

**2015 São Paulo InSiGHT Meeting
Final Report – February 25, 2017**

Prof. Benedito Mauro Rossi

It is very hard to write about the results of the 2015 São Paulo Insight Meeting and what it represented for the hereditary cancer area in the city of São Paulo, in Brazil and in South America, without looking back briefly over the last 25 years and the efforts of a number of people who have been working towards a common goal.

In 1989, when the information technology was just starting and its possibilities for organizing a database were beginning to be grasped, the A.C.Camargo Hospital, in São Paulo, installed a computer system for collecting clinical data on individuals and their families when a hereditary predisposition to cancer was suspected. It was a most successful initiative, since it made it very easy to find data for research in the files. This database was the basis for the creation of the Register of Hereditary Colorectal Tumors, in 1992. One of the early positive results of this Register was seen in 1994, when the first molecular diagnosis of FAP in a Brazilian family was made (a mutation in the APC gene located in codon 1,291).

Due to the growing interest in the area of hereditary cancer, in 1997 weekly meetings began to be held on the topic, attended by specialists from different areas. Finally, in 1999, the Cancer Genetics Department started to operate at A.C.Camargo Hospital. Its work was no longer limited to colorectal tumors, but now included breast cancer and other hereditary cancer syndromes. In February 2003, as a natural consequence of the weekly meetings and the opening of the Department, the Brazilian Hereditary Tumors Study Group (GBETH) was set up, with the mission of improving teaching and

research into hereditary cancer, and encouraging national and international collaboration.

In 2005 and 2007, the group published two books with updates on hereditary cancer. With these publications and GBETH's participation in international meetings, professionals from other Latin American countries began to show interest in joining the group. As a result, in 2006 GBETH changed its name to Hereditary Tumors Study Group (GETH) (www.geth.org.br). This initiative led to the inclusion of professionals from throughout the South American continent. In 2006, GETH organized its First International Symposium. A number of international guests were invited, and 170 people attended the event.

The GETH website is now one of the key tools for group members to contact each other. There is a private members' area, with chat rooms to discuss clinical cases and panels on different issues relating to hereditary cancer. Since 2014 GETH has been organizing fortnightly meetings at the Sírio-Libanês Hospital, in São Paulo, transmitted live via streaming to group members, and recorded in high definition for subsequent viewing. The possibility of participating from a distance is fundamental in Brazil and in South America, since the institutions are long distances apart, with differing technical structures and varying levels of financial support.

The project on which GETH and the Sírio-Libanês Hospital are currently working is to set up a joint South American Hereditary Cancer Register on a web platform. The idea is to offer participating institutions the use of free, non-proprietary software on a web platform, to record details of families suspected of a hereditary predisposition to cancer.

This was the subject of the South American Workshop on Hereditary Cancer – WSACH 2014, which was held in São Paulo. The meeting attracted

leaders in the area of hereditary cancer in Brazil and South America to take part in a large panel, with the aim of setting up a collaborative hereditary cancer register (the South American Hereditary Cancer Register). The event was for invited participants only, and it was attended by 75 people representing 35 different institutions / universities from all over the continent.

This entire process of constructing and developing research on hereditary cancer in Brazil and South America served as a base for the 6th Biennial Meeting of the International Society for Gastrointestinal Hereditary Tumors in São Paulo, on June 18 to 20, 2015 (www.2015insight.com). Several members of GETH have attended meetings of InSiGHT since 2001, but the proposal to hold an InSiGHT Meeting in Brazil was first made in 2008, in Chile, at a meeting organized by Dr. Francisco Lopez, attended by Dr. Carlos Vaccaro, Argentina, Dr. Carlos Sarroca, Uruguay, Dr. Gabriela Moeslein, Dr. Miguel Rodriguez-Bigas, Dr. James Church and Dr. Henry Lynch himself. There was considerable support from the entire South American scientific community, from GETH and the Sírio Libanês Hospital, but what was essential was the support of Drs. Moeslein, Rodriguez-Bigas and Church in taking the proposal to the Insight Council.

Hosting an event such as this was a great honor, because of the trust deposited by the InSiGHT Council members in the leaders of research in South America, but also a great responsibility.

InSiGHT is hugely important in the area of hereditary gastrointestinal cancer, and so the fact that its 6th official meeting was held in South America caused a major impact. The impact was felt both in the academic and the assistential areas. Various South American institutions were represented at the event, including universities, research institutes and hospitals, and many

abstracts were submitted, showing the stimulus caused by the event to commitment and involvement in the areas of research, development and care for hereditary cancer. It was also very encouraging to see the number of members of GETH from all over the continent.

