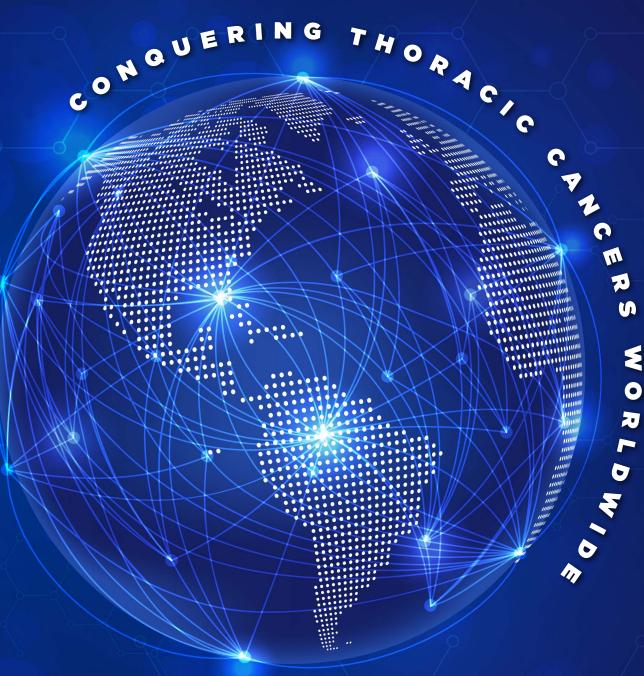
CONQUERING ..... ..... .... . . . . . . .... .... //•/• | \*\*\*\* IASLC



INTERNATIONAL **ASSOCIATION** FOR THE STUDY OF LUNG CANCER

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# WELCOME!

Dear Colleagues and Friends,

Welcome to the 2021 IASLC Annual Report! As we look back on 2021, we see how our lives, our Association and the lung cancer community as a whole continued to be impacted by the pandemic. While we hoped that 2021 would bring us back together to meet in person, that was not to be, however IASLC was able to produce extraordinary publications and education offerings within a virtual platform.

Following the Association's two-year election cycle, we filled eight open board seats in our 2021 election and selected Paul Van Schil to be President-Elect. IASLC's global reach includes board representation from Belgium, Japan, the Netherlands, Canada, Brazil, South Korea, Denmark, the United States, and China. Importantly, during the election an amendment was approved by IASLC member vote to update the Preamble of the Bylaws to address diversity, equity, and inclusion.

IASLC Committees embarked on a two-year plan for the 2021-2023 Committee terms with a focus on how to improve member engagement—including early career professionals—and how to strengthen commitment to diversity, equity, and inclusion.

2021 unveiled key developments in IASLC technology platforms for delivering state-of-the-art virtual information and education that include website and conference platform updates, the digitalization of the *IASLC Lung Cancer News*, enhancements to the member portal, and the launch of a learning management system to be expanded in 2022.

The IASLC successfully conducted a full slate of virtual meetings in 2021 including two World Conferences on Lung Cancer (WCLC), the WCLC 2020 in January 2021 (postponed from summer 2020 for pandemic reasons) and the WCLC 2021 in September 2021. The virtual WCLC 2021 had more than 5,800 attendees who enjoyed pre-recorded, live, and on-demand content, as well as interactive opportunities to discuss current advances in the field in a multidisciplinary context. IASLC will continue to offer the highest quality virtual components for its 2022 meetings, along with a hope to safely return to in-person meetings.

IASLC's crown jewel publication, the *Journal of Thoracic Oncology*, continues its strong global influence with its rising impact factor to 15.609 in 2021, making it 13th out of all oncology journals and 4th out of all respiratory journals. Additionally, the *JTO Clinical and Research Reports* was fully indexed in PubMed during 2021.

In 2021 the IASLC Board of Directors conducted an extensive search for a new Chief Executive Officer after the departure of Dave Mesko in August. In December, we proudly announced that long-standing IASLC member and former Board Member, Dr. Karen L. Kelly, will become IASLC's next CEO in Spring 2022. Dr. Kelly's expertise will take IASLC's commitment to undertake major scientific projects to new levels, and her strong leadership will establish and drive IASLC's strategic projects and initiatives. We invite you to learn more about IASLC's ongoing scientific projects within this report and on the IASLC website.

We welcome your feedback in 2022. For our members who continue to provide world-class care for those impacted by thoracic malignancies, we will be reaching out to you for information in the form of surveys that IASLC's leadership can use to plan future strategy, education, and scientific offerings, as well as how the IASLC can best engage with members in-person and virtually as we emerge from the COVID-19 crisis.

With continual admiration and gratitude, we recognize and sincerely thank the entire IASLC community of researchers, physicians, nurses and allied health professionals, survivors, and caregivers the world over as we seek to conquer thoracic cancers. We look forward to seeing you online and in-person in the months ahead.

Sincerely,

Heather Wakelee, MD

IASLC President

Kristin Richeimer, CAE, DES

IASI C Intorim CEO





# MEMBERSHIP

# TOGETHER, WE ARE CONQUERING LUNG CANCER WORLDWIDE

# IASLC's International and Multidisciplinary Membership

Despite the worldwide focus on COVID-19, IASLC members from all corners of the world continued to drive scientific advancements and collaboration. IASLC members worked in incredibly difficult circumstances during the pandemic. Furthering the mission of the IASLC, members were supported in these global efforts by receiving discounted registration fees to meetings and educational events, complimentary access to the *Journal Thoracic Oncology* (JTO), and discounted publication fees for the open-access IASLC Journal, *JTO Clinical and Research Reports* (JTO CRR).

This year, the IASLC continued to invest in new technologies and infrastructure to enhance the IASLC member experience by integrating a new Learning Management System for credit claim for the 2021 World Conference on Lung Cancer. The IASLC Member Portal, launched last year, now integrates or houses meeting registration directly to provide a quick pre-populated registration process for our members.

By participating in educational events such as the 2020 World Conference on Lung Cancer, the 2021 Targeted Therapies of Lung Cancer Meeting, the 2021 CT Screening Symposium, the 2021 World Conference on Lung Cancer, the 2021 Hot Topic Meeting: Small Cell Lung Cancer, and the 2021 LALCA Schools of Thoracic Oncology Meeting, lung cancer specialists gained access to the latest research and scientific findings in thoracic oncology—further advancing their profession through education and development opportunities.

Comprising every specialty in lung cancer, the IASLC committee members and their contributions are at the heart of the society. As part of our 13 committees, ranging from patient advocacy to scientific committees and more, IASLC committee members continue to contribute their specialized skills and talents to help shape the work of the organization, develop educational content, plan annual meetings, contribute to publications authored by the IASLC, and more.



# **IASLC MEMBERSHIP BY THE NUMBERS**

**MEMBERS BY COUNTRY/REGION** 

NORTH

AMERICA

2 countries

**=40%** 

LATIN

AMERICA

19 countries

=6%

EUROPE 42 countries

ASIA 29 countries

AFRICA 14 countries

=1%

**AUSTRALIA** 1 country

**TOP 10 COUNTRIES FOR MEMBERSHIP** 







CHINA



CANADA



**AUSTRALIA** 









INDIA



**NETHERLANDS** 

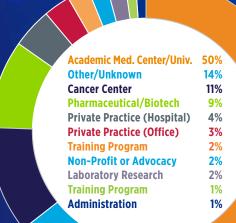


# Male 58% Female 37% Unknown 5%

# 24 or below 1% 25-34 14% 35-44 28% 45-54 26% 55-64 20% 65-74 9% 75+ 2%

# 5,927 MEMBERS TOTAL

# LOCATION-PROFESSIONAL ACTIVITY/PRACTICE



# **MEMBERS BY PRIMARY SPECIALTY**

Medical Oncology	33%
Thoracic Surgery	<b>15</b> %
Other*	10%
<b>Pulmonary Medicine</b>	10%
Cancer Res./Basic Sciences	<b>7</b> %
Radiation Oncology	<b>7</b> %
Pathology	6%
Advocacy	<b>5</b> %
Biotech/Pharm. Industry	<b>3</b> %
Nursing	2%
Diagnostic Radiology	2%

\* Other includes: Pharmacy, Biostatistics, Smoking Cessation, Hematology, Resp. Therapy/ Physiotherapy, Patient/Survivors, Caregivers and Unknown.



