

# MSTS Newsletter

Volume 28, Fall 2021

## Inside this Issue

President's Report . . . . .1	Musculoskeletal Tumor Registry . . . . .5	Practice Management Committee . . . . .8
Treasurer's Report . . . . .2	Education Committee . . . . .5	Sarcoma Strong Corner . . . . .10
MSTS Executive Committee . . . . .2	Thank You Donors! . . . . .6	Future Meetings . . . . .12
2021 Specialty Day . . . . .5	Evidence Based Medicine Committee . . .8	

## President's Report – Carol Morris MD, MS



Carol Morris MD, MS

It has been a busy and productive year with unprecedented activities of the Society. We hosted our first virtual Specialty Day program in March with an excellent program put together by

Pietro Ruggieri Nick Bernthal and the Specialty Day committee. Shortly after that, we officially left the AAOS as a managed society and went independent with a handful of other orthopaedic societies collocating in shared office space and keeping our existing staff. In the Summer, we began the process of taking over the Fellowship Match which had been previously managed by AHHKS. All these activities have helped to build the strength of the Society and move us forward.

As the days start getting shorter and we head into Fall, plans continue for what we hope will be a vibrant and interactive Annual Meeting. This meeting will take place in Baltimore, Maryland from October 6-8th. Although we know some will not be able to participate in person because of institutional travel bans or other reasons preventing you from traveling, we hope you will still feel a part of this event through the interactive Chime app that we

are using this year. Our meeting is known for its robust discussion, and we hope whether in person or from the comforts of your office or home, you will provide that interaction for the benefit of all of the members of the Society.

Our Welcome Reception will be Baltimore themed – come hungry for crab cakes and some other local favorites. For our social event Thursday evening, we will be taking over the hotel restaurant – Maximon – which offers a menu that reflects a fusion between Mexican and Southern American cuisine. Their mission is to create an unforgettable dining experience while showing respect and appreciation to the cultures we have learned from. We hope this will provide our guests with a memorable and fun evening that will minimize interactions out of the hotel.

Our Annual Program Committee led this year by Odion Binitie has

done the hard work of putting together a great program which will keep you engaged throughout. In addition, we are looking forward to the Presidential Guest Speaker – Otis W. Brawley, MD, MACP,

*Continued on page 2*



### MSTS 2021 Hybrid Annual Meeting

(Live and Virtual)

October 6, 7 and 8, 2021

Four Seasons Hotel  
Baltimore, Maryland



Dr. Carol Morris  
MSTS President



Dr. Odion Binitie  
Program Chair

## Treasurer's Report – Benjamin Miller, MD, MS

Despite continued challenges and uncertainty around COVID, the financial health of the Society remains strong. Some of this is due to forces out of our control, such as our investment portfolio, which has continued to perform well and enhance our general fund and Hatcher investments. Membership dues are a critical part of our predictable revenue stream, and necessary to be able to provide administrative support, stability, and overall function to the organization. We thank all the members who have continued to commit to the MSTs through the last 2 chaotic years.

As I write this, it is not clear whether the Annual Meeting will be able to be held as a hybrid in-person/virtual meeting, or whether it will be converted to a completely virtual experience. Despite this, we continue to have steady support from our industry partners. Much thanks to Austin Medical Ventures, BoneSupport, Biocomposites, Carbo Fix, Checkpoint Surgical, Daiichi Sankyo, Inc., Illuminos, Implantcast, LinkBio, Medtronic, Merete, MTF Biologics, NuVasive, Onkos Surgical, Stryker and Zimmer Biomet. The commitment of industry to our Society has been imperative in maintaining the mission of the MSTs.

Once again, the positive contributions of Matt DiCaprio and other members through Sarcoma Strong serve as a motivational beacon as to what can be done locally to further sarcoma research, regardless of institution size or resources. This effort grows by the year and there is no end in sight!

I would like to thank the members of the Finance Committee, Danny Lerman, Christian Ogilvie, and Nicola Fabbri for their insight and assistance. Finally, thanks and recognition to Kerri Mink and Deborah Meyer for their help with the finances and management of the MSTs.

## President's Report, cont'd from pg. 1

FRCP(L), FASCO, FACE who will be speaking Friday morning on "Cancer Control in the 21st Century" with a focus on health care disparities in oncology.

