?

Jakobs: The most striking feature of next year's course will be, in my opinion, the combination of the latest scientific data with information on how to transfer this into routine daily care. I am excited about hosting a diversified case presentation during an extensive tumour board, where the audience can actively participate and contribute their thoughts on how they would recommend treating these patients.

CIRSE: Why is Munich a good place to host this course?

Jakobs: As you might know, Munich is often called "the biggest village in the world". This makes it a great place to host a workshop, and we can expect a relaxed, familiar atmosphere with plenty of opportunities for vivid discussion and exchange of ideas, thus building a skilled community for dedicated, minimally invasive patient care. We are looking forward to welcoming you to Munich for this unique workshop on minimally invasive transarterial cancer care!

Find out more at www.cirse.org/esir.

Ciara Madden, CIRSE Office

"The course will combine the latest scientific data with information on how to transfer this into routine daily care."