# COMMITTEES 2021-2023

Serving on an IASLC committee in a volunteer capacity, members contribute their specialized skills and talents to help define the work of the organization, develop educational content, shape the association's messaging, plan annual meetings, contribute to publications authored by the IASLC, and more.

Committees are accountable to the IASLC Board of Directors, and each committee has a chair (or co-chairs), a board liaison, and a staff liaison. In September 2021, the IASLC Committees transitioned leadership and added new members for the 2021-2023 term. Each committee was carefully selected to ensure relevant expertise, as well as diversity by region and gender.

# **Advanced Radiation Technology (ART) Committee**

Members of the ART committee have planned multiple educational webinars and podcasts, published extensively in the JTO, and collaborated with other radiation oncology societies to develop new guidelines and content this year. **Dr. Fiona McDonald** of The Royal Marsden Hospital in the United Kingdom is the new Committee Chair.

# **Career Development & Fellowship Committee**

**Dr. Ahmed Rabea** of the National Cancer Institute of Egypt chairs the Career Development and Fellowship Committee. Focused on supporting the next generation of lung cancer specialists, this committee reviews and scores applications for research grant funding and selects the recipients.

# **Communications Committee**

The Communications Committee develops campaigns to increase IASLC brand recognition and credibility while educating the public about complex lung and thoracic cancer issues. The committee also reviews articles from the *Journal of Thoracic Oncology* and determine which articles to promote to the media. From press releases to Lung Cancer Considered podcasts, to ILCN articles, Communications Committee members work to enhance the visibility of IASLC on an international stage and provide IASLC members, the thoracic oncology community at large, and the media with accurate and timely perspectives on hot topics in lung cancer. **Dr. Brendon Stiles** of the Montefiore-Einstein Cancer Center in New York is the new Committee Chair.

# **Continuing Medical Education Committee**

IASLC CME activities meet the requirements of the American Medical Association Physician's Recognition Award (AMA PRA).

The Continuing Medical Education (CME) Committee, Co-Chaired by **Dr. Apar Kishor Ganti** of the University of Nebraska Medical Center in the U.S., and **Dr. Nick Pavlakis** of the Royal North Shore Hospital in Australia oversees the CME program of the IASLC to ensure that accredited activities are planned and implemented in compliance with all ACCME Accreditation Requirements, including the ACCME Standards for Commercial Support<sup>SM</sup>. The CME Committee is also responsible for ensuring that



Dr. Fiona McDonald



**Dr. Ahmed Rabea** 



**Dr. Brendon Stiles** 



Dr. Apar Kishor Ganti



**Dr. Nick Pavlakis** 



**Dr. Christian Rolfo** 



Dr. Nan Wu



**Dr. Paul Baas** 



Dr. Maria Ftanou



Dr. Wendy Cooper

# **Education Committee**

Chaired by **Dr. Christian Rolfo** of the Tisch Cancer Institute at Mount Sinai in New York, the Education Committee plans and implements educational activities following the IASLC's mission of providing education and information about lung cancer and other thoracic malignancies to IASLC members, to the medical community at large, and the public. Committee responsibilities include identifying educational needs and practice gaps, developing learning objectives, designing accredited and non-accredited educational programs, and evaluating the effectiveness of IASLC educational activities. The Education Committee works closely with the Continuing Medical Education committee to ensure that activities meet the IASLC CME Mission and are implemented in compliance with ACCME.

# **Membership Committee**

The Membership Committee review and recommend membership status requirements and benefits for all IASLC members by strategizing and implementing tactics to increase and retain association membership in multiple areas of specialty and region. Led by **Dr. Nan Wu** of Peking University Cancer Hospital & Institute in China, this committee emphasizes the benefits that make the IASLC a great value for thoracic oncology professionals and fosters relationships with new members from around the globe.

# **Mesothelioma Committee**

**Dr. Paul Baas** of The Netherlands Cancer Institute is the new Chair of the Mesothelioma Committee. This passionate group is driven to accelerate the pace of research and work across geographies to develop strategic research goals and to bring the disease to the forefront of research. In recent years, there have been several research updates in mesothelioma—many of which were spearheaded by members of this committee.

# **Nurses & Allied Health Professionals Committee**

The Nurses & Allied Health Professionals Committee ensures that IASLC addresses the needs of nurses & allied health professionals involved in thoracic oncology. This committee comprehensively addresses the educational, research, and related needs of nurses and allied health professionals as members of the thoracic oncology team and as IASLC members. Chaired by **Dr. Maria Ftanou** of Peter MacCallum Cancer Center in Australia, this committee is comprised of members of the multidisciplinary team, including: clinical nurse specialists, dieticians and nutritionists, lung cancer nurse specialists, nurse navigators, occupational therapists, palliative care nurses, pharmacists, physician assistants, physiotherapists, radiation oncology nurses, respiratory therapists, psychologists, social workers, speech and language therapists, surgical nursing specialists, and others. The Committee works to develop educational materials, participates in educational events, and creates early-career opportunities to close the educational gaps in thoracic oncology.

# **Pathology Committee**

For more than 35 years, the Pathology Committee has played a fundamental role in fulfilling core aspects of the association's mission, including producing publications, such as the *IHC Atlas*, offering guidance for the organization's annual slate of meetings, and helping to establish the IASLC as an international

leader in the clinical and scientific aspects of lung cancer pathology. **Dr. Wendy Cooper** of the Royal Prince Alfred Hospital in Australia will serve as the new chair of this committee and will lead the many important initiatives of this committee.



Ayten Kayi Cangir, MD Ankara, Turkey

# **Patient Advocates Committee**

The IASLC and the Patient Advocates Committee, welcomes Chair, **Jill Feldman** of the U.S.-based, EGFR Resisters. Jill is committed to diversity and equity and plans to guide the committee to improve the global reach of the IASLC. This committee addresses the direct impact research has on its beneficiaries; patients with lung cancer, and how they can support continued research to improve treatment options and availability. Additionally, the committee addresses the educational opportunities and related needs of the public as an important constituency in the work of the association. By ensuring that all of the society materials include information vital to patients, in terms that resonate with the physicians, the hope is that patient care is high-quality and sensitive.

# **Screening and Early Detection Committee**

The IASLC Screening and Early Detection Committee advance screening and early detection programs through education and research across the globe. Led by **Dr. Stephen Lam** of the BC Cancer Center in Canada, this multidisciplinary group is composed of leaders from radiology, thoracic surgery, pulmonary medicine, medical oncology, nursing, basic science, and advocacy organizations from North America, Europe, Asia, South America, and Africa.

# **Staging & Prognostic Factors Committee**

Staging lung cancer and other thoracic malignancies accurately is critical in deciding treatment regimens and ensuring the best standardized care for patients worldwide. The IASLC's Staging & Prognostic Factors Committee, Chaired by Dr. Hisao Asamura, of Keio University School of Medicine in Japan, actively works to study and improve the current staging system for lung cancer, as well as for thymic, esophageal cancers, and mesothelioma. Over the past 20 years, this Committee has produced a steady stream of evidence-based recommendations for the TNM Classification for Thoracic Cancers, published by the Union for International Cancer Control (UICC) and the American Joint Council on Cancer (AJCC). The project is now entering its third cycle, with the goal of developing recommendations for the 9th edition of TNM.