We hope you saw the [welcome video](#) by our local hosts Adam Levin and Albert Aboulafia – they have been working hard to make this a memorable and fun event. We encourage you to pre-register to ensure that we are able to plan for all attendees both in person and virtual. We have had a great response from Industry supporting the meeting this year and hope you will take the time to visit them in

person in the exhibit hall or virtually in the exhibit hall. We also thank our Diamond Sponsors – Daiichi Sankyo, Inc., Medtronic, Onkos Surgical and Stryker and invite you all to attend each of their product theaters taking place through the event.

As my presidential year continues to draw to an end, I am thankful for the hard work and dedicated leadership of the Executive Committee. They have been a great sounding board as we worked through this year's challenges. While I did not accomplish all I set out to do this year, I will continue to work hard for the MSTs in the

coming years. I am grateful to have had the opportunity serve our community and profession. We are truly a remarkable society.  
Carol

### 2021 Dues

If you have not already paid your 2021 dues, please do so! Have questions logging in?

Call our office at 847/698-1625.

## MSTS Executive Committee

### President

Carol D. Morris, MD  
cmorri61@jhmi.edu

### President-Elect

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### Secretary

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### Immediate Past President

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### Past President

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Wakenda K. Tyler, MD  
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### Research Committee

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### Membership Committee

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brian.brigman@duke.edu

### Members-at-Large

Lukas Nystrom, MD  
nystrol@ccf.org  
Megan Anderson, MD  
Megan.Anderson@childrens.harvard.edu

# Less Tumor. More Data.

Learn more at our upcoming product theater on  
Friday, October 8, 9:25 AM – 9:45 AM ET

## A Unique Approach to Treatment in Diffuse PVNS/TGCT

Presented by:

**Francis J. Hornicek, MD, PhD**

Professor and Chair, Department of Orthopaedics  
Sylvester Comprehensive Cancer Center  
University of Miami Miller School of Medicine

PVNS=pigmented villonodular synovitis; TGCT=tenosynovial giant cell tumor.

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ABSTRACT  
OF THE YEAR

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**Medtronic**

#### REFERENCES

Levy J, Hopkins T, Morris J, et al. Radiofrequency ablation for the palliative treatment of bone metastases: outcomes from the multicenter OsteoCool tumor ablation post-market study (OPuS One study) in 100 patients. *J Vasc Interv Radiol.* 2020;31:1745–1752. <https://doi.org/10.1016/j.jvir.2020.07.014>

Levy J, David E, Hopkins T, et al. Radiofrequency ablation for the palliative treatment of osseous metastases: final results from a multicenter study (OPuS One). Abstract presented at the Society for Interventional Radiology Annual Scientific Meeting. Virtual. 2021.

Levy J, David E, Hopkins T, et al. Improvement in quality of life in patients treated for painful osseous metastases with radiofrequency ablation: The OPuS One Study. Abstract presented at the Society for Interventional Radiology Annual Scientific Meeting. Virtual. 2021.

**Indications and Risks:** The OsteoCool™ RF Ablation System is intended for ablation of benign tumors such as osteoid osteoma and for palliative treatment in spinal procedures by ablation of metastatic malignant lesions in a vertebral body. It is also intended for coagulation and ablation of tissue in bone during surgical procedures, including palliation of pain associated with metastatic lesions involving bone in patients who have failed or are not candidates for standard therapy. Risks of the system include damage to surrounding tissue through iatrogenic injury as a consequence of electrosurgery; pulmonary embolism; nerve injury including thermal injury, puncture of the spinal cord or nerve roots potentially resulting in radiculopathy, paresis, and paralysis. The OsteoCool Bone Access Kits are indicated for percutaneous access to bone.

## 2021 MSTs Specialty Day – by Pietro Ruggieri, MD, Chair

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This year, on Friday 26th March the MSTs Specialty Day 2021 took place as a virtual meeting.

The program was developed under the leadership of myself, Pietro Ruggieri, MD PhD, as the Committee Chair; the Vice Chair, Nicholas M. Bernthal, MD; the member David M. King, MD.

An outstanding group of distinguished speakers was assembled from six continents, in order to cover: The State of Research; Critical Issues & Update on Emerging Drugs; New Technologies – Innovative Techniques.

Special emphasis was put on Musculoskeletal Oncology with the presentations from members of MSTs, EMSOS and ISOLS,

which showcased the role of International Societies and the potential collaborations in promoting education in this field.

Attendees had the opportunity to see different approaches to challenges faced in orthopaedic oncology, and particularly to: be aware of cutting-edge sarcoma research being performed in North America, Europe and Asia; recognize different approaches to complex surgical cases; identify new medical, non-surgical options for giant cell tumor of bone, tenosynovial giant cell tumor, and sarcoma; understand the FDA approval process for new therapeutics and differences between device approval and drug approval. Moreover, thanks to interactive sessions, attendees had the possibility to contribute to collaborative solutions for the presented cases.

