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Word from the President Prof. M. Wells



This is such a busy time for me as your President that it is difficult to know where to begin. The Society is developing rapidly on many fronts; so let me try to give some overall chronological impression of events since the beginning of the year.

In January, there was an important telephone conference with representatives of the EORTC to discuss the pivotal role of histopathological review (sometimes with ancillary immunohistochemical or molecular testing) of tissues from patients entered into clinical trials. This was followed by a half-day meeting at our Brussels office on 21 March between the officers of the ESP and senior representatives of the EORTC. As a result of that meeting a number of core principles relating to histopathological involvement in clinical cancer trials were agreed which will be published in due course.

On 25 February, I chaired a 7 hour meeting of the Executive Committee at our Brussels headquarters. Several important decisions were made at that meeting including:

* The unanimous decision to continue with the ESP master classes at our Brussels headquarters. The programme for the rest of 2011 is available on the Society's website and is published on page 4 in this issue of the newsletter. To make them more effective for participants, we have decided to run two master classes on the third Friday and Saturday of the month. In future, the master classes will be recorded and edited and will be available on the Society's website.

* The collective membership initiative of Krasi, our administrator, is flourishing and there has already been a large increase in the Society's membership this year. The ESP will provide national societies with any administrative support necessary related to this initiative.

* In June, there will be a very important "retreat" at our Brussels headquarters to determine the future strategy for *Virchows Archiv*. One cannot overstate how important the future success of the journal is to the healthy state of our society. The President and the officers have a duty to ensure that everything is done that can be done to enhance the status of our journal.

* €100,000 are to be provided from the profit of the Krakow Intercongress meeting, for the development of Polish pathology.

* There will be a joint congress of the ESP and the International Academy of Pathology (IAP) in 2016. The officers of the ESP will meet with Dietmar Schmidt and his colleagues from the German Division of the IAP in Bonn on 15 June.

* A new Working Group is to be formed entitled "Pathologists favouring developing countries".

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News from the ESP Working Groups :

EScoP Course in Breast Pathology



Prof. Tibor Tot Chair Breast Pathology Working Group

The breast pathology arm of the European School of Pathology organized a successful course entitled Breast Pathology, from the Basics to the Cutting Edge in Novi Sad, Serbia, 31 March – 2 April 2011. The three-day program, approved by the Education Committee of the European Society of Pathology, was intensive and contained lectures, case demonstrations and faculty audience interactions. Under the leading of the director of the course, Professor Vincenzo Eusebi from Bologna, Italy, the faculty (Professor Anna Sapino from Turin, Italy, Professor Tibor Tot from Falun, Sweden, and Professor Tatjana Ivkovic – Kapicl from Novi Sad, Serbia) offered up-to-date information and demonstrated instructive selected cases. The first two days were designed for having a more basic level with topics like normal breast tissue, general morphology of the breast lesions, basics of radiological – pathological correlation, problems in delineating benign, borderline, and malignant breast lesions, and the issue of in situ and invasive breast carcinoma. Day 3 was more aimed to experts in the field with preoperative diagnostic approaches, prognostic and predictive morphological parameters and mesenchymal breast tumors discussed. The 102 participants from 11 European countries, mostly from Serbia, were very satisfied with the content of the school; 100% of them would recommend the event to their colleagues. The course was financially supported by the European Society of Pathology and, in part by the Susan G Komen foundation. The University of Novi Sad Faculty of Medicine was a generous host and the local organizers under leading of Professor Zivka Eri assured excellent conditions for successful realization of this intensive course.

Continues from p.1

At the beginning of April, I flew to Belgrade to participate in the one day EScoP course on Gynaecological pathology, completing the programme of the course which I was unable to attend in 2010 because of the effects of volcanic ash. The course was well attended and was preceded by a head and neck pathology course, so I was able to relax with Ilmo Leivo and Roddy Simpson. Whilst in Belgrade we also celebrated Lole Vasiljevic's 60th birthday.

In April, I also visited Amman, Jordan as the guest of the Jordanian Society of Pathology. I am very grateful for the hospitality shown to me by our Jordanian colleagues.

In May, I will visit Ukraine as the guest of the Ukrainian Division of the International Academy of Pathology and Saragossa, Spain as the guest of the Spanish Society of Pathology and will also participate in a Gynaecological Pathology Course in Ioannina as the guest of Niki Agnantis.

