

ESTRO

ANNA KIRBY

Dr

Royal Marsden Hospital/ Institute of Cancer Research

UK

CANDIDATE FOR PRESIDENT-ELECT

1. What is your vision of Radiotherapy? Does ESTRO's strategy resonate with your vision and your perspective for the future?

Radiotherapy is a highly effective and, by and large, *cost-effective* treatment for millions of cancer patients worldwide. Through the logical and focussed efforts of clinicians, physicists, RTTs, radiobiologists and industry worldwide, the advances in technical approach, fractionation and sequencing have been truly astonishing. In my role as a breast radiation oncologist, I have seen outcomes transformed in the last 15 years and still the multidisciplinary team continues to strive to push the boundaries even further for patient benefit.

In terms of strategy, ESTRO's 10-year vision is succinctly captured in the statement "Radiation Oncology, Optimal Health, For All, Together" summarising the continued belief that radiation is key to cancer control and cure, that radiation can be delivered in smarter ways with fewer side-effects for patients, that technological advances can and should be made as widely available as possible, and that, in order to do this, we need to continue to build on ESTRO's success in bringing together stakeholders from multiple disciplines and geographical locations to innovate, share expertise, and train others. My own track-record in leading pragmatic, practice-changing Team Science, specifically in optimising resource-efficient heart-sparing breast radiotherapy techniques, reflects a vision which resonates sonorously with that of ESTRO in believing we can do better, balancing technical advances with pragmatism around resources, maximising reach for the broadest benefit to patients, sharing expertise and mentoring others.

2. What do you perceive as the most pressing issues or challenges of ESTRO as a RO society today?

ESTRO will have to work hard as an organisation to remain relevant to its members amongst competing demands on time from local service delivery, from research commitments and collaborations, and from other national and other international associations. In a time of huge change in working practices with many companies including healthcare organisations cutting back on international travel, it will also need to remain agile in terms of how it runs and delivers its scientific and educational strategy. We will need to make much better use of technology to improve efficiency of communication whilst remaining mindful that travel and its associated human interactions are good for science. We must also ensure that everyone who commits time to ESTRO activities is clear on the rationale for their involvement and the tangible difference their involvement will make to the radiation oncology community and its patients.

- 3. If you are elected ESTRO president, what will be your goal(s) or the focus area for your term? What priorities would help you achieve them? What barriers could be in your way? How to do you envision the interdisciplinary aspect of our Society?**

How do you envision the multidisciplinary aspect of the oncology field and ESTRO positioning on that matter?

My goals will be i) to grow membership of ESTRO through greater engagement with individuals in countries and groups that are currently less well represented in the membership, and ii) to increase the relevance of the organisation to its members through establishment of site-specific working groups at operational level. In other words, by facilitating more active involvement across the geographical and multiprofessional breadth of our stakeholders, and increasing members' sense of ownership I aim to increase the depth of ESTRO's impact.

To achieve these dual goals, one priority will be to establish an ESTRO Engage Programme including mentored, project-focussed involvement in committees & working groups, and leadership training for those who want to accelerate change.

The main barrier, as previously stated, will be the multiple pulls on members' time. We have to be succinct and value-added for all our members whilst also giving space for interaction and innovation.

Regarding interdisciplinary aspects, in my own career I have been blessed to work within a multidisciplinary team amongst whom interprofessional boundaries have hardly ever got in the way. This can be attributed, I think, to our sharing a clear vision and working towards a common goal of providing a high-quality radiotherapy service to our patients alongside evaluating innovations that we know, if successful, we *will* be able to translate immediately into patient benefit. Within ESTRO, I think a subtle reorganisation at strategic level towards tumour site-specific groups being responsible for delivering ESTRO's vision on the ground will help to ensure that the whole multidisciplinary team feels valued by ESTRO and works together seamlessly for patient benefit.

- 4. In your opinion, is ESTRO doing enough to improve patients' outcomes?**

ESTRO as a professional association is entirely reliant on its members doing what they do to the best of their abilities. To this end, ESTRO has a responsibility to be only ever facilitatory and never to hinder. The ESTRO Congresses remain the principal forum for presenting radiation-related research and the ESTRO Educational programme ensures that those working at the forefront of their fields are sharing expertise as widely as possible to those who wish to learn. I think ESTRO could certainly streamline some internal processes particularly around guidelines so as to be as value-added as possible to the scientific literature, to international practices and therefore to patients. I also think that maintaining that line of sight from innovative research and development to meaningful clinical impact is crucial at every level within ESTRO in order to improve outcomes as widely as possible across Europe and beyond.

- 5. Why should ESTRO members vote for you as next president? Why did you decide to run for this position?**

I'll take these in reverse order if I may? I decided to run because I was invited to run, because those who invited me to run believed I could do a good job in this role, because (as an ESTRO

ESTRO

Board member) I have been excited and inspired by ESTRO's vision and team, and because I had the support of my multidisciplinary colleagues and my family.

My career to date has been focussed on pragmatic, internationally practice-changing innovations in radiotherapy for breast cancer and I have trained, supported and mentored many colleagues of multiple disciplines in the process. If an individual wants to make a difference to cancer care, I believe they should be supported in doing so regardless of who they are, where they are and how much time they have. By maintaining this vision alongside my working understanding of both ESTRO and the radiation oncology service and research coalfaces, I intend, if elected, to maintain and develop the attractiveness of ESTRO to anybody of any discipline who wants to make a difference to patients. I will continue to effectively advocate for our speciality, our multidisciplinary teams and our patients to ensure that innovations in cancer care benefit as many patients as possible.

6. Could you tell us about your current and past involvement in ESTRO? What made you become involved in the first place?

I first joined ESTRO as a trainee in 2004, attending my first congress in Leipzig, home of Bach's Thomaskirche, in the same year. That meeting changed my career as I bumped into Professor John Yarnold who persuaded me that we might have a fruitful partnership in breast radiotherapy research, highlighting the value of the networking aspects of the annual congress. A few congresses later, with a research degree under my belt and appointment to the Royal Marsden as a consultant, I attended the ESTRO Breast Multidisciplinary Course in Athens, 2010 where I met many of the European colleagues with whom I have since collaborated, learning first-hand how ESTRO can facilitate sharing of expertise, development of shared protocols and guidelines and practice-changing randomised controlled trials. I was invited to join the Scientific Committee for ESTRO 35 in Turin and in 2017 the Editorial Board for the Journal of Clinical and Translational Oncology. I have also hosted and mentored many individuals and teams through and alongside the ESTRO Technology Transfer programme, with the aim of disseminating innovations for the benefit of patients across Europe and beyond.

In 2019, I was elected to the ESTRO Board through which I have learnt a huge amount about the vision, structure and function of ESTRO as an organisation, not least about the enthusiasm and commitment of those working in the ESTRO Office and of those who volunteer on the many Committees. There is so much that works well but I can also see that there is scope for more streamlining of structure and processes in order that implementation of ESTRO's vision might be better facilitated.

7. On a lighter note, what do you like to do for fun?

I am absolutely passionate about music in many forms. I was a chorister at Cambridge and have continued to sing with several London chamber choirs throughout my career, even joining an English National Opera Training programme during my research. A classical musician by training, I now prefer exploring the fringes of film and folk music and am fascinated by the interaction between music and creativity. For a complete re-set, a walk in the mountains with my husband and daughters is what I dream of- not so easy from London!