It has been a great pleasure to cooperate with Nicholas Bernthal and David King – whose terrific support led to very positive feedback from the attendees -, and count on the excellent assistance from Mrs. Deborah Meyer and Mrs. Kerri Mink.

Organizing the MSTs Specialty Day 2021 represented an invaluable opportunity to further stress and enhance the internationalization of our Society.

We look forward to seeing you again in 2022!  
Pietro Ruggieri

PS. The whole event was recorded and can be viewed at the following [link](#).

## Musculoskeletal Tumor Registry Update – by Benjamin Miller, MD, MS

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The Musculoskeletal Tumor Registry (MsTR) has now fully contracted 21 institutions, with many more in the queue. We continue to make steady progress toward a functional and searchable database, and the AAOS has committed to the final development of the MsTR sarcoma and metastatic disease of bone modules as a strategic goal in Q1 of 2022.

Under the guidance of Adam Levin, this year saw the publishing of our first Annual Report Preview, with an explanation of the potential benefits of participation and an example of the future interface of the registry through the provider-facing dashboards. Additional Steering Com-

mittee members, John Alexander, Megan Anderson, George Calvert, Eric Henderson, Nate Mesko, Mark Scarborough, and Kristy Weber, have worked on this and other projects diligently since the group was formed last year.

Another priority of the MsTR is to continue working with David Greenberg and his OREF-sponsored randomized controlled trial in giant cell tumor of bone. We are working with his team to explore the use of the MsTR as a data collection instrument for this and future clinical trials. Our hope is that the lessons learned with this project will inform how the registry may be used to facilitate prospective clinical in-

vestigations in the future. Centers that are involved in this trial will be prioritized for contracting and enrollment in the MsTR. Finally, a thanks to Peter Rose for his work on the Steering Committee and as the liaison to create a spine tumor module with the American Spine Registry. Peter will be resigning his seat on the committee to take over as Editor-in-Chief of JAAOS. We wish him luck in this endeavor and look forward to welcoming Joe Schwab to fill his role.

If any further questions or if you would like to explore joining the MsTR, <https://www.aaos.org/registries/> has additional information.

## Education Committee Update – Wakenda Tyler, MD

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This has been a rousing year for everyone. Many of our original educational plans have been sidelined by the pandemic and continue to be sidelined by the pandemic. Thankfully, our membership has remained resilient through all of this and we have found ways to stay connected, albeit mostly in the form of virtual interactions. We hope you were able to join us for some of our virtual symposiums this past spring and winter. We are also continuing our virtual symposium series this fall to help

supplement our membership's educational experiences. Please look out for the announcement regarding our virtual symposium titled "Computer Assisted Surgical Planning for Tumor Resections", which will occur in November of this year. For those of you who attended the AAOS meeting in San Diego, we hope you enjoyed the tumor paper presentations, symposiums and ICLs.

A lot of work and effort have gone into preparing this upcoming year's annual meeting, including provisions to convert to a virtual meeting format. We will also continue to plan for the AAOS and Specialty Day meetings in the spring of 2022 and hopefully will be able to provide many of the members of the orthopaedic community and our membership some great educational events through our ICLs and symposiums.

## Thank you Donors!

### MSTS and OREF Donations 2020 and 2021

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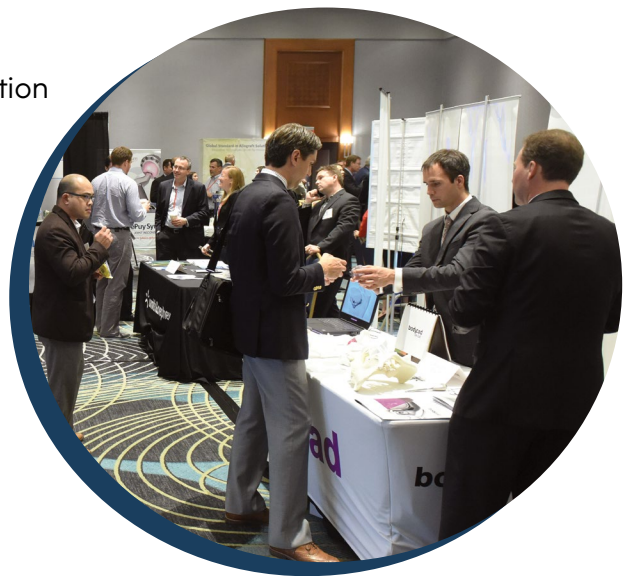
*Donations processed from October 1, 2020  
August 31, 2021*

