

Editorial

Jia You (加油)

“Jia You” (加油) is something Taiwanese parents often say to their children as a form of encouragement. This saying refers to adding oil to the lamp for the student to continue studying into the night. Indeed, parents often say 加油 to their children when they are studying for a big examination, preparing for a competition, or applying for college.

Sarcoma is a challenging disease on many levels. First, it is exceedingly rare, representing 1% of all cancers in adults. Second, although tumors most commonly develop in the extremities, they can also occur at any location in the body including the trunk, head and neck, and back of the abdomen or retroperitoneum. Third, sarcoma actually encompasses over 50–70 histologic subtypes, each with distinct genetic aberrations, clinical behavior, and potential treatment responses. In fact, most sarcoma specialists would agree that in contrast to more common cancers (e.g. colorectal, prostate) which focus on the organ of origin, this disease is unique in that treatment is often based more on the specific subtype.

To truly help patients with sarcoma, it is important that we continue to 加油...

Hard work and perseverance are needed on a daily basis in the operating rooms and clinic when treating a sarcoma patient. The tumors can be locally aggressive and with high risk of metastasis. The operations we do can be some of the most technically difficult ones done in the human body often requiring multiple surgical teams, especially for retroperitoneal sarcoma.^[1] For the best outcome, the patient with advanced sarcoma may require multimodality treatment, combining surgery with radiation and systemic (drug) therapy. In the patient with metastatic sarcoma, although cytotoxic chemotherapy is typically frontline, other “nontraditional” drug options may be helpful to prolong survival or stabilize disease and improve quality of life.

Due to the rarity of sarcoma and the heterogeneity of subtypes, research efforts to find better treatments are unfortunately relatively lacking. However, one recent positive highlight was a multi-institutional effort which included National Taiwan University Hospital (NTUH), to better define B cells and the immune microenvironment in sarcoma.^[2] This is a major step forward to establish immunotherapy as an effective treatment

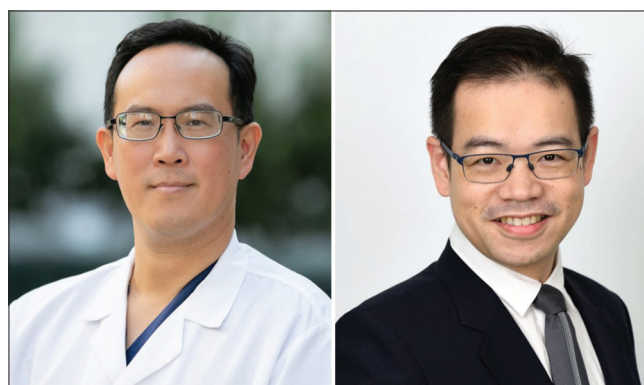


Figure 1: Drs. William Tseng (Surgical Oncology, Los Angeles) and Tom Chen (Medical Oncology, Taipei)

option for sarcoma patients. We are both personally very excited to continue to work together in these efforts [Figure 1];^[3] however, not all subtypes respond well to immunotherapy, and research to explore other approaches (e.g., molecular driver targets) is desperately needed.

Collaboration is the cornerstone of patient care and research in sarcoma. Multidisciplinary tumor boards (“MDTs”) embody the spirit of collaboration and are critical in this rare cancer. Analyses of large databases in the United States (e.g., NCDB) show that outcomes for sarcoma patients are clearly better when cases are managed at sarcoma centers and discussed at MDTs.^[4,5] At NTUH, a bi-weekly MDT meeting dedicated to sarcoma (all body locations) has been running since the fourth quarter of 2014. In the past 6 years, we have seen a steady increase in the number of sarcoma patients discussed in these MDTs. Consistent with the US data, we have observed improvements in the survival of advanced or metastatic sarcoma patients since the establishment of these MDTs (median overall survival 21.0 vs. 9.1 months, $P = 0.03$, unpublished data).

However, MDTs in sarcoma should not be limited to one institution. To improve outcomes for all sarcoma patients in Taiwan, perhaps, combined MDTs can be established across multiple institutions within the country, leveraging teleconference capabilities. To expand this further, MDTs can even be conducted with other sarcoma centers around the

world. Representing Taiwan and the US, we were able to do this between our institutions recently for two challenging sarcoma cases^[6] and found it to be mutually beneficial.

The field of sarcoma is still young in Taiwan, and there is much room to improve the care of patients with rare cancers such as sarcoma. Moving forward, as we continue to study sarcoma together and as an international community, we are very thankful to have the support of the Taiwan Oncology Society (TOS) and the *Journal of Cancer Research and Practice* (JCRP). TOS and JCRP are the ideal platform to broadcast important research findings in this disease and learn from each other. So together, let's 加油!

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Submitted: 02-Apr-2021 Accepted: 26-Apr-2021 Published: 01-Jun-2021

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Access this article online	
Quick Response Code:	Website: www.ejcrp.org
	DOI: 10.4103/JCRP.JCRP_9_21

How to cite this article: Tseng WW, Chen TW. Jia You (加油). *J Cancer Res Pract* 2021;8:39-40.