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## President's Report – Rajiv Rajani, MD



*Rajiv Rajani, MD*

Greetings and best wishes to the members of MSTS! It is my privilege to provide an update on the immediate past and future goals of the Executive Committee. To start, I would like to thank and recognize Kerri Mink and Deborah Meyer for their administrative support of the Society and continued flawless execution of our annual meeting in Chicago. I am incredibly privileged and humbled to serve as the society President, following in the footsteps of fantastic leaders. I also am awestruck the passion and capabilities of our Executive Committee who always seem to have incredible ideas that will carry us forward over the next decade.

**2024 Annual Meeting:** You never know how an Annual Meeting will be received, nor about the weather as you proceed through the scheduling process. However, I can say that our Annual Meeting in Chicago was both the best Annual Meeting yet and with near perfect weather. On the Chicago River, we saw not only 1 but 2 Presidential guest speakers. First, Dr. Stuart Weinstein spoke about the role of physicians in advocacy, a topic that our society has taken head on. Dr. Weinstein shared anecdotes and data to help understand the problems that we as physicians, orthopaedic surgeons, and orthopaedic oncologists face to protect our ability to provide the best care to our patients. He was followed by Dr. Jim Weinstein on the use of Artificial Intelligence in health care and how industry is using AI to better improve lives. He graciously shared his personal experience with cancer and how large data could potentially change how we approach our management. In follow up, the MSTS has initiated the steps to form an AI workgroup so that we address

ideas and opportunities that may benefit from the incorporation of AI in our practices. Keep your eyes open for this volunteer opportunity in the near future.

The Annual Meeting was also highlighted by a few other events. Specifically, the Nurse and Allied Health Professionals Workshop was well-received and was encouraged to become an annual event instead of alternating years. As our nurses and APP's are instrumental parts of our team, we look for ways to further engage them as part of our society. Dr. Binitie from the Membership committee is actively working to create a membership category so that they can look to the MSTS as their primary source of practice education.

This year, we also introduced the "Pathways" session highlighting the different career tracks that orthopaedic oncologists can pursue as part of the career. A panel conversation to advise attendees on how to best succeed in an "educator" pathway was well attended and looks to be part of our future meetings.

Lastly, we held our inaugural "Percutaneous Pelvis Workshop". This experience was sponsored by numerous industry allies with a hands-on experience for members that participated. As technology evolves, percutaneous pelvic fixation has become a standard treatment modality in orthopaedic oncology surgery. However, there are many of us who have limited experience with these techniques. The MSTS saw the opportunity to improve the knowledge of our members and we look to do this again in the future. Feedback was universally positive.

Overall, the Annual Meeting is a time for all of us to connect, enjoy the company of others, and enjoy learning about our specialty. After our social event at the Chicago Field Museum, it will be tough for us to top in the future. Congratulations to

*Continued on page 2*

Benjamin Miller and Lukas Nystrom and the many volunteers on the Annual Meeting Committee for making this a wonderful experience for the rest of us.

**2025 Specialty Day:** With the 2024 Annual Meeting over, the next event for the Society is MSTs Specialty Day during the 2025 AAOS Annual Meeting in San Diego. Please note that Specialty Day is on Friday, March 14th (no longer on Saturday) and features an eclectic experience led by Alan Blank, Alex Lazarides, and Panos Papagelopoulos. Specialty Day differs from the Annual Meeting in the opportunity to explore areas of our practices or professional lives apart from scientific abstracts. This year's meeting will be of an international flavor as we have invited speakers from all over the world on a variety of topics that are relevant to our practices. We also will have an "eye-opening" discussion with young members diagnosed and treated for bone sarcomas which I am sure you don't want to miss. I look forward to seeing you in San Diego and welcoming our speakers.

**Committees and Task Forces:** While several of our committees continue with experienced and effective leadership (Adam Levin – Practice Management, Nick Tedesco – Guidelines and Evidence-Based Medicine, Bang Hoang – Research, Ginger Holt – Education, Santiago Lozano-

Calderon – Fellowship, and Odion Binitie – Membership), several important committees have new chairs. We welcome Cecilia Belzarena – Communications who has taken over for Tae Kim. We thank Tae for his time and the progress that was made on our website and social media platforms. Phil Wodajo has steered the Metastatic Bone Disease Task Force into a committee. Our Society is fortunate to have engaged committee chairs and committee members and I encourage anyone who wants to take an active role in the MSTs to apply for any open committee seats this summer, or any other time there is a call to serve on a committee, task force, or work group.