# THANK YOU

The Musculoskeletal Tumor Society extends sincere appreciation to the following exhibitors for their generous support of the MSTS 2021 Annual Meeting

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## Evidence Based Medicine Committee – Felasfa Wodajo, MD, Chair

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The goal of clinical practice guidelines (CPGs) is to improve quality of care. Until now, all musculoskeletal oncology practice guidelines have been produced by other societies. At the end of 2020, the MSTS launched an important initiative to develop its own clinical practice guidelines (CPGs).

While orthopedic oncology has a paucity of randomized controlled studies, high quality and trustworthy CPGs can be produced if a rigorous and transparent process is followed. Thus we have partnered with AAOS Clinical Quality and Value Department to produce a carefully written methodology which adheres to international standards. A CPG methodology spells out, among other things, criteria for assembling workgroups, inclusion and exclusion criteria for evidence, how the evidence quality is graded and rules for deciding recommendation strength.

Having completed the draft our MSTS CPG Methodology, we are now starting work on our first CPG, on Surgical Treatment of Humeral Metastatic Disease and beginning to recruit volunteers for the physician workgroup. In the past, MSTS members have readily volunteered to serve on other societies' workgroups. We hope this enthusiasm continues as MSTS develops its own clinical practice guidelines.

In addition, we continue to collaborate with other medical and surgical societies. This multidisciplinary approach allows us to share ideas and increase the visibility of our society. We have submitted for publication our finished multidisciplinary CPG on Metastatic Carcinoma and Myeloma of the Femur. This is already available on the [MSTS website](#) and via the [AAOS Orthoguidelines website](#) and app. A multidisciplinary CPG on Radiation Therapy for Treatment of Soft Tissue Sarcoma was

completed by The American Society of Radiation Oncology (ASTRO) and is now [published](#). Steve Thorpe of the EBM committee represented MSTS on the workgroup and other MSTS members served as peer reviewers. We have two ongoing collaborations with American College of Radiology (ACR) to develop structured reporting formats, known as [Reporting and Data Systems \(RADS\)](#). The first, on bone radiology, has reached an intermediate milestone while a second on soft tissue imaging is just starting. Both have MSTS members on the workgroups.

The EBM committee serves the MSTS membership. If you have any ideas for guidelines or other quality improvement projects, please do not hesitate to reach out to [myself](#) or any EBM committee members.

## Practice Management Committee – Adam S. Levin, MD, Chair

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The last year has seen tremendous shifts in how we manage our practices. It's hard to imagine that it was only at the beginning of this year that we adjusted to fundamental changes in outpatient Evaluation and Management coding guidelines. While these changes did not pertain to consultation codes, nor inpatient encounters, our members have noted that our respective institutions' EHRs have responded relatively well, despite the marked adjustments involved in outpatient coding.

Still, these E&M coding changes have resulted in numerous questions regarding their interpretation. In March 2021, a retroactive technical correction document was released by the AMA. We have worked together with the AAOS and other Orthopaedic Societies to not only advocate for our members and our practices, but also to clarify appropriate interpretation of the current guidelines as written.

Following the COVID-19-related expansion of telehealth services in Spring 2020, we have also noted marked shifts in the adoption of remote visits. The Department of Health and Human Services has extended the suspension of some of the site of service restrictions for telehealth services during the Public Health Emergency. However, despite the current surge of COVID-19 cases related to the Delta variant, most states have retired the emergency measures related to interstate licensure. As MSTS members often care for patients traveling far distances, we need to remain up to date on interstate licensure regulations for telemedicine encounters.

On a separate note, the Practice Management Committee continues to investigate opportunities to educate our members regarding trends and expectations regarding targets and expectations. We appreciate and welcome the valuable input as

to how we can best provide value to our members. In addition, the Medicare Physician Fee Schedule and Outpatient Prospective Payment System proposals have been released for comment, including plans for a decreased Medicare conversion rate, adjustments in split-shared services, and reversal of some of the Medicare Inpatient-Only designations related to orthopaedics. We will continue to advocate for our members, and will update the MSTS membership regarding these legislative changes that may impact our practices.

Please feel free to reach out at any time: [alevin25@jhmi.edu](mailto:alevin25@jhmi.edu). Otherwise, please stay well and we look forward to seeing you all in person soon!