I have written before in these newsletters about my mission to improve the standing of cellular pathology in Eastern Europe and, particularly, of the serious problems afflicting Bulgarian pathology. It has taken me eighteen months to achieve some tangible result. On 2 June, Professor Claude Cuvelier (Chairman of the Pathology Board of the UEMS), Doctor Bernard Maillet (Secretary General of the UEMS) and I will meet with the Bulgarian Health Commission in Sofia, to express our concerns about the situation, in particular the lack of parity of basic salary of pathologists compared to other specialties, which is having such a devastating effect on recruitment and succession planning in Bulgaria.

I have personally overseen the nomination and electoral process for the offices of President-elect and Treasurer and the four new Executive Committee members. The procedure has adhered rigorously to the statutes and bye laws and has been entirely transparent.

Most importantly, in addition to all of this, I must mention also, of course, the forthcoming Congress in Helsinki. I have been very closely involved in all of the discussions pertaining to the Congress and we anticipate another great scientific and social success; the "early bird" registrations are already substantial. I am very grateful to Ilmo and Veli for all of the hard work that they are putting in to ensure what I am sure will be a successful congress.

I look forward to seeing you all in Helsinki for my "swan song", after which I will be a "has been"!

Michael Wells



Election of Officers of the European Society of Pathology.

At the General Assembly in Helsinki in September 2011, the following two officers will demit office:

Treasurer Prof. Han van Krieken
President-elect Prof. Fatima Carneiro (as from Sept. 2011 President of the ESP)

The ESP Executive Committee:

Prof. Generoso Bevilacqua
Prof. Silvana Di Palma
Prof. Laurence de Leval
Prof. Hans Kreipe
Prof. Loukas Kaklamanis
Prof. Bodil Laub Peterson
Prof. Teresa Ribalta
Prof. Jovan Vasiljevic

recommends these individuals for the following positions:

* President elect with effect from September 2011:

Prof. Han van Krieken (Nijmegen, the Netherlands).

*Treasurer with effect from September 2011:

Prof. Marco Santucci (Florence, Italy).

Their brief CVs are available on request.

The membership is now invited to make other nominations within six weeks of this communication. Any nomination must be approved by the individuals themselves and each must be supported by at least 5% of members of the society in good standing and accompanied by an abbreviated CV of no more than one page.

Prof. Michael Wells
ESP President

Election of Four New Members of the Executive Committee of the ESP.

At the General Assembly in Helsinki in September 2011, the following four members of the Executive Committee will demit office:

Prof. Bodil Laub Peterson
Prof. Jovan Vasiljevic
Prof. Loukas Kaklamanis
Prof. Teresa Ribalta

The following individuals are recommended by the Executive Committee to fill these positions:

Prof. Aurelio Ariza (Spain)
Prof. Arzu Ensari (Turkey)
Prof. Jean-François Flejou (France)
Prof. Janina Kulka (Hungary)

Their brief CVs are available on request.

These recommended candidates will be presented for formal approval at the General Assembly in Helsinki in September 2011.

Prof. Michael Wells
ESP President



VIDEOMICROSCOPY MASTERCLASSES EUROPEAN SOCIETY OF PATHOLOGY HEADQUARTERS

The ESP will run a series of masterclasses in diagnostic histopathology employing its video microscopy system. The following dates and subspecialties are offered:

ESP Videomicroscopy Masterclasses Timeschedule 2011

Dates/CET	Tutors	Subject
June		
17th/12.00h- 18.00h	Prof. Tibor Tot	Breast pathology with radiological correlation
18th/9.00h- 15.00h	Prof Michael Wells	Gynaecological pathology
July		
22nd/12.00h- 18.00h	Prof. Jaume Ordi	Pitfalls in the diagnosis of premalignant and malignant lesions associated to Human Papillomavirus
23rd/9.00h- 15.00h	Prof. Pio Zeppa and Prof. Torill Sauer	Actualities and controversies in breast fine needle cytology Cytology of subdiaphragmatic organs
September		
23rd/12.00h- 18.00h	Prof. Arzu Ensari and Prof. Fred Bosman	GI pathology
24th/9.00h- 15.00h	Prof. Teresa Ribalta and Prof. Ellen Gelpi	Practical Neuropathology
October		
21th/12.00h- 18.00h	Prof. Pierre Bedossa Prof. Marco Santucci and Prof. Daniela Massi	Non tumoral liver pathology
22nd/9.00h- 15.00h	Massi	Skin pathology
November		
18th/12.00h- 18.00h	Prof. Ales Ryska	Thyroid pathology
19th/9.00h- 15.00h	Prof. Josep Lloreta Trull	Current piagnostic applications of electron microscopy in pathology

Each month starting from June 2011 the masterclasses will run every third Friday from 12.00 -18.00 hrs and Saturday from 9.00-15.00 hrs with a light lunch and coffee breaks. The cost of registration for the combination of both classes is 100 € These masterclasses are interactive and open to any pathologist at any stage of their careers. Places are limited to 25 participants on a "first come, first served" basis.