# **Tobacco Control and Smoking Cessation Committee**

Chaired by **Dr. Bill Evans**, of McMaster University in Canada, the Tobacco Control and Smoking Cessation Committee works to improve patient care by raising awareness of cessation-related data and by the provision of information regarding the latest and most successful cessation techniques for patients with lung cancer. From recommendations for global governments to Tobacco Cessation Moments during IASLC meetings to toolkits for care providers, the Tobacco Control and Smoking Cessation Committee is active and engaged at all levels.

This year the IASLC Tobacco Control and Smoking Cessation Committee further refined "Tobacco Control Moments" that were shared at the 2021 North America Conference on Lung Cancer. These short educational talks discussed how to incorporate delivering smoking cessation across the cancer care continuum, the importance of smoking cessation services in the era of telehealth, the integration of smoking cessation into lung cancer screening through clinical trials, and tobacco product updates and myth busters.

Whitney Lewis, PharmD, BCOP

Houston, TX USA



Jill Feldman



Dr. Stephen Lam



Dr. Hisao Asamura



Dr. Bill Evans

# EDUCATION & CONFERENCES

This year it was imperative for the IASLC to execute impactful and interactive virtual conferences, given the continued, serious public health concerns and restrictions on travel and in-person gatherings due to COVID-19. As a result, the IASLC achieved a portfolio of six fully virtual conferences with pre-recorded, live, and on-demand content. The WCLC 2021 piloted two new session types—Meet the Expert sessions and Brain Exchange sessions, offering the opportunity for greater interactivity, engagement, and member connectivity in a virtual setting.

The IASLC received positive feedback from the majority of conference attendees, with specific mentions of the innovative content, live panel discussions, and live Q&A sessions with industry thought leaders.

As the year progressed, the IASLC Conference Program Committees continued to place a high priority on interactivity in the virtual environment, such as live Q&A; networking lounges; enhanced chat functions with delegates, faculty, patients, and exhibitors; conversation boards with industry experts via Meet the Expert and Brain Exchange sessions; and workshops dedicated to regional specific content and professional segments of the IASLC membership.

While we missed seeing faculty, delegates, and friends in person, these virtual opportunities allowed the IASLC to provide a global platform for even greater global attendance and accessibility.

# **IASLC 2021 CONFERENCES AND EVENTS**



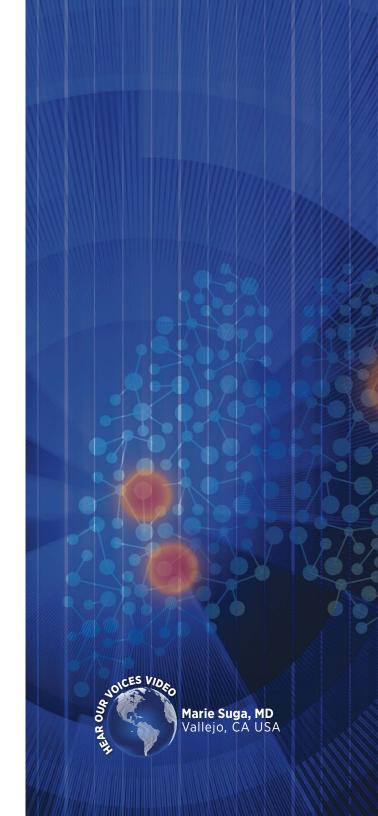


# 2021 Targeted Therapies of Lung Cancer Meeting

FEBRUARY 17-20, 2021 | WORLDWIDE VIRTUAL EVENT MARCH 3-4, 2021 | HIGHLIGHTS FOR EUROPE & ASIA

The IASLC 2021 Targeted Therapies of Lung Cancer Meeting (TTLC21) was held February 17-20, 2021, as a worldwide virtual event. Meeting Chairs, **Drs. Paul A. Bunn, Jr., Roy Herbst, Lecia Sequist**, and **Suresh Ramalingam**, welcomed more than **900 participants** from **50 countries** to share information about ongoing clinical trials of the newest therapies for lung cancer.

Participants were encouraged to actively participate in discussions and engage with industry supporters. Presenters summarized the data on relevant targets for new therapies and shared data on preclinical and early clinical data for each of the drugs directed against these targets. For TTLC21, 27 abstracts were submitted and 16 exhibitors participated in the meeting, with Genentech as the Diamond sponsor. To make the TTLC21 content available to a broader IASLC audience, the Highlights of TTLC, specific for the Europe and Asia regions, was held on March 3-4, 2021 to provide 4 hours of the most practice-impacting TTLC content presented at regional specific times for maximum accessibility.







### MAY 7-8, 2021 | WORLDWIDE VIRTUAL EVENT

The inaugural IASLC 2021 CT Screening Symposium (CTSS21) was initially scheduled to take place as a pre-conference activity to the 2020 World Conference on Lung Cancer (WCLC20) but was rescheduled as a standalone conference when WCLC20 was transitioned to a virtual format. This symposium was designed with new content delivery formats; IASLC pre-released 10+ hours of content while reserving the live program days, May 7-8, 2021, for more robust discussions and attendee engagement.

The Symposium was well-received by delegates and included nearly 450 registrants from 50 countries with access to more than 16 hours of content, including the live discussions and Q&A sessions.

Overall, the IASLC 2021 CT Screening Symposium set the stage for lung cancer screening—providing a comprehensive look at the current status of screening around the globe. This Symposium also presented topics for wider discussion, including the possibility and need for a screening database led by the IASLC; and the IASLC development and implementation of AI analysis on LDCT indeterminate nodules (IPNs, SSNs).

# **CHAIRS:**

# STEPHEN LAM, MD, FRCPC | MATTHIJS OUDKERK, MD, PhD UGO PASTORINO, MD

REGISTRANTS
440

COUNTRIES REPRESENTED

**50** 

44 SPEAKERS 40
PRE-RELEASED

**TALKS** 

DISCUSSANT

LIVE DISCUSSIONS

Q&A SESSIONS

16+

TOTAL HOURS OF PROGRAMMING AND CONTENT

91%

OF ATTENDEES
WOULD RECOMMEND
THIS PROGRAM



# SEPTEMBER 8-14, 2021 | WORLDWIDE VIRTUAL EVENT

The IASLC made an early decision to execute the 2021 World Conference on Lung Cancer (WCLC 2021) as a fully virtual event. The WCLC Conference Chairs, Drs. David Harpole, Thomas Stinchcombe, and Kristin Higgins continued the IASLC's tradition of delivering high-quality educational programs marked by practice-changing abstracts.

Taking the feedback from WCLC20 in January 2021, the IASLC implemented new session formats. Educational sessions were pre-released before live conference days to allow more time and engagement for live discussion and Q&A with speakers. Brain Exchange and Meet the Expert sessions were added to the programming to allow attendees to connect around a specific topic, expert, or area of interest. Lastly, an entire day of WCLC21 was dedicated to Workshop sessions. These sessions provided additional content in the program with a more regional or topic focus content. This allowed participants to connect and interact with other attendees from their geographic region or area of focus.

# **WCLC 2021 AWARD WINNERS**

Each year, the IASLC honors professionals who have made major contributions to the field of thoracic cancers with its Distinguished Service Awards. The association distributes awards that recognize lifetime achievement in specific areas of practice, with the most significant honors—the IASLC Distinguished Service Awards—being distributed during the WCLC Opening Ceremony.