**Advocacy:** In 2024, the MSTs created the Advocacy Task Force with the intention of supporting our patients and our society members. As the lead of the task force, we have created a strategic plan for our efforts which center on improving patient care. As part of this task force, the MSTs has aligned with the AAOS as a member of the Advisor's circle. We have also been working to build a toolkit to help orthopaedic oncologists in being better advocates for themselves and their patients. As most that have been involved in advocacy know, the seeds you lay take years to grow, and we hope that the society and our members will come together to create a strong, unified voice in helping patients.

**2025 Annual Meeting:** By now, most of you know that we have decided to have our Annual Meeting in a unique location: Mexico City (CDMX) on December 3-5th. For those that have never been to CDMX, I can personally share that your expectations will only be surpassed. There are more Michelin starred restaurants than you can imagine and more museums than any almost any other city in the world. As a North American organization, I felt it time to build relationships with our neighbors to the south. Greg Domson and Santiago Lozano-Calderon have just begun to lead the planning committee and we look forward to sharing more with you in the next newsletter. At this time, I can share that I have recommended the theme of the meeting to be "Dispelling Myths". I hope you are able to present your research that makes us all rethink our practices, embracing improvement and revisiting our guiding principles. Stay tuned on future announcements including a grant writing workshop, presidential speaker, and many of the other amazing member benefits. Overall, we are off and running in 2025! If anyone has any comments, ideas, or otherwise, please do not hesitate to reach out to me or the other members of the Presidential Line (Benjamin Miller, Francis Lee, Matt DiCaprio, and Nick Bernthal).

See you all in San Diego!



## MSTs Executive Committee

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# 2025 MSTs Specialty Day: A Celebration of Collaboration and Innovation

– Panayiotis J. Papagelopoulos, MD, DSc, FACS, Chair

The Musculoskeletal Tumor Society (MSTS) is delighted to announce that the 2025 MSTs Specialty Day will take place in the vibrant city of San Diego, California, on **Friday, March 14, 2025**. This year's program is a testament to the collective efforts and expertise of our members, led by **Alexander Lazarides, MD** (Member-at-Large), **Alan Blank, MD** (Vice Chair), and **Panayiotis Papagelopoulos, MD** (Chair). Their leadership has shaped a dynamic and thought-provoking event, offering a platform for innovation, debate, and connection.

The Specialty Day is the result of significant collaboration across the MSTs community and beyond. Every element of the program reflects the commitment of our speakers, moderators, and contributors to advancing the field of musculoskeletal oncology.

We extend our heartfelt thanks to all who have contributed their time and expertise, particularly **Kerri Mink** and **Deborah Meyer**, whose support has been invaluable in bringing this event to life.

This year's program is structured around a series of carefully curated sessions that address a wide range of clinical and research topics relevant to orthopedic oncology. Each session promises to spark new ideas, tackle key controversies, and explore the potential of emerging technologies to shape the future of our field.

The first session delves into cutting-edge approaches in orthopedic oncology, exploring **Computer-Assisted, Robotic-Assisted, and Cutting Guide-Assisted Surgery**. Moderated by **David Joyce**, and **Julia Visgauss**, this session will feature speakers such as **Lee Jeys**, who will discuss the benefits of computer navigation and robotic-assisted surgery, and **Valerae Lewis**, who will highlight the advantages of resection cutting guide technology. These presentations will be complemented by **Alan Blank's** exploration of the continuing role of traditional techniques in pelvic sarcoma surgery.

Another highlight is the session on **Controversies in Metastatic Disease**, moderated by **Christina Gutowski, MD**, and **Tae Won Kim, MD**. This session will address diverse approaches to managing metastatic bone disease, with speakers such as **Cory Couch**, who advocates for open surgery, and **David King**, who will discuss percutaneous treatments. **Santiago Lozano-Calderon** will round out the session by exploring alternative and additional treatments for extremity metastases.