Please submit your application to admin@esp-pathology.org not less than 3 weeks before the date of the masterclass.
The address of the ESP office where the masterclasses will be held is Rue Bara 6, 1070 Brussels, Belgium.



Interview with Prof. Rudy Heimann, former ESP president and former head of the department at the Bordet Institute in Brussels by Prof. Mia Marichal.

MM: Please, Prof Heimann, can I, without being too indiscrete, ask you what your age is.

RH: Sadly enough, I reached the age of eighty last September.

MM: I am sure that you have witnessed a lot of changes in the world of medicine and of pathology. What has impressed you most?

RH: I have indeed witnessed quite a few changes in pathology since I started in 1957! In those days, except for the introduction of the PAS stain, there had been practically no major changes since the beginning of the 20th century.. What I find striking nowadays is the dichotomy in our specialty. Indeed, in the daily routine we have remained rather classical in our techniques; most of the time, our diagnoses are based on HE with occasional immunohistochemistry. The journals however are filled with reports based on molecular pathology as though our specialty seems to abandon morphology for biochemistry. This is, I think, the major mutation in our specialty, but it does not really reflect daily practice.

MM: I know you are still active in pathology; what are your main interests now that you can chose what you like most?

RH: My interests now are confined to the thyroid gland. In my younger days, I was interested in the liver. This was due to the 2 years I spent at the Mallory Institute in Boston. There, we were almost forcibly oriented into hepatopathology. I believe that this respectable tradition was due originally to the many South- Bostonian alcoholics who landed on the autopsy table. Even in the field of research, the liver was the first topic. When I came back to Belgium, I made a study comparing the incidence of alcoholic liver disease with its characteristic Mallory hyaline bodies in the Belgian and in the Bostonian autopsy population. I found a marked difference, which I attributed to different drinking and dietary habits. I wondered for a moment whether the rarity of Mallory bodies in our population was not due to the protective role of the excellent Belgian beer and also to the French fries, which are so popular in our country, but I rapidly realized that this interesting hypothesis did not hold the water. Later on, I turned to the domain of malignant lymphomas. It was the golden period of Lukes and Lennert. I became an ardent supporter of Karl Lennert, a "Lennertzianer", if I may say so. He was a very charismatic personality. However, when this field evolved, and became more and more sophisticated, with a shower of successive classifications, I lost track and ended,

lagging several classifications behind. However, I did not loose complete interest in lymphomas, investigating the possible correlation between liver and lymphoproliferative disorders. Eventually, I became interested in thyroid pathology, the main reason being the presence of a very active Head and Neck Surgical Department at the Institute Jules Bordet, which gave me access to an abundant and interesting material. Now that I am officially retired, my main activity is a modest participation to a course on thyroid pathology, given once a year in Paris, with brilliant and well-known pathologists like Juan Rosai, Manuel Sobrinho-Simoes and Philippe Viehl. I also quite often go to meetings of the Cuban Society of Pathology and give an occasional thyroid lecture. I am very fond of Latin America; I think, we as Europeans have a lot in common with these countries. I particularly love the colonial baroque churches. With the efficient help of Manuel Sobrinho-Simoes at the ESP, we used to organize meetings with the Latin American pathologists: the Intercontinental Congresses of Pathology. Unfortunately, they have been discontinued because the European Society has annual meetings nowadays, from what I was told.

MM: So we have Belgium, Paris, Cuba... where else in the world do you like to spend time?

RH: My wife and myself, spend part of the year in Sherbrooke, PQ, Canada because one of our daughters has emigrated there with her family. We very much love the countryside and the way of living in the Quebec Province. Occasionally, I give a lecture on thyroid diseases in the Department of Pathology at the University Hospital. The members of the Department and myself have become quite good friends. They work very much like we do, which is not surprising, as we have all been influenced by the North American School.