# **2021 LECTURESHIP AWARDS**

During WCLC21, the IASLC presented Lectureship Awards to clinicians and researchers who made significant contributions to the fight against lung cancer. The awards represent major categories of lung cancer research, from tumor staging to tobacco control and smoking cessation. The 2021 IASLC Lectureship Awards winners include:



DANIEL C. IHDE LECTURESHIP AWARD FOR MEDICAL ONCOLOGY Fabrice Barlesi, MD, PhD Pulmonary Medicine Villejuif, France



IASLC LECTURESHIP AWARD FOR TOBACCO CONTROL AND SMOKING CESSATION Graham Warren, MD, PhD Radiation Oncology Charleston, South Carolina, USA



HEINE H. HANSEN LECTURESHIP
AWARD FOR SMALL CELL
LUNG CANCER
Trudy Oliver, PhD
Pharmacology & Cancer Research
Salt Lake City, Utah, USA



FRED R. HIRSCH LECTURESHIP AWARD FOR TRANSLATIONAL RESEARCH Lynette Sholl, MD Pathology Boston, Massachusetts, USA



ROBERT J. GINSBERG LECTURESHIP AWARD FOR SURGERY Shun-ichi Watanabe, MD, PhD Thoracic Surgery Tokyo, Japan



CLIFTON F. MOUNTAIN LECTURESHIP
AWARD FOR STAGING
Ayten K. Cangir, MD
Cardiothoracic Surgery
Ankara, Turkey



TSUGUO NARUKE LECTURESHIP AWARD FOR SURGERY James Huang, MD Thoracic Surgery New York, New York, USA



IASLC LECTURESHIP AWARD FOR NURSES AND ALLIED HEALTH PROFESSIONALS Pippa Labuc, BSc, OT Occupational Therapy London, England, UK



JAMES D. COX LECTURESHIP AWARD FOR RADIATION ONCOLOGY Cecile Le Péchoux, MD Radiation Oncology Villejuif, France

Learn more about the IASLC's Distinguished Service Award Winners, Lectureship Award Winners, and Advocacy Winners.



SEPTEMBER 8-14, 2021 | WORLDWIDE VIRTUAL EVENT

# **QUICK FACTS**

**NUMBER OF INVITED SPEAKERS** 

299

**NUMBER OF PLENARY SPEAKERS** 

26

**INVITED SESSION CHAIRS** 

85

**FEATURED & E-POSTERS** 

530

**NUMBER OF ORAL ABSTRACTS** 

71 ORAL ABSTRACTS

PRESIDENTIAL SYMPOSIUM ABSTRACTS

99 MINI ORAL ABSTRACTS

**EDUCATION AWARDS** 

15x EARLY CAREER

4X
DEVELOPING
NATIONS

# **OTHER FIGURES**

**5,797**DELEGATES

106 COUNTRIES

CME CREDITS

LIVE Q&A
PANEL
DISCUSSIONS

33 EXHIBITORS 15 SYMPOSIUM

**DISCUSSANTS** 

59

\$24,000+

RAISED FOR INTERNATIONAL LUNG CANCER FOUNDATION

# **WCLC MEDIA COVERAGE**

28
NEWS RELEASES
ISSUED

135
REGISTERED
JOURNALISTS

PRESS BRIEFINGS

65,600 TOTAL MEDIA MENTIONS

50,624
VIEWS OF IASLC NEWS
RELEASES ON EUREKALERT
BY JOURNALISTS

123

TOTAL NUMBER OF COUNTRIES IN WHICH MEETING WAS COVERED

UNIQUE ONLINE VISITORS FEATURING WCLC COVERAGE

67,600,000,000



# OCTOBER 29-30, 2021 | WORLDWIDE VIRTUAL EVENT

The fourth biennial IASLC Small Cell Lung Cancer Meeting was held as a Worldwide Virtual Event on October 29-30, 2021. The meeting focused on preclinical and clinical advances in small cell lung cancer (SCLC) research, including, but not limited to, basic research on oncogenesis and biology of disease, preclinical therapeutic research, and highlights of ongoing clinical translation.

From its inception, the SCLC meeting's goals have been to provide a "state-of-the-state" update on recent progress in small cell lung cancer research, to establish a forward-looking perspective on key unanswered questions in the field, and to promote research collaboration among small cell lung cancer investigators.

# **CHAIRS:**

# CHARLES RUDIN, MD, PhD | TRIPARNA SEN, MS, PhD

REGISTRANTS **520** 

COUNTRIES REPRESENTED

SENTED SPEAKERS

42

**73** 

EDUCATION SESSIONS

KEYNOTE SPEAKERS

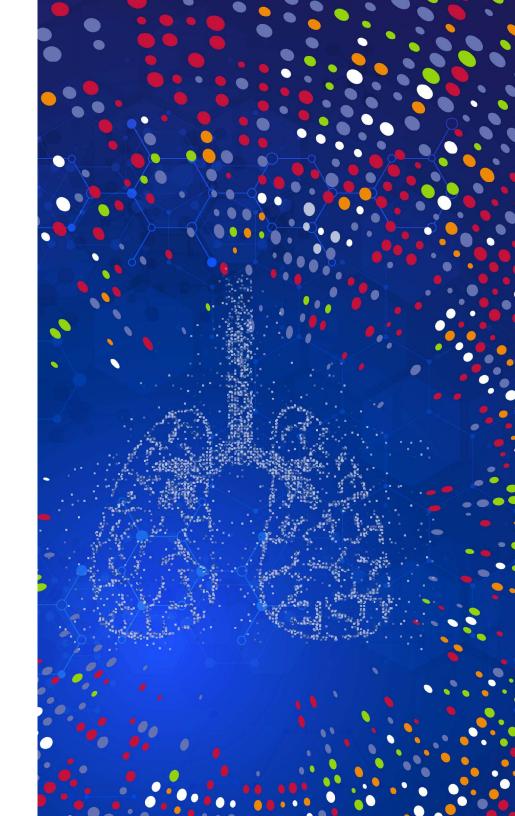
10

2

LIVE Q&A SESSIONS INDUSTRY SYMPOSIUM (1 FOR CME)

12

2







### DECEMBER 3-4, 2021 | WORLDWIDE VIRTUAL EVENT

The 2021 LALCA Schools of Thoracic Oncology, chaired by Drs. Luis E. Raez, Ticiana Leal, Christian Rolfo, and Edgardo Santos, provided wide-ranging and multidisciplinary content across four schools—thoracic oncology, allied health professionals, advocacy, and pathology. The program included a keynote lecture, educational sessions, roundtable discussions, live panel Q+A and a collaborative advocacy session in partnership with the Go2Foundation. The LALCA meeting allowed delegates to learn, share knowledge, and collaborate with delegates from around the Latin American region. With more than 330 registered delegates from 51 countries, attendees enjoyed education and research from 15 sessions and booths from five industry sponsors.

# **CHAIRS:**

LUIS E. RAEZ, MD, FACP, FCCP | TICIANA LEAL, MD CHRISTIAN ROLFO, MD, PhD, MBA | EDGARDO SANTOS, MD, FACP

REGISTRANTS
332

COUNTRIES REPRESENTED

**51** 

**SPEAKER** 

**56** 

**EDUCATION SESSIONS** 

15

LIVE Q&A SESSIONS

15

**KEYNOTE SPEAKERS** 

1

INDUSTRY SYMPOSIUM (1 FOR CME)

2

Looking ahead to 2022, the IASLC is committed to maintaining our high-quality education to ensure our members have the necessary resources to eliminate lung cancer and other thoracic malignancies worldwide. IASLC continues to monitor the COVID-19 pandemic and public safety and will continue to offer in-person and digital meeting options for several of the 2022 IASLC conference programs. It is a primary goal that the IASLC continues to provide practice-impacting education and networking opportunities to advance groundbreaking research to its membership.

# IASLC LUNG CANCER NEWS

# The IASLC Lung Cancer News



The *IASLC Lung Cancer News* (ILCN) is the IASLC's official news medium for thoracic oncology specialists around the globe. ILCN provides its international audience with timely and relevant lung cancer news on topics across specialties and interests, such as medical, radiation, and surgical oncology, as well as patient advocacy, nursing and allied health, and pathology. Led by Dr. Corey Langer as Editor, the ILCN is filled with nuanced expert perspectives on topics that span the lung cancer care continuum, from screening through survivorship to end-of-life conversations.

With new content posting to ILCN.org every two weeks, readers will find content applicable to their specialty and interests. A monthly digital issue was delivered directly to the inboxes of all IASLC members, for those who preferred to read their news "cover to cover."