The program also features a session on **Past to Present Technologies**, moderated

## 2025 Specialty Day Meeting



Friday, March 14, 2025  
San Diego, CA

### With Sincere Appreciation

MSTS extends our sincere appreciation to the following industry partners for their generous support. We are grateful for your ongoing dedication to MSTs:

#### Diamond Level:

Daiichi Sankyo, Inc. Onkos Surgical  
SpringWorks Therapeutics, Inc. Stryker Zimmer Biomet

Platinum Level:  
Medtronic

## Plan to Attend the Musculoskeletal Oncology ICL's Approved for AAOS Meeting in San Diego in 2025

- Advances in Surgical Planning and Reconstruction of the Shoulder Girdle after Oncologic Resection
- Management of the Infected Endoprosthesis
- If You Don't Ask, You Don't Get: When to Ask for Help from Plastic Surgeons in Orthopaedic Oncology and Traumatology
- Reconstruction of Bony Defects with Motorized Intramedullary Nails: State of the Art
- Percutaneous Treatment of Periacetabular Metastatic Disease
- Check the AAOS meeting app for times and locations.

by **Nicola Fabbri**, and **Alex Callan**, which will examine the transformative impact of artificial intelligence (AI) and other advanced technologies. Presentations will include **Panos Korfiatis** on AI in imaging, **Manish Agarwal** on AI-based surgical planning, and **Anthony Bozzo**, who will present data on technological breakthroughs. **Sean Kelly** and **Mark Scarborough** will provide unique perspectives, with the latter offering a historical overview of technologies in orthopedic oncology.

Our keynote speaker, **Doug Letson**, will deliver an inspiring presentation on **Novel Therapies for Bone and Soft Tissue Sarcomas**. His insights into the use of genetic signatures, radiomics, and immunotherapy will undoubtedly spark meaningful conversations about the future of personalized care.

The session on **Personalized Care for Sarcoma**, moderated by **Izu Ibe** and **Lor Randall**, will further explore this theme. Topics will include advancements in diagnostic techniques, systemic treatment options, and personalized instrumentation and implants. Speakers such as **Andrew**

*Continued on page 5*

## Communications and Technology Committee Update – Cecilia Belzarena, MD, Chair

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As we embrace a new year, we want to take a moment to recognize the dedication and leadership of Dr. Tae Kim, who has served as chair of the Communications & Technology Committee. His contributions have been instrumental in shaping our initiatives, and we sincerely thank him for his efforts. We also want to acknowledge the hard work and commitment of our committee members, whose efforts have been invaluable in driving our projects forward. With a new chair in place, we look forward to continuing this momentum and exploring new opportunities to enhance MSTs communications.

One of our major projects is the upcoming

launch of the newly reformatted MSTs website. This platform will better serve our members and the musculoskeletal oncology community with improved accessibility and resources. We are also excited to be developing content for the patient library section, a key initiative supported by the Education Committee and many engaged members who have volunteered their expertise.

In addition, to expand the reach of our resources, we are translating the MSTs Clinical Practice Guidelines into Spanish. This initiative aims to support our Spanish-speaking colleagues worldwide and strengthen our global impact. We are

also launching a new Member Spotlight series, highlighting the incredible work and contributions of our members. Keep an eye on our communication channels—our website, monthly e-blast, newsletter, and social media—for these exciting features.

We welcome your feedback and ideas as we continue to grow and improve. If you have suggestions, please reach out to us at [info@msts.org](mailto:info@msts.org). Thank you for being part of this journey—we look forward to an exciting year ahead!

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

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I wish to extend a sincere “thank you” to all of the members of the Practice Management Committee. While the early parts of 2025 have been quite active, we continue to monitor legislative and executive changes in Washington, particularly as it relates to our patient care and research needs. I’ll extend a special thanks to Alan Blank and his research team for leading the analytics of the Benchmarking Survey that was performed in the fall. We look forward to sharing the results with the membership by Specialty Day. We had a good membership response to the survey, which is important since this effort is key and critical to understanding compensa-

tion models and how they relate to clinical productivity. In addition, our membership’s input helps us better understand the nature of the practice patterns for active orthopaedic oncologists in the United States.

We have also had a busy winter working with the CPT Editorial Board in trying to further optimize the CPT coding options for orthopaedic oncology procedures. More information should be forthcoming on those results. Future areas of focus include investigation of coding practices related to osseointegration, together with our colleagues in other subspecialty societ-

ies. Our committee is also committed to better understanding the value that our membership provides to our patients, our institutions and practices, and to society on the whole.