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# Sarcoma Strong Corner – Matthew R. DiCaprio, MD

*“The roots of all goodness lie in the soil of appreciation for goodness.”*

– Dalai Lama

With the 2021 Global Virtual Sarcoma Strong event completed on August 13-15th it is with immense gratitude and pride that I share our successes through collaboration, partnerships and friendships. A common goal unites us and each year as we grow it is wonderful to share with the membership. A global community came together to stand in solidarity with sarcoma warriors and offer hope and inspiration.

A special acknowledgement to Megan Anderson, MD who was able to pull off an in-person event in Boston, August 14th and really drive participation numbers and lead all fundraising. Congratulations Megan for having the top two fundraising teams raising close to \$25,000. We look forward to seeing Boston Sarcoma Strong in 2022. There was one other in person event on July 24th organized by Ewing’s sarcoma survivor, Shaine Munoz from El Paso, Texas. SarcomaStrong has grown through social media outreach primarily through Instagram @sarcomastrong. Shaine and I connected last year and he ran the event and was inspired to organize one this year through our support and guidance. The rest of the world partici-

pated by walking, running, biking, jumping rope, or really any activity to show support and camaraderie. The team from the Philippines Orthopaedic Center lead by Dr. Abi Tud was nearly 70 strong and even during a lockdown found creative ways to be involved and spread awareness. [See event results and photo.](#)

2021 Global event by the numbers:

- Over 1600 participants and donors worldwide
- From 11 countries (United States, Canada, Japan, India, United Kingdom, Switzerland, Philippines, Germany, Panama, Australia, Puerto Rico)
- And 35 US states
- \$130,000 raised to support Sarcoma research

We are hopeful for an in person event in Albany in 2022, a Global Virtual event, and ideally several independent events throughout the US and Canada. Our [donation page](#) remains open for those who wish to support in this capacity. Thank you to all of the individuals, departments, and institutions who participated this year and previous years.



## Orthopaedic Oncology Centers Supporting SarcomaStrong in 2021

United States Centers (Team Leader)

Albany Medical Center

– Matthew DiCaprio

Montefiore Medical Center

– David Geller and Bang Hoang

University of Rochester

– Heidi Fitzgerald

Harvard Combined Program

– Megan Anderson

Virginia Cancer Specialists

– Felasfa Wodajo

UCSF

– Rosanna Wustrack

University of Mississippi

– Izuchukwu Ibe

NYU Langone

– Karim Masrouha

MD Anderson Cooper

– Tae Won Kim

Columbia

– Wakenda Tyler

Dartmouth

– Eric Henderson

Rush Orthopaedics

– Steven Gitelis

Summa Health

– Scott Weiner

John’s Hopkins Orthopaedics

– Carol Morris

UC Davis

– Stacy Judkins

Karmanos Cancer Center

– Alysia Kemp

MD Anderson Houston

– Bryan Moon

University of Florida

– Andre Spiguel

International Centers (Team Leader)

McMaster’s University

– Michelle Ghert

University of Kanazawa

– Katsuhiko Hayashi

Yellow Ribbon India

– Pramod Chinder

Philippines Orthopaedic Center

– Abigail Tud

Swiss Orthopaedic Network

– Bruno Fuchs

The Gujarat Cancer & Research Institute

– Abhijeet Salunke

## Sarcoma Strong Corner, cont'd from pg. 10

For the remainder of 2021 we will continue to look for new areas to grow as an organization. The more institutions we can on board the better. Some still may be hosting events later this year, notably MD Anderson Houston lead by Bryan Moon. We also want to shine a light on all previous grant recipients. To highlight their work, progress, presentations, publications, and future grants made possible from SarcomaStrong funding. Each recipient will be contacted for an interview, and we hope to share their work in future newsletters, on the MSTs and SarcomaStrong websites.