The physicians, nurses, and patient research advocates in the ILCN Editorial Group ensure that ILCN coverage is not only multidisciplinary, geographically varied, and timely but also nuanced and practical. From expert perspectives on clinical conundrums to how recent drug approvals should or should not change your approach to patient care, the ILCN Editorial Group provides truly specialized and thoughtful insights.



EDITOR

Corey J. Langer, MD, FACP

USA



ASSOCIATE EDITOR
Fabrice Barlesi, MD, PhD
France



ASSOCIATE EDITOR Caicun Zhou, MD, PhD China

By the Numbers...

183,492 unique page views since January 1, 2021

With an average time of **3:59** spent on the page, this is the longest duration of any landing page on IASLC.org!



# **MOST READ ARTICLES**

An overview of the Plenary Presentation during the 2020 IASLC World Conference on Lung Cancer (WCLC) by Ming S. Tsao, MD, FRCPC, of the Princess Margaret Cancer Centre, Toronto, "The New WHO Classification of Lung Tumors" outlined key updates found in the 5th edition of the World Health Organization (WHO) Book on Classification of Thoracic Tumours and was the #1 read article of 2021 with 8,583 reads. This highlights both the high-quality work presented at the WCLC but also the multidisciplinary nature of the ILCN's content and audience.

Although published in 2017, the article "Comments on the 8th Edition of the TNM Classification of Lung Cancer" by ILCN Associate Editor Dr. Fabrice Barlesi and Dr. Eric Vallières has had more than 4,800 reads since the beginning of 2021. One way that the ILCN supports its readers is through articles that offer enduring educational value. With the deadline for data submission for the 9th edition at the end of 2021, concise detailed information about the 8th edition is more valuable now than ever.

During these unprecedented times, the ILCN has provided timely and clinically useful information about COVID-19 and lung cancer care. **More than 4,200 readers** turned to the helpful guidance provided by Drs. Soon Ho Yoon and Jin Mo Goo regarding treatment of patients with lung cancer and ground-glass opacities in their article, **"CT Findings of COVID-19 Pneumonia and Mimicking Diseases in Patients With Lung Cancer."** 

Santiago Ponce-Aix, MD, Head of the Lung Cancer Unit of the Medical Oncology Service of the 12 de Octubre University Hospital in Madrid, presented findings on "Promising Results for Lurbinectedin in SCLC When Paired with Irinotecan" at the 2020 WCLC. This article was read by 3,081 readers.

In "The Role of PORT in Patients With Completely Resected Stage III-N2 NSCLC" pro/con articles by Drs. Annemarie Fernandes Shepherd and Andreas Rimner, respectively, placed the LungART findings in context and highlighted recent insights on PORT-related heart damage. This article was read by 1,025 readers.











# WEBSITE DEVELOPMENT AND INTEGRATION

In 2020 the IASLC took strides to improve its technical infrastructure with the implementation of the new IASLC.org, the new membership portal, and virtual library. With these new systems in place, there was incredible potential for growth across the IASLC's technical platforms.

Throughout 2021 many improvements were made to the IASLC website. During the WCLC 2021, IASLC.org housed all of the WCLC news editions, as well as the featured videos which elevated both the scientific and patient advocate voices on topics discussed throughout the meeting.

To remain transparent with IASLC members, the Board of Directors' page now includes individual Conflict of Interest documents for each Board Member, along with an easily accessible document containing all Board Conflicts of Interests. Additionally, the updated IASLC Bylaws are now featured on their own landing page, which links to the full Bylaws document.



Staying in touch with social media is now more important than ever. In 2021 the IASLC implemented new ways to use its social media platforms to communicate with global members. In June, the IASLC took place in a Twitter chat with Ask Reuters around the ASCO21 meeting. This chat engaged those attending the ASCO meeting to look at IASLC content and become familiar with the content available to them on the society's website. Additionally, the IASLC also hosted its very first Instagram Live broadcast with Dr. Clarissa Mathias, who answered questions in Portuguese about the QOPI initiative. This broadcast was then saved to the @IASLungCancer IGTV feed and is still available for viewing.

In line with the IASLC's Diversity Equity and Inclusion initiatives, IASLC.org was translated into Japanese, Portuguese, and Spanish on select landing pages in December 2021. These translations are easily accessible by clicking the drop-down menu in the top right-hand corner of the page and selecting your desired language. The IASLC encourages its members to use this new feature and send feedback to help improve the quality of the translated content.

Looking forward to 2022, the IASLC already has several new initiatives in the works and is excited to share them with our members in the months to come.



# SCIENTIFIC AFFAIRS

# Staging: Improving Lung Cancer Staging through International Collaboration

For more than 20 years, the IASLC Lung Cancer Staging Project has provided valuable recommendations for the TNM classification of lung cancer—jointly published by the Union for International Cancer Control (UICC) and the American Joint Committee on Cancer (AJCC). The IASLC data collection period to inform the 9th edition of the TNM Staging System ended on December 31, 2021. For the first time, the data will include new elements such as gene mutations, fusions, copy number alterations, and protein expression levels. The goal of these additional tumor characteristics is to significantly enhance the accuracy of the Staging System, leading to more precise treatment regimens and increased patient survival. Learn more about the work here.

As of November 2021, the following number of cases have been collected from more than 20 countries:

89,981

LUNG CANCER CASES 3,695

MESOTHELIOMA CASES 10,171

THYMIC MALIGNANCIES CASES

For the 9th Edition, the IASLC piloted a grant program for the Staging Project to provide funding for institutions located in low- to middle-income countries, or those with high priority datasets, to submit data for the 9th edition. This funding allowed **16 Institutions** from **12 countries** to contribute **9,739 total cases**.

**Learn more** about the IASLC's Staging Project and how to contribute data.



# The LungAmbition Alliance

# Lung Ambition Alliance: STRONGER TOGETHER

# As An Alliance, We aim to



Screening and Early Diagnosis



Innovative Medicine



IMPROVE
Quality of
Care

The IASLC has formed an alliance with the Global Lung Cancer Coalition (GLCC), Guardant Health, and AstraZeneca to accelerate the pace of lung cancer survival worldwide. This collaborative effort allows scientists, specialists, advocates, and patients to break the barriers limiting progress to double 5-year survival rates of lung cancer by 2025. Together, we have identified three key areas of focus that will allow us to drive innovation and improvements in the field and, ultimately, to improve the lives of lung cancer patients worldwide.



# **Lung Ambition Alliance Flagship Scientific Projects**

The Lung Ambition Alliance (LAA) currently oversees multiple groundbreaking scientific projects that bring together oncologists, radiologists, surgeons, pulmonologists, researchers, patients, advocates, and pharmaceutical companies from around the world. These projects span a wide range of topics, from updating the current TNM Staging System, to investigating tumor response, to neoadjuvant therapies that help drive innovation and collaboration in the field of lung cancer.

# Pathologic Response (PR) Initiatives

Before undertaking the Pathologic Response (PR) project by the IASLC and the LAA, there were no established guidelines for processing and evaluating resected lung cancer specimens and there was a lack of precise definitions for the degree of pathological response following neoadjuvant therapy. These recommendations were published in the *Journal of Thoracic Oncology*. The IASLC has begun working on Phase 2 of the PR project, which aims to determine a global cadre of pathologists' reproducibility of histological Major Pathologic Response (MPR) and Pathologic Complete Response (pCR) assessments in surgical resection specimens of lung cancer patients treated with neoadjuvant immune checkpoint inhibitors with and without chemotherapy by implementing the published IASLC recommendations. Each of these steps will help the IASLC and LAA establish PR, MPR, and/or CPR, in surgical resection specimens following neoadjuvant therapies as predictors and surrogate markers of long-term clinical benefit in patients with resected stage I to III lung cancer.

Learn more about the PR Project.