Recognizing that our primary goal is to serve the MSTs Membership, we would like to actively invite input and feedback as to what ways the Practice Management Committee can do to support you. Thanks again to the committee members for all of their engagement and hard work. We’re looking forward to seeing everyone in San Diego.

## Fellowship Committee – Santiago Lozano Calderón, MD, PhD, Chair

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On behalf of the Fellowship Committee, I would like to wish to each of you and your families a very happy and blessed 2025 filled with joy and health. We welcomed as new members Alex Christ and Matthew Wallace while we thank Walton Zeke and Matthew Houdek for their hard work and service for the past 3 years.

We have reviewed the applications for the ONKOS travelling fellowship and will an-

nounce awardees at Specialty Day.

We continue to work with the education committee on the design and planning on a future MSTs sponsored fellowship course.

We successfully held our winter program director meeting and had a very fruitful discussion about the work being done with the ACGME aiming to identify the defining procedures of Musculoskeletal Oncology

and the appropriate number of case volume for training purposes. We have revised the current 5 MSTs recognized programs and reviewed the application for two new fellowship programs. Feedback to these programs will be given in late February of this year.

We continue working on the new innovations platform which would be reflective of the work with ACGME. We look forward seeing you in San Diego for Specialty Day.

# Musculoskeletal Tumor Registry Update – Benjamin J. Miller, MD, MS

We are focusing on what we feel are 4 tangible and attainable goals in 2025. First, we have created an “Alternative Entry Pathway” for those who are interested in joining the registry but have encountered impediments with institutional IT support (which we have found as the biggest barrier to participation). This is a REDCap short form that contains the minimal data elements required to identify a patient as appropriate for inclusion in the MSTR. This will allow participants to formally enroll in the registry, contribute patients, and participate in research projects while waiting to become completely up and running with the full data collection platform. Our hope is that this is a successful mechanism of entry into the registry effort and will increase participation and enthusiasm during the year.

Next, we will continue to work with sites to submit complete data sets. We currently have 8 institutions doing so and hope to add at least 5 more. We plan on offering a REDCap option for the smartforms in addition to our current workflow through Epic. Finally, we anticipate submission of a large PCORI grant and an abstract using actual patient data from the registry.

Our work with other specialty societies on international collaboration through registry data is continuing to progress. We are in the process of agreeing upon a minimal data set for anyone who treats sarcoma (which will be very similar to our REDCap short form). We have 10 members in the working group, representing MSTs, ISOLS, EMSOS, APMSTS, and SLATME, and are planning hybrid meetings at the EMSOS meeting in Italy in April and MSTs meeting

in Mexico in December.

Thanks to all the hard work of the Steering Committee: Data Elements Subcommittee Chair Nate Mesko, Publications Subcommittee Chair Adam Levin, Grants Subcommittee Chair Eric Henderson, and members Megan Anderson, Joe Schwab, Meredith Bartelstein, Josh Lawrenz, Shalin Patel, Rosie Wustrack, and Kristy Weber.

As always, we encourage all interested surgeons or institutions to join the effort! If any further questions or if you are considering joining the MSTR, please reach out to me or another Steering Committee Member, or explore <https://www.aaos.org/registries/> for additional information and contacts for you and your institutional support team.

## Save the Date

This year’s meeting will take place December 3-5 at the Hyatt Regency in Mexico City.

Watch the [MSTS website](#) for the preliminary agenda, information on housing, room rates, and meeting registration.

Prepare your abstracts now! MSTs will open the call for abstracts on April 14, 2025. The deadline to submit abstracts for the 2025 Annual Meeting is May 12, 2025.



## 2025 MSTs Specialty Day, cont'd from pg. 3

**Rosenberg, Steven Robinson, and Panayiotis Papagelopoulos** will guide us through these critical discussions.

The final session, focusing on **Research, Education, and Mentorship**, will highlight the human element of orthopedic oncology. Moderated by **Alexander Lazarides**, and **H. Thomas Temple** the session will include presentations by **Anna Khachatryan** on her experiences as a female orthopedic oncologist, and a **MIB Young Adult Patient Panel**, which will offer unique insights into the desires and experiences of sarcoma patients. Additional presentations will include updates on **Sarcoma Strong Grant** by **Julia Visgauss**, the **Sarcoma Strong Foundation** by **Matthew DiCaprio**, and the

### PERFORM Study by Michelle Ghert.

The day will conclude with the **Musculoskeletal Oncology Unknowns Show and Award Presentation**, an engaging way to celebrate the creativity and expertise of our community.