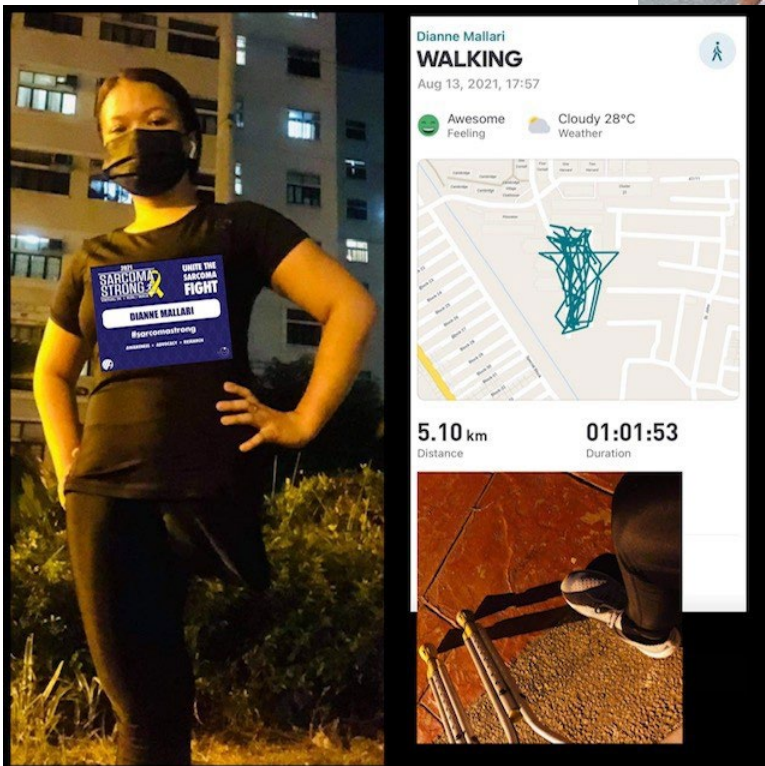
We have exceeded our goals for 2021 with our best participation and fund-raising year since our inaugural event in 2015. This was only possible through teamwork, collective effort with a shared vision.

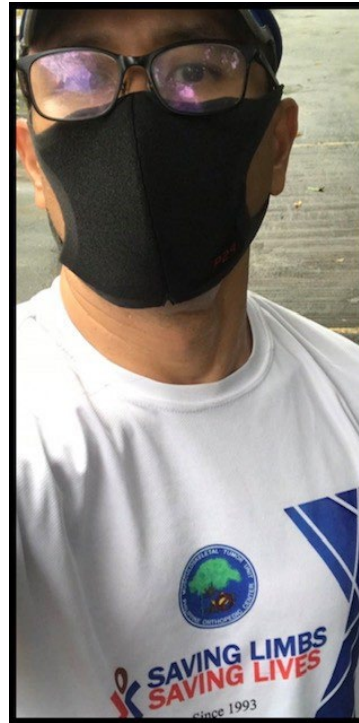
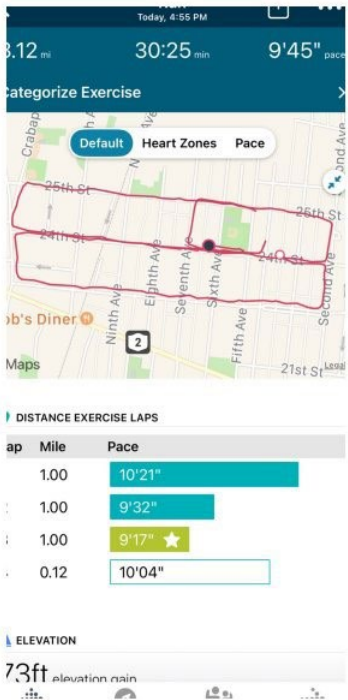
Our essential intent at SarcomaStrong is to connect the Global Sarcoma Community of warriors, scientists and clinicians. To lead efforts of continuous knowledge improvement of this rare disease and in delivering better care and treatments to all sarcoma patients.

As more institutions join our efforts, we are optimistic that we can continue to fund sarcoma research for our society and offer hope to our patients for years to

come. If you are considering starting an event at your institution, please visit [www.sarcomastrong.com/startup](http://www.sarcomastrong.com/startup) for documents and tips to help take your ideas and put them into action. Please feel free to reach out directly to me at [dicaprm@amc.edu](mailto:dicaprm@amc.edu) for any guidance and support. Together we Unite the Sarcoma Fight!

*Continued on page 12*





## Future Meetings



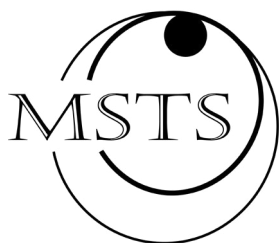
### 2022 Specialty Day Meeting

Date: Saturday, March 26, 2022

Location: Chicago, Illinois

### 2022 MSTs Annual Meeting

Date and Location: TBD



# Musculoskeletal Tumor Society

1515 E. Woodfield Road, Suite 345 • Schaumburg, IL 60173

website: [www.MSTS.org](http://www.MSTS.org)

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