# Phase 2: IASLC Reproducibility Study

The IASLC Reproducibility Study aims to determine reproducibility among pathologists of pathologic response determinations using the IASLC multidisciplinary recommendations for pathologic assessment of lung cancer resection specimens following neoadjuvant therapy. This study brings together an international cohort of 12 pathologists to evaluate 60-90 NSCLC tumors treated with anti-PD-1 or PD-L1 alone or in combination with chemotherapy or anti-CTLA-4 therapy. This study is ongoing and is expected to conclude in 2022.

# Phase 2B: Digital Quantification of Pathologic Response in Neoadjuvant Treated Non-Small Cell Lung Cancer (NSCLC)

In this project, the IASLC will collaborate with a biotechnology company that specializes in developing machine learning technology to assist pathologists with rapid and accurate diagnosis. An Al-driven digital pathology assessment of pathologic response will be compared to manual assessments from the IASLC pathologic response interobserver study. This study will support the validation of an Al-powered assessment of pathological response. This project was conceptualized and fully funded in 2021.

# Phase 3: Lung Cancer Neoadjuvant Trial Endpoint Database (LCNTED)

In the final phase of the IASLC Neoadjuvant Therapies in Lung Cancer Initiative, a multidisciplinary group will identify the data necessary, collect the required information from neoadjuvant trials worldwide, and execute the statistical analyses to support the use of pathologic response as a determinant of long-term outcomes. This process has been accomplished in the CTNeoBC-pooled analysis project analyzing neoadjuvant trials in breast cancers.

Following the lead of CTNeoBC in breast cancers, Phase 3 of the LCNTED initiative will:

- 1. Establish the association between pathologic response and event-free survival (EFS) and overall survival (OS);
- 2. Establish the definition of pathologic response, including MPR and CPR, that correlates best with long-term outcomes:
- 3. Identify the lung cancer subtypes in which pathologic response best correlates with long-term outcomes; and
- 4. Assess whether increases in pathologic response between treatment groups predict improved EFS and OS.

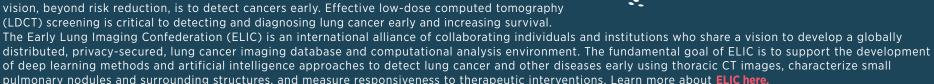
An initiative of this magnitude and importance requires the collaboration of multiple partners and stakeholders to make meaningful progress. Therefore, this initiative will bring together the IASLC membership, FDA regulators, and various leading industry partners, who all share the common goal of eliminating lung cancer as a cause of death.



# Early Lung Imaging Confederation (ELIC)

The vision of the IASLC is to conquer thoracic cancers worldwide. One of the best ways to fulfill this vision, beyond risk reduction, is to detect cancers early. Effective low-dose computed tomography (LDCT) screening is critical to detecting and diagnosing lung cancer early and increasing survival.

distributed, privacy-secured, lung cancer imaging database and computational analysis environment. The fundamental goal of ELIC is to support the development of deep learning methods and artificial intelligence approaches to detect lung cancer and other diseases early using thoracic CT images, characterize small pulmonary nodules and surrounding structures, and measure responsiveness to therapeutic interventions. Learn more about ELIC here.





Stephen Lam, MD, FRCPC British Columbia Cancer Research Vancouver. Canada



Witold Rzyman, MD Medical University of Gdansk Gdansk, Poland



Kazuto Ashizawa, MD Nagasaki University Nagasaki, Japan



Ugo Pastorino, MD IRCCS National Cancer Institute Foundation Milan, Italy



Claudia Henschke, MD, PhD Mount Sinai Hospital New York, NY USA



Annette McWilliams, MD Fiona Stanley Hospital Perth. Australia



Bruno Hochhegger, MD, PhD University of Health Sciences of Porto Alegre Porto Alegre, Brazil



# LUNG CANCER CONSIDERED

with Dr. Stephen Liu and Dr. Narjust Duma an IASLC Podcast



Listenership to Lung Cancer Considered, the official podcast of the IASLC, nearly doubled in 2021. Join your peers in listening for conversations with the clinicians, researchers, healthcare professionals, patients, and advocates who are making a difference in the treatment of thoracic cancers.

Highlights include podcasts in languages other than English, meeting highlights, virtual tumor board discussions, seminal trial series, new approvals, and trending topics, including preauthorization, burnout, etc., in lung cancer.

Listen here and join the conversation.



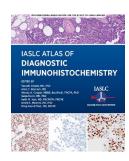
# **Quality Oncology Practice Initiative (QOPI)**

In 2021, the IASLC expanded its partnership with the American Society of Clinical Oncology (ASCO) and the QOPI program in Spain. We continue to work closely with the Foundation for Excellence and Quality in Oncology (ECO) to improve the quality of lung cancer care across Spain. The IASLC also continued our efforts in Brazil and we expect to build upon these partnerships in the coming years. Learn more about the QOPI project.



# **Diagnostic Immunohistochemistry Atlas**

This year, the IASLC Pathology Committee, led by the editorial group of Drs. Yasushi Yatabe, Alain Borczuk, Wendy Cooper, Sanja Dacic, Keith Kerr, Andre Moreira, and Ming Tsao, developed the *Atlas on Diagnostic Immunohistochemistry* (IHC). This Atlas is an expansion on the JTO publication from 2019 and serves as a guidebook for pathologists as they continue to improve the diagnosis of thoracic cancers through IHC. This important resource has also been translated from English to simplified Chinese, Japanese, and Spanish. Download or order your IHC Atlas.



# CancerLinQ

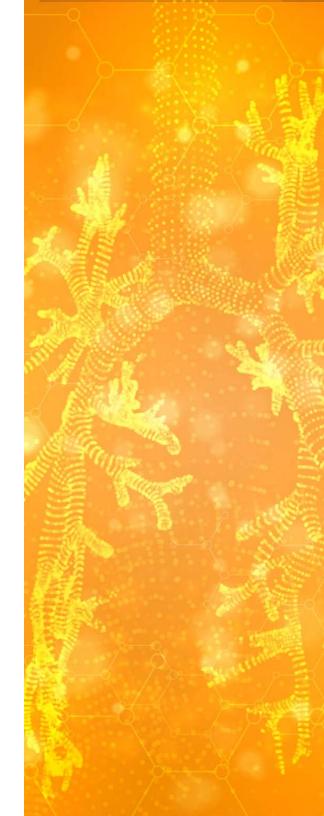
The IASLC, in partnership with Emory University, is working collaboratively with ASCO to expand the specialized expertise informing CancerLinQ\*, a health information technology platform, developed by oncologists for oncologists, to enhance and improve the understanding and treatment of cancer. With leaders from Emory, we've investigated the database with queries on EGFR Exon 20 Insertion Mutations that culminated in a presentation at WCLC 2021. Several new projects are in the planning phase for 2022.

# Impacts of COVID-19 on International Lung Cancer Clinical Trials Project

The COVID-19 pandemic has impacted cancer clinical trials. Although we have studies focused on the impact of the pandemic on new cancer diagnoses and cancer clinical trial participation in general, none have focused specifically on the impact of COVID-19 on lung cancer clinical trials. The lung cancer community must understand the impacts of COVID-19 on lung cancer studies and identify measures to mitigate those impacts to continue to move the science of lung cancer treatment forward and to improve patient outcomes.

The purpose of this IASLC study was to determine the extent to which lung cancer clinical trials have been impacted by the pandemic across the whole spectrum of care in all regions of the world and how those impacts have been mitigated. Additionally, the study identified additional mitigation measures, and potential ways to modify the structure of the clinical trials process to increase patient and physician participation to expedite the expansion of effective treatment options for lung cancer patients. This survey engaged clinicians, industry partners, and regulatory bodies and was shared during the Presidential Symposium at the 2021 World Conference on Lung Cancer.