As we approach this extraordinary event, we are filled with excitement and gratitude.

The 2025 MSTs Specialty Day promises to be a celebration of innovation, collaboration, and shared purpose. We invite you to join us in San Diego to engage with thought leaders, contribute to important conversations, and deepen your connec-

tions within the orthopedic oncology community.

Thank you to all who have made this event possible, especially **Mrs. Deborah Meyer** and **Mrs. Kerri Mink**. Your support, along with the efforts of **Alan Blank** and **Alexander Lazarides**, has been instrumental in creating this program. We look forward to welcoming you to San Diego on March 14, 2025, for a day filled with inspiration, learning, and camaraderie.

See you there!

Panayiotis J. Papagelopoulos, MD, DSc, FACS  
Chair, MSTs 2025 Specialty Day Program  
Committee

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#### Warnings and Precautions

**Diarrhea:** Diarrhea, sometimes severe, can occur in patients treated with OGSIVEO. Diarrhea occurred in 84% of patients treated with OGSIVEO, and included Grade 3 events in 16% of patients. Median time to first diarrhea event was 9 days (range: 2 to 434 days). Monitor patients and manage using antidiarrheal medications. Modify dose as recommended.

**Ovarian Toxicity:** Female reproductive function and fertility may be impaired in patients treated with OGSIVEO. Impact on fertility may depend on factors like duration of therapy and state of gonadal function at time of treatment. Long-term effects of OGSIVEO on fertility have not been established. Advise patients on the potential risks for ovarian toxicity before initiating treatment. Monitor patients for changes in menstrual cycle regularity or the development of symptoms of estrogen deficiency, including hot flashes, night sweats, and vaginal dryness.

**Hepatotoxicity:** ALT or AST elevations occurred in 30% and 33% of patients, respectively. Grade 3 ALT or AST elevations ( $>5 \times$  ULN) occurred in 6% and 2.9% of patients. Monitor liver function tests regularly and modify dose as recommended.

**Non-Melanoma Skin Cancers:** New cutaneous squamous cell carcinoma and basal cell carcinoma occurred in 2.9% and 1.4% of patients, respectively. Perform dermatologic evaluations prior to initiation of OGSIVEO and routinely during treatment.

**Electrolyte Abnormalities:** Decreased phosphate (65%) and potassium (22%) occurred in OGSIVEO-treated patients. Phosphate  $<2$  mg/dL occurred in 20% of patients. Grade 3 decreased potassium occurred in 1.4% of patients. Monitor phosphate and potassium levels regularly and supplement as necessary. Modify dose as recommended.

**Embryo-Fetal Toxicity:** OGSIVEO can cause fetal harm when administered to pregnant women. Oral administration of nirogacestat to pregnant rats during the period of organogenesis resulted in embryo-fetal toxicity and death at

maternal exposures below human exposure at the recommended dose of 150 mg twice daily. Advise pregnant women of the potential risk to a fetus. Advise females and males of reproductive potential to use effective contraception during treatment with OGSIVEO and for 1 week after the last dose.

#### Adverse Reactions

The most common ( $\geq 15\%$ ) adverse reactions were diarrhea (84%), ovarian toxicity (75% in the 36 females of reproductive potential), rash (68%), nausea (54%), fatigue (54%), stomatitis (39%), headache (30%), abdominal pain (22%), cough (20%), alopecia (19%), upper respiratory tract infection (17%), and dyspnea (16%).

Serious adverse reactions occurred in 20% of patients who received OGSIVEO. Serious adverse reactions occurring in  $\geq 2\%$  of patients were ovarian toxicity (4%). The most common laboratory abnormalities ( $\geq 15\%$ ) were decreased phosphate, increased urine glucose, increased urine protein, increased AST, increased ALT, and decreased potassium.

#### Drug Interactions

**CYP3A Inhibitors and Inducers:** Avoid concomitant use with strong or moderate CYP3A inhibitors (including grapefruit products, Seville oranges, and starfruit) and strong or moderate CYP3A inducers.