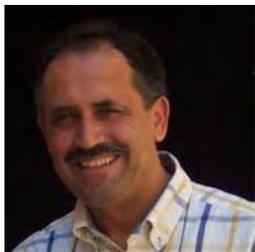
MM: There are several generations of MD's already in your family; would you care to tell us about them?

RH: Both my grand father and father were physicians and so is one of our sons. We thus count 4 generations of physicians in the family. Actually my father had 2 MD diplomas: one German diploma and later on, when my parents settled in Belgium, he had to repeat his studies to get a Belgian diploma. He graduated for the second time at the age of 43. I admire him a lot because I do not think that I would have the courage and the determination to do what he did. He even had to undergo an examination in ancient Greek, because in Belgium, unlike in Germany, Greek was still compulsory in those days to enter medical school. A devoted Jesuit Father force-fed him with this beautiful classical language in about 6 months. And now, one of our granddaughters is finishing her second year in medical school and will carry on the family tradition.

MM: So we will have soon a 5th generation of Heimann's in Medicine! Thank you for your time and I wish you a very happy continuation of your non-retirement.

Analecta Medica

Dr. Loukas Kaklamani



1) What's new in non-small cell lung cancer for pathologists: the importance of accurate subtyping, EGFR mutations and ALK rearrangements

WENDY A. COOPER*^z, SANDRA O'TOOLE*^{§jj},
MICHAEL BOYER^{jj}, LISA HORVATH^{jj} AND
ANNABELLE MAHAR*

In the past, the only critical point of distinction in the pathological diagnosis of lung cancer was between small cell and non-small cell lung cancer (NSCLC). The emergence of new targeted therapies and clinical trials demonstrating differing efficacy and toxicity of treatments according to specific histological subtypes of NSCLC, has resulted in an increasing need for improvements in pathological diagnosis. Accurate distinction between adenocarcinoma and squamous cell carcinoma is now critical as histological subtyping has the potential to influence clinical decision making and impact on patient outcome. While morphological criteria remain the most important feature to distinguish NSCLC subtypes, use of mucin and immunohistochemical stains (TTF-1, p63 and CK5/6) can be of assistance in difficult small biopsy cases. With the emergence of selective kinase inhibitors targeting epidermal growth factor receptor (EGFR) and anaplastic lymphoma kinase (ALK), there is a corresponding need to identify the subset of NSCLCs harbouring specific genetic mutations associated with sensitivity to these agents, almost all of which are found in adenocarcinomas. In this review, the importance of accurately subtyping NSCLC is discussed, along with a suggested approach for distinguishing histological subtypes in small biopsy specimens. The significance of EGFR and ALK mutations in NSCLC and the impact of these genotypes on pathology and clinical practice are also reviewed.

Pathology (February 2011) 43(2), pp.
103–115

2) A Sensitive and Specific Diagnostic Panel to Distinguish Diffuse Astrocytoma From Astrocytosis: Chromosome 7 Gain With Mutant Isocitrate Dehydrogenase 1 and p53

Sandra Camelo-Piragua, MD, Michael Jansen, MD, Aniruddha Ganguly, PhD, James ChulMin Kim, Arjola K. Cosper, Dora Dias-Santagata, PhD, Catherine L. Nutt, PhD, A. John Iafrate, MD, PhD, and David N. Louis, MD

One of the major challenges of surgical neuropathology is the distinction of diffuse astrocytoma (World Health Organization grade II) from astrocytosis. The most commonly used ancillary tool to solve this problem is p53 immunohistochemistry (IHC), but this is neither sensitive nor specific. Isocitrate dehydrogenase 1 (IDH1) mutations are common in lower-grade gliomas, with most causing a specific amino acid change (R132H) that can be detected with a monoclonal antibody. IDH2 mutations are rare, but they also occur in gliomas. In addition, gains of chromosome 7 are common in gliomas. In this study, we assessed the status of p53, IDH1/2, and chromosome 7 to determine the most useful panel to distinguish astrocytoma from astrocytosis. We studied biopsy specimens from 21 World Health Organization grade II diffuse astrocytomas and 20 reactive conditions. The single most sensitive test to identify astrocytoma is fluorescence in situ hybridization for chromosome 7 gain (76.2%). The combination of p53 and mutant IDH1 IHC provides a higher sensitivity (71.4%) than either test alone (47.8%); this combination offers a practical initial approach for the surgical pathologist. The best overall sensitivity (95%) is achieved when fluorescence in situ hybridization for chromosome 7 gain is added to the p53-mutant IDH1 IHC panel.

J Neuropathol Exp Neurol – Volume 70,
Number 2, February 2011, 110–115



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3) Molecular Origins of Lung Cancer: Prospects for Personalized Prevention and Therapy

Eric B. Haura,¹ D. Ross Camidge,² Karen Reckamp,³ Alberto Chiappori,¹ Faye Johnson,⁴ Roy Herbst,⁴ Kwok Wong,⁵ and David Carbone⁶

Abstract: The first Meeting on “Molecular Origins of Lung Cancer – Prospects for Personalized Prevention and Therapy” was held from January 10 to 14, 2010 in San Diego, California. The purpose of the meeting was to discuss important basic, translational, and clinical work aimed at improving lung cancer prevention, detection, and treatment. Topics included drug design, target identification, early detection, cancer stem cells, microRNAs, genome wide approaches to determining risk and outcome, mouse models, and tumor microenvironment. The role of cancer advocates in supporting research was an important component of the meeting. Meeting presentations demonstrated that emerging technologies can molecularly dissect lung cancers that have important relevance for clinical utility. This includes molecular based strategies not only for treatment of established cancers but also individualized and molecularly-based strategies for cancer risk reduction and chemoprevention.

Journal of Thoracic Oncology • Volume 5, Number 6, Supplement 3, June 2010, S207-213

4) Quality assurance in pathology in colorectal cancer screening and diagnosis—European recommendations

Phil Quirke & Mauro Risio & René Lambert & Lawrence von Karsa & Michael Vieth

In Europe, colorectal cancer is the most common newly diagnosed cancer and the second most common cause of cancer deaths, accounting for approximately 436,000 incident cases and 212,000 deaths in 2008. The potential of high-quality screening to improve control of the disease has been recognized by the Council of the European Union who issued a recommendation on cancer screening in 2003. Multidisciplinary, evidence-based European Guidelines for quality assurance in colorectal cancer screening and diagnosis have recently been developed by experts in a pan-European project coordinated by the International Agency for Research on Cancer.

The full guideline document consists of ten chapters and an extensive evidence base. The content of the chapter dealing with pathology in colorectal cancer screening and diagnosis is presented here in order to promote international discussion and collaboration leading to improvements in colorectal cancer screening and diagnosis by making the principles and standards recommended in the new EU Guidelines known to a wider scientific community.

Virchows Arch (2011) 458:1–19

5) Pathology and biology of peripheral T-cell lymphomas

Laurence de Leval & Philippe Gaulard

Peripheral T-cell lymphomas (PTCLs) represent a heterogeneous group of more than 20 neoplastic entities derived from mature T cells and natural killer (NK) cells involved in innate and adaptive immunity. With few exceptions these malignancies, which may present as disseminated, predominantly extranodal or cutaneous, or predominantly nodal diseases, are clinically aggressive and have a dismal prognosis. Their diagnosis and classification is hampered by several difficulties, including a significant morphological and immunophenotypic overlap across different entities, and the lack of characteristic genetic alterations for most of them. Although there is increasing evidence that the cell of origin is a major determinant for the delineation of several PTCL entities, however, the cellular derivation of most entities remains poorly characterized and/or may be heterogeneous. The complexity of the biology and pathophysiology of PTCLs has been only partly deciphered. In recent years, novel insights have been gained from genome-wide profiling analyses. In this review, we will summarize the current knowledge on the pathobiological features of peripheral NK/T-cell neoplasms, with a focus on selected disease entities manifesting as tissue infiltrates primarily in extranodal sites and lymph nodes.

Histopathology 2011, 58, 49–68.

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6) Evidence for Human Lung Stem Cells

Jan Kajstura, Ph.D., Marcello Rota, Ph.D., Sean R. Hall, Ph.D., Toru Hosoda, M.D., Ph.D., Domenico D'Amario, M.D., Fumihiko Sanada, M.D., Hanqiao Zheng, M.D., Barbara Ogşrek, Ph.D., Carlos Rondon-Clavo, M.D., Joyo Ferreira-Martins, M.D., Alex Matsuda, M.D., Christian Arranto, M.D., Polina Goichberg, Ph.D., Giovanna Giordano, M.D., Kathleen J. Haley, M.D., Silvana Bardelli, Ph.D., Hussein Rayatzadeh, M.D., Xiaoli Liu, M.D., Ph.D., Federico Quaini, M.D., Ronglih Liao, Ph.