# JTO & JTO CRR

# Providing Impactful and Accessible Research for the Lung Cancer Community

The **Journal of Thoracic Oncology** (JTO), the IASLC's official journal, has become the field's authoritative publication for education and information related to all aspects of thoracic malignancies. The JTO includes original research, reviews, and opinion pieces, and reaches a diverse audience, including epidemiologists, statisticians, medical oncologists, radiation oncologists, thoracic surgeons, pulmonologists, radiologists, pathologists, and research scientists with a special interest in thoracic oncology.

The JTO's influence on the field is represented by its increased impact factor, which has climbed dramatically in recent years. The 2020 impact factor for JTO is 15.609 up from 13.357 in 2019. This moves the journal's rank to 4<sup>th</sup> among 64 respiratory medicine journals and 13<sup>th</sup> among 242 oncology journals.

# **JTO CLINICAL AND RESEARCH REPORTS**

JTO Clinical and Research Reports (JTO CRR) transitioned to article-based publishing and became a monthly publication in 2021. In just 10 short months, the JTO CRR became indexed in PubMed Central. JTO CRR's success and continued growth are a reflection of the support of our readers, authors, and reviewers. This open-access journal broadens the reach of the IASLC throughout the world, offering unfettered access to the thoracic oncology community.

J T O R A N K I N G S:

ONCOLOGY JOURNALS

13 OUT OF 242 N K

RESPIRATORY JOURNALS

OUT OF

64 IN 2020

IN 2020

It is generally difficult for organ-specific oncology journals to make a significant impact in the oncology publishing landscape. With an Impact Factor of 15.609, JTO is the leading journal in thoracic oncology and, in the top fifteen (ranked 14th) of all cancer journals," said Editor-in-Chief, Dr. Alex A. Adjei, MD, Ph.D. "JTO's emphasis on multidisciplinary research is one of its strengths and serves the broad community of researchers in this field."



-Alex A. Adjei, MD, PhD Editor-in-Chief JTO
Impact Factor
increases to
15.6091

JTO 2021 ARTICLE DOWNLOADS

3,775,790

JTO CRR 2021 ARTICLE DOWNLOADS

222,446







# PATIENT **ADVOCACY**



Advances in the early detection of lung cancer, care of patients living with lung cancer, and novel treatment options have grown exponentially over the past decade. The IASLC recognizes the importance and value that patients with lung cancer, their caregivers, and patient advocates bring to the lung cancer community and to the organization. Lung cancer patient advocates were active participants in many IASLC activities such as podcasts, webinars, conference planning, abstract reviews, meeting presentations, and ILCN articles. The IASLC strives for inclusivity, and we hope to increase the pace of knowledge sharing and advancements in care by offering the patient advocate community opportunities to:

- Attend conferences:
- Build relationships with researchers and care providers:
- Lend their voices, sitting side-by-side with researchers and members of the care team; and
- > Share their perspectives and experiences.

# IASLC Supportive Training for Advocates on Research & Science (STARS)

The IASLC STARS program aims to increase the number of patient research advocates (PRAs) equipped to provide accurate scientific translation in their online or real-life groups for patients with lung cancer and their caregivers and to provide the patient perspective for lung cancer research and policy.

In its third year, and amid the continued COVID-19 pandemic, the program remained fully virtual. To ensure maximum knowledge sharing and opportunities to network, STARS proudly partnered with Research Advocacy Network (RAN). Online training modules on the RAN platform were assigned to each PRA. Additionally, with support from established research advocacy mentors and key opinion leaders within the lung cancer community, the IASLC coordinated pre-recorded presentations for the PRAs to watch, Sadly, PRA Diane Van Keulen and Rebecca Yeung (the wife of PRA Wayne Yeung) died from their cancer during the STARS Program, and PRA Aliye Bricker experienced cancer progression and died after the program ended. We honor their contributions to the lung cancer patient research advocacy community.

### RESEARCH ADVOCATES



Aliye Bricker



Sarah Christ



**Seamus Cotter** IRELAND



Tiffany Fagnani



Leslie LaChance USA



Nabanita Mandal INDIA



Jacquelyn Nixon



Stella O'Brien UNITED KINGDOM





### PATIENT RESEARCH ADVOCATES



Korina Pateli-Bell GREECE



Angus Pratt CANADA



Andrea Redway
CANADA



Mike Smith USA



Bärbel Söhlke GERMANY



Diane Van Keulen CANADA



Wayne Yeung

STARS was developed by the IASLC in collaboration with lung cancer research advocates and patient advocacy nonprofits. We proudly recognize the following contributing organizations:

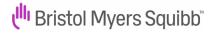






We Are Also Grateful for Our 2021 Sponsors









# **IASLC Language Guide**

The IASLC Language Guide was developed by members of the IASLC Patient Advocates Committee to provide guidelines on best practices with common phrases used during presentations at IASLC conferences and within submitted abstracts.

The Guide is not meant to call people out. It's meant to call people in and be used to promote the use of language that respects the dignity of people diagnosed with lung cancer and their families. As an international organization, the IASLC recognizes that language and meaning may vary depending on the context. What is important is that, together, we take conscious steps to be thoughtful in the language we use. While the use of the resource is recommended for IASLC meetings, it is the wish of the authors that such language becomes incorporated in all avenues of scientific presentations.

### **Read the ILCN Article**



**Download the IASLC Language Guide** 



# **CANCER CARE TEAM AWARDS**

Overall and Regional Winner
Asia/ROW
Peter McCalllum
Cancer Centre,
Melbourne, Australia
Benjamin Solomon, MD
Nikki Plumridge, MD

Benjamin Solomon, MD Nikki Plumridge, MD Mary Duffy, RN Ekaterina Kamysheva, MD

Regional Winner North America UW Health Madison, Madison, Wisconsin Narjust Duma, MD Clare O'Connor, MD Pam Sekelsky, RN Aimee Huey, RN Kimberly K. RN

Regional Winner
Latin America
Instituto Nacional de Cancerología
(National Cancer Institute),
Mexico City, Mexico

Oscar Arrieta, MD Feliciano Barrón, MD Luis Cabrera, MD Francisco Corona, MD Edgar Varela, MD Adriana Lopez, MD David Heredia, MD

Regional Winner Europe
Royal Marsden Hospital & Institute
of Cancer Research,
London, England
Sanjay Popat, MD
Joanna Vick, MD
Susanne MacMahon, MD
Fiona McDonald, MD
Liam Welsh, MD



# **IASLC CANCER CARE TEAM AWARD**

The IASLC Cancer Care Team Award is a prestigious award honoring and recognizing outstanding patient care served by multidisciplinary teams working together. Nominations are accepted from all over the world by individual patients with lung cancer and/or their caregivers/care partners. The IASLC is proud to honor the following winning teams of the 2021 IASLC Cancer Care Team Award:



**OVERALL WINNER**Asia/ROW: Peter MacCallum Cancer Centre,
Melbourne, Australia



REGIONAL WINNER
Latin America: Instituto Nacional de Cancerlogia, Mexico City,
Mexico



**REGIONAL WINNER**North America: UW Health Madison, Madison, Wisconsin , USA



REGIONAL WINNER
Europe: Royal Marsden Hospital & Institute of Cancer Research,
London, England

# WEBINARS

In response to the COVID-19 pandemic, the IASLC conducted a series of CME-accredited webinars in 2020 and 2021 to provide a global forum for multidisciplinary perspectives on the diagnosis and management of lung cancer within the COVID-19 environment.