**Gastric Acid Reducing Agents:** Avoid concomitant use with proton pump inhibitors and H2 blockers. If concomitant use cannot be avoided, OGSIVEO can be staggered with antacids (e.g., administer OGSIVEO 2 hours before or 2 hours after antacid use).

Consult the full Prescribing Information prior to and during treatment for important drug interactions.

#### Use in Specific Populations

Because of the potential for serious adverse reactions in breastfed children, advise women not to breastfeed during treatment with OGSIVEO and for 1 week after the last dose.

Please [click here](#) for full Prescribing Information.



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# Guidelines and Evidence Based Medicine Committee Update – Nicholas Tedesco, DO, Chair

The Guidelines and Evidence-Based Medicine (GEBM) Committee has been busy collaborating with the MSTs executive and finance committees. Together, along with the GEBM immediate past chair, Felasfa Wodajo, we have developed a brand new MSTs Quality Fund. This fund will mature over time and continue to be available as general funds for the MSTs as a whole if needed. However, it will provide first-of-its-kind quality improvement project and research grants that will be funded each year, with the first grant this year being for \$5,000. A forthcoming solicitation for applications will be coming from [info@msts.org](mailto:info@msts.org), so please be on the lookout for it! All MSTs members are welcome to apply with the goal that the planned project should in some way benefit MSTs members or orthopedic oncology as a medical practice. Such projects could include

clinical practice guidelines, appropriate use criteria, novel clinical practice assessments, systematic reviews, clinical decision aids, clinical practice standardization, AI projects, improving MSTR registry data mining, or any other quality improvement project that you may have. We look forward to hearing about your ideas!

The GEBM committee will be sunsetting the current novel clinical practice assessments under the “Education” tab of the MSTs website, and posting new topics, including HIFUS, surgical management of oligometastases, photodynamic balloons, virtual and augmented reality, and nonsurgical management of desmoid tumors. These are mini systematic reviews of new and novel topics with limited evidence, but the potential for adoption into all of our practices. Our goal is to “do

the work for you” to figure out the upside and downside of each of these new ideas without making formal recommendations. Ultimately, it will be up to you whether or not these are things you will incorporate in your practice, study, or build upon. The previous topics have been published through JSO with open access. Please visit [this link](#) to read all about them!

The GEBM Committee is here to serve the entire MSTs membership! If you have any ideas, suggestions, or questions, please do not hesitate to reach out to myself or any GEBM committee members. Other current members include: Yee-Cheen DOUNG, Pietro Ruggieri, Matthew Colman, Alexander Lazarides, and Dipak Ramkumar. See you in San Diego!

## 2026 AAOS ICL and Symposia Application Opening in April

As we know shortly after the completion of the AAOS Annual Meeting, applications for the 2026 ICL and Symposia will begin. Start planning your submissions now and feel free to reach out to the Education Committee at [info@msts.org](mailto:info@msts.org) if you need help with topics! We would like as much representation of orthopaedic oncology education as possible.

## Skeletal Metastasis Committee – Felasfa Wodajo, MD, Chair

In September 2024, the MSTs launched a new standing committee with the following charges:

1. Execute the recommendations developed by the MSTs Metastatic Bone Disease Task Force.
2. In collaboration with other MSTs committees, develop materials, conduct workshops and other initiatives to educate MSTs members and other providers on appropriate referral, evaluation, and treatment of skeletal metastases.

Other committee charges emphasize research, evidence, fellowship training, disparities and research regarding skeletal metastases. The inaugural committee

members are Meredith Bartelstein, Matt Cable, Ian English, Joe Kendal, Aditya Maheshwari and Felasfa Wodajo. The Metastatic Bone Disease Task Force left us more than 40 recommendations, a great starting point but we needed a way to segment and prioritize our tasks. As a first step, we divided into six teams, with each of us serving on two teams:

1. *Evidence*: evaluate existing literature, write evidence updates, guide treatment indications
2. *Investigation*: design and help organize clinical studies, collaborate with registry (MSTR),
3. *Education*: create video and other content, referral guides, ICL and symposia

4. *Workshops and Industry Partners*: develop hands-on courses, partner with our industry colleagues
5. *Society Collaborations*: partnerships with other societies, e.g. AAOS, ASCO, ASTRO, etc
6. *Disparities*: focus on possible disparities in skeletal metastasis treatment access and outcomes

In our first few months working together, there has been great energy and great ideas. Each team has settled on its priorities and we are now at the beginning of the next phase and look forward to reporting our progress in future newsletters.