This participation in such large numbers shows the importance and the results of the efforts of the InSiGHT Council in organizing the event in South America. This was also demonstrated during 2015 and 2016, when the repercussions of the high level scientific content presented at the event were felt. There was a clear stimulus and interest by new members in attending the fortnightly meetings of GETH, and new initiatives to include the topic of hereditary cancer in a number of other important regional meetings, such as those of the Brazilian Society of Coloproctology, the Brazilian Society of Clinical Oncology, the Brazilian Society of Surgical Oncology and so on.

Another very interesting consequence of the 6th InSiGHT Meeting was an increase in the number of young professionals and researchers taking an interest in hereditary cancer. A number of studies were embarked upon, resulting in M.Sc. and Ph.D. projects at different institutions. This opens up new lines of research in the area of hereditary cancer at various institutions in different regions of Brazil and South America, involving young, energetic people – new blood!

There is no doubt that the pioneering spirit, vision and daring of the InSiGHT Council in deciding to hold its meeting in South America brought many immediate benefits, and also planted a number of seeds in very fertile ground, previously unexplored and with few prospects. Our work must go on, so that we can keep these seeds growing and healthy, through collaborative projects for research, the organization and upkeep of new hereditary cancer registries, the holding of regional meetings, and the continued regional efforts

of GETH. I have no doubt that within a few years, these seeds that have been planted and nurtured will grow into trees which in turn will bear more and more fruit. This is the virtuous circle that we are hoping to achieve in Latin America.

As representative on the InSiGHT Council, and on behalf of the entire Latin American community of research and care in the area of Hereditary Cancer, I am thankful for the opportunity of hosting the 6th InSiGHT Meeting in São Paulo, in 2015.

Thank you very much!

InSiGHT Meeting – São Paulo – Brazil
18-20 June 2015
Report

1-Registration: 270 from 24 countries

Brazil	125
USA	24
Australia	17
UK	15
Germany	11
Sweden	11
Netherlands	10
Japan	9
Denmark	6
New Zealand	6
Argentina	5
Italy	5
Israel	4
Chile	4
Norway	4
Spain	3
Peru	3
Colombia	2
Suisse	1
Bolivia	1
Paraguay	1
Ireland	1
Canada	1
Uruguay	1

2- New South American InSiGHT members – South American Pass

LAST NAME	FIRST NAME	Main Speciality - country
ACOSTA	MARISA	Genetics – Peru
BOHORQUEZ	MABEL	Genetics – Peru
CAMPOS	FÁBIO GUILHERME	Coloproctology – Brazil
CARRARO	DIRCE MARIA	Biologist – Brazil
CASTRO	MARIA DEL CARMEN	Genetics – Peru
CORAGLIO	MARIANA FERNANDA	Gastroenterology – Argentina
COUDRY	RENATA A.	Pathology – Brazil
DIZ	MARIA DEL PILAR ESTEVEZ	Oncology – Brazil
ELIAS	ISABELA PESSOA	Proctology – Brazil
FERREIRA	FABIO OLIVEIRA	Surgical oncology - Brazil
GERMINI	DEMETRIUS EDUARDO	Gastroenterology - Brazil
GOMY	ISRAEL	Genetics - Brazil
KRONBERG	UDO	Surgery – Chile
KUMAGAI	LILIAN YURI	Surgical Oncology - Brazil
LIMA	FERNANDA TERESA DE	Genetics - Brazil
MILITO	DANIELA ADRIANA	Oncology - Argentina
NEFFA	MARIA FLORENCIA	Oncology - Uruguay
NETO	MAXIMILIANO CADAMURO	Oncology - Brazil
NUÑEZ	LINA	Oncology - Argentina
PADRON	JORGE	Proctology - Colombia
PALMERO	EDENIR INEZ	Biologist - Brazil
SANTOS	ERIKA MARIA MONTEIRO	Nurse - Brazil
TORREZAN	GIOVANA TARDIN	Biologist - Brazil
TURKE	YVES	Gastroenterologist - Brazil

Total: 24 new members

Total amount to InSiGHT: **2.800 Pounds (JustGiving)**

Paid by the meeting organisation

3-Financial Report (US\$ 1 = R\$3,5 – August 2015)

total budget ~US\$ 140,000 (R\$ 490,000)

total expenses ~US\$ 147,000 (R\$ 514,500)

deficit ~US\$ 7,000 (R\$ 24,500)

- US\$ 1 = R\$ 4,0 – January 2016
- US\$ 1 = R\$ 2,6 – January 2015
- US\$ 1 = R\$ 2,4 – January 2014
- US\$ 1 = R\$ 2,0 – January 2013

We had 75% devaluation of the Brazilian R\$ since we've planned the meeting to August 2015, when we've paid the bills.

4-Program and Abstracts

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