# **2021 IASLC Webinars:**

# COVID-19

 Managing Clinical and Translational Research During COVID. (January 15, 2021)

# Other topics

- State-of-the-Art in Combination Immuno/Radiotherapy for Non-Small Cell Lung Cancer (January 20, 2021)
- IASLC 2020 World Conference on Lung Cancer Singapore: Highlights (February 22, 2021)
- Challenging Cases in Lung SBRT (April 22, 2021)
- Prehabilitation: Optimizing Patients to Improve Outcomes Pt. 1 (May 19, 2021)
- Prehabilitation: Optimizing Patients to Improve Outcomes Pt. 2 (July 13, 2021)
- Global Access to Radiotherapy for Lung Cancer (September 22, 2021)
- World Conference on Lung Cancer 2021 Highlights (October 1, 2021)

# Patient Advocacy/non-CME

 What Do All Those Lines and Colors Mean? Interpreting Cancer Data Plots (August 26, 2021)

# ATTENDEES BY CONTINENT













Asia

Rest of World



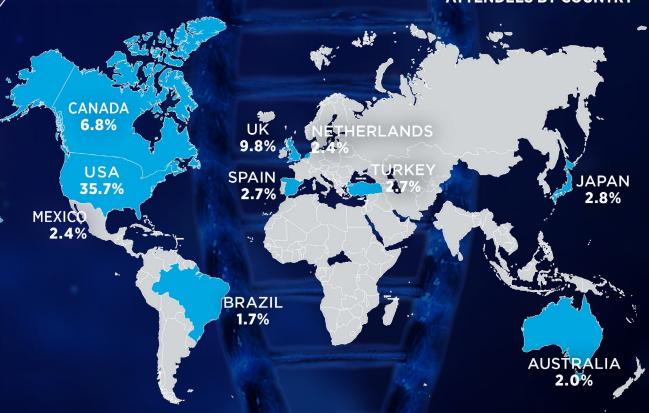
# **ATTENDEES BY PRIMARY SPECIALTY**

**Radiation Oncology** 34.7% 11.4% Other **Medical Oncology** 11.3% Advocacy 10.1% **Thoracic Surgery** 6.8% Biotech/Pharmaceutical Industry 6.4% Nursing 4.9% Cancer Research/Basic Sciences 4.7% **Pulmonary Medicine** 4.1% Resp Therapy/Physiotherapy 2.4% Pathology 1.6% Pharmacy 1.0% **Diagnostic Radiology** 0.4% **Biostatistics** 0.2% 1,271
TOTAL ATTENDANCE



**ATTENDEES BY COUNTRY** 

CLICK TO ACCESS RECORDED WEBINARS





# ORPORATE RELATIONS

With the continuation of the all-virtual era, the IASLC expanded our virtual sponsorship portfolio and executed top-tier events with new and long-standing corporate partners. In addition to our meeting and event opportunities, we also offered specialized partnerships to support the development of the IASLC resources, programs, scientific projects, and more. We would like to extend a sincere thank you to the top sponsors of 2021.

To explore all the opportunities to engage with the IASLC, please contact us at corporaterelations@iaslc.org.



















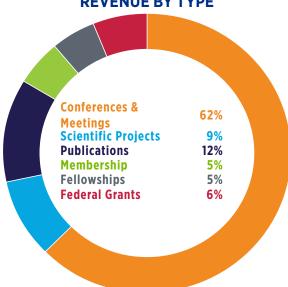




# FINANCIALS

	December 31 (Unaudited)	
	2021	2020
Program Revenues	\$12,784,644	\$7,148,662
Membership Revenues	\$744,497	\$632,870
Other Revenues	\$927,858	
Total Revenues	\$14,465,999	\$7,781,532
Direct Program Expenses	\$7,582,308	\$4,584,120
G&A Expenses	\$5,115,252	\$5,520,532
Total Expenses	\$12,697,560	\$10,104,652
Operating Surplus (Deficit)	\$1,759,439	(\$2,323,120)
Other Income/Expense	\$950,000	\$65,296

# **REVENUE BY TYPE**



# December 31 (Unaudited)

	2021	2020
Assets	\$17,513,885	\$20,406,491
Liabilities	\$3,592,894	\$9,194,939
Net Assets	\$13,920,991	\$11,211,552



# INTERNATIONAL LUNG CANCER FOUNDATION

Despite advances in research and early detection that are creating better outcomes and hope for lung cancer patients and their families, lung cancer claims more lives each year than breast, colon, and prostate cancers combined—yet lung cancer receives disproportionately less government research funding per cancer death than other types of cancer. This makes the need for private support of lung cancer research, like that provided to the International Lung Cancer Foundation (ILCF), critical.

Donations from patients, caregivers, other individuals, as well as from our organizational and corporate partners, directly fund our Research Grants Program—a global education initiative funding fellows and young investigators undertaking innovative research to eradicate lung cancer and other thoracic malignancies.

# 2021 Donations

2021 was the ILCF's most successful individual fundraising year ever. By continuing to make donating easier, we generated \$119,850 from 652 donors in 2021. We are grateful to each individual who donated to support lung cancer research in 2021. Please click **here** for the full list of our 2021 donors.

# **2021 Research Grants Program**

In 2021, the Foundation awarded 14 Research Grants totaling \$1 million. This year's grant recipients represent another diverse group of early-career researchers from around the world. The ILCF Research Awards are made possible by donations from individual donors, foundation partners, and pharmaceutical companies and foundations.

# **2021 Funding Partners**





**2021 Foundation Partners** 











# **Donation Sources**



### 2021 ILCF YOUNG INVESTIGATOR GRANT RECIPIENTS

For investigators who are ready to begin independent research studies, the ILCF offers multiple grants on an annual cycle, dependent on the geographic region of the applicant. These one-year grants are for \$50,000 in research funding.

### RECIPIENTS

**Dr. Chiara Ambrogio,** University of Turin, Italy

**Project Title:** Identification of On-Target and Off-Target Resistance to KRAS-G12C Inhibitors by Comparing KRAS Inhibition versus KRAS Degradation



**Dr. Andrew Chow,** Memorial Sloan Kettering Cancer Center, USA **Project Title:** Leveraging CD39 as a Biomarker of Tumor-Reactive CD8+ T-Cells to Improve Precision Immunotherapy



### **2021 ILCF FELLOWSHIP GRANT RECIPIENTS**

Exclusive to fellows, these grants provide \$50,000 for a one-year research project. Opportunities are numerous and based on the geographic region of the applicant.

### **RECIPIENTS**

Dr. Afaf Abed, Edith Cowan University, Australia

**Project Title:** Genomic HLA and Pre-Treatment TCR Repertoire as Biomarkers of Response to Immunotherapy in Advanced Non-Small Cell Lung Cancer Patients



**Dr. Adithya Balasubramanian,** Walter & Eliza Hall Institute of Medical Research, University of Melbourne, Australia

**Project Title:** Deciphering the Regulation of the Antigen Presentation Machinery in Lung Adenocarcinoma and Its Impact on Response to Immunotherapy



Dr. Jose Carlos Benitez, Institut Gustave Roussy, France

**Project Title:** Immune and Molecular Characterization of Thymic Epithelial Tumors Enrolled in IFCT-1104 RYTHMIC



**Dr. Misty Shields,** University of South Florida, Moffitt Cancer Center, USA

**Project Title:** Investigation of APR-246 in Small Cell Lung Cancer



### **ILCF BOARD OF DIRECTORS**



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IA



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Kristin Richeimer, CAE, DES Secretary & IASLC Interim CEO USA



auren Fisher Member USA

Thank you to Dr. Giorgio Scagliotti, who successfully served on the ILCF Board until September 2021, when the Board transitioned its members.

"It is my pleasure to pledge a contribution match of up to \$5,000 in support of this unique international organization that casts a wide net to conquer thoracic malignancies worldwide."

During WCLC 2021, Dr. David Gandara generously announced a dollar-for-dollar donation match of up to \$5,000 for all donations received during the conference. Dr. Gandara's generosity encouraged attendees to support



research grants that will help conquer lung cancer worldwide, and The International Lung Cancer Foundation is very grateful for the additional funding.



# 2021 Donors

### \$50,000+

Gazdar Bypass Trust

### \$5,000

David and Diane Gandara

### \$2,000

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Aki Kobayashi
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Andre L. Moreira
Andrea Borondy Kitts
Angela Takano
Anne M. Traynor
Anne Traynor
Annmarie Priest
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