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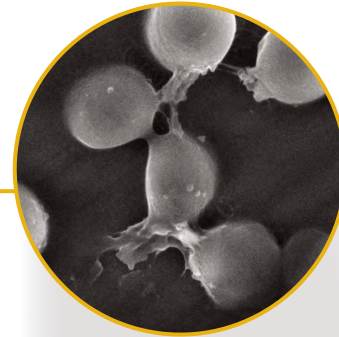
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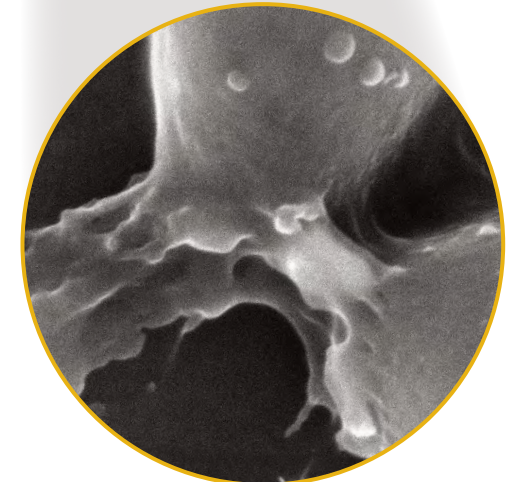
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1. Tande A J, Patel R. Prosthetic joint infection. *Clin Microbiol Rev.* 2014;27(2):302-345. 2. Premkumar A, Kolin DA, Farley KX, et al. Projected economic burden of periprosthetic joint infection of the hip and knee in the United States. *J Arthroplasty* 2021;36(5):1484-1489. 3. Data on file. Onkos Surgical, Inc., 2024.

\**In vitro* testing.

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# MSTS Welcomes Our New Members

Upon review and the recommendation of the MSTS Membership Committee, the Executive Committee is pleased to have approved ten new members into MSTS membership. In addition, we are pleased to recognize four who have changed their membership to the next member category.

Welcome to our new members and congratulations to those members continuing to advance in their careers!

## Active Members (L to R)

**John H. Alexander, MD**

**Thomas R. Bowen, MD** – new member

**Izuchukwu K. Ibe, MD** – new member

**Michael Monument, MD, FRCSC** – new member

**Giovanni Paralicci, MD**



## Associate Members (L to R)

**Ilkyu Han, MD, PhD** – new member

**Toru Hirozane, MD, PhD** – new member

**Yongsung Kim, MD** – new member

**Min Wook Joo, MD, PhD** – new member



## Candidate Members (L to R)

**Nicholas Arpey, MD**

**Devin James Conway, MD, MPH**  
– new member

**Aaron Gazendam, MD** – new member

**Matthew Eric Wells, DO, BS** – new member

## Resident Member

**Marc El Beaino, MD, MSc** – new member



## Interested in Becoming a MSTS Member?

Membership Application Deadline: **August 18, 2025**

Details [here](#).





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## Sarcoma Strong Corner – Matthew R. DiCaprio, MD

Sarcoma Strong Inc. experienced continued growth in 2024 and is poised for another year of collaborative inspiration in 2025. Since fully incorporating as a non-profit, we have been able to broaden our impact on the Global Sarcoma Community. Our primary mission of supporting sarcoma research remains at the forefront.

Just before year end 2024, we successfully established a Sarcoma Strong Endowed Research Fund with oversight from MSTs Finance Committee and the Sarcoma Strong Inc. Board. The starting amount in the fund is ~\$380,000 and with regular contributions, growth in the market, and other philanthropic gifts we anticipate the fund to reach its target amount of \$500,000 by 2026. Once the fund reaches this level we anticipate annual returns that will make a \$25,000 research grant available in perpetuity. Building this endowment is a separate initiative than the annual research funding contributions Sarcoma Strong remains committed to for MSTs. It really has been a society wide participation that has allowed for this endowment to be possible.

Locally, in the Capital Region of New York, a Sarcoma Patient Support Group, was spearheaded by sarcoma warrior, Patricia Leavenworth, with the support of Sarcoma Strong Inc. and the American Cancer Society local Hope Club. The group will meet on the first Saturday of each month. Patty wants to give back to her community and this was initiated after she served on a Patient-Physician Sarcoma panel at Albany Medical College. Modelled after a tumor board meeting, we educated 1st & 2nd year medical students about the impact of sarcoma through the perspective of patients and those who diagnose and treat them. Three patients each shared their story, we then reviewed their diagnostic imaging and pathology. The multi-disciplinary group of physicians then discussed the diagnosis and treatment options. We finished with the patient reporting their experience and outcome.

An international connection Sarcoma Strong Inc. is proud of from 2024 was made possible from an introduction by Dr. Megan Anderson to Dr. Nicholas Okumu from Nairobi, Kenya. To improve diagnosis and referral of patients with sarcoma to

regional centers with expertise to properly treat, Dr. Okumu with help from several organizations built an educational handout and website for Early Detection of Sarcoma: A Guide for Primary Healthcare Workers. Many useful resources can be found on their webpage, <https://sarcomalearning.africa> A generous grant from Sarcoma Strong Inc. assisted in printing the hand-book and building the webpage.



**Julia Visgauss, MD –**  
2024 Career Catalyst  
Award Winner and  
2025 Sarcoma Strong  
Gala Guest Speaker

We are gearing up for our 3rd Sarcoma Strong Gala, set for March 1st at Glen Sanders Mansion in Scotia, NY. Each year we honor our local sarcoma warriors, their families, and the medical students who

build meaningful relationships with them. Our programming will focus on the research we have supported since 2017, and we are excited to welcome Dr. Julia Visgauss from Duke Orthopaedics as our guest speaker. As a two-time Sarcoma



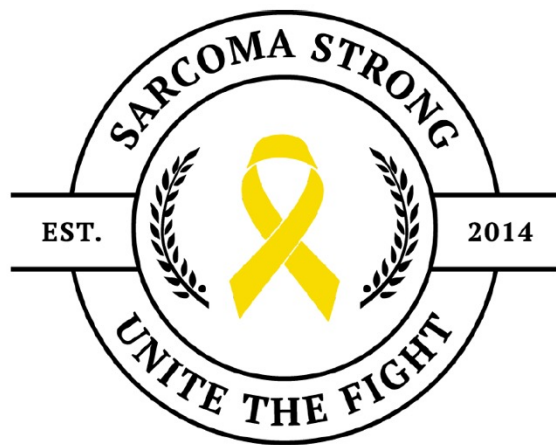
*Raise Sarcoma Awareness  
Advocate for Sarcoma Families  
Raise funds for Research*

Strong research grant recipient, and 2024 Career Catalyst Award recipient we know she will inspire our generous donors with her poise, research acumen, and desire to move the needle in sarcoma research.

Our 2025 Global Virtual 5k Run/Walk event is set for August 8-10th and we are adding several new event sites including: Harrisburg, PA, Westchester, NY, Denver, CO, and Washington, DC. Registration is open at <https://sarcomastrong.com/run> We welcome events on any date that works for your local community. Anyone interested in getting involved please feel free to email me at [dicaprm@amc.edu](mailto:dicaprm@amc.edu) or call 518-378-6499. Being a beacon of hope in your community is easier than you think.



We are most grateful for the support of the following organisations in making this project possible



**HARVARD GLOBAL  
ORTHOPAEDICS COLLABORATIVE**  
HARVARD COMBINED ORTHOPAEDIC RESIDENCY PROGRAM

## Donate through OREF

MSTS and OREF share a vision of improving care for patients through our support for high quality research.



Did you know you can support both MSTS and OREF at the same time? Make an OREF Annual Fund gift and you can add on a gift for MSTS.

It's a quick and easy way to support two great organizations. Visit [oref.org/annual](https://oref.org/annual).

## Support MSTS by Donating to the OrthoPAC

Make TWICE the difference with the same dollar! OrthoPAC will match any \$5k, \$1k or \$100 PAC contribution with a donation to a 501(c)(3) charity of your choice – visit <https://www.aaos.org/advocacy/pac/>

\$100 - \$999 - OrthoPAC Match of \$100

\$1,000 - \$4,999 - OrthoPAC Match of \$500

\$5,000 - OrthoPAC Match of \$2,500

## Thank You Donors

MSTS extends our sincere appreciation to the following donors for contributions to MSTS and OREF

Donations listed were received from August 1, 2024 through January 31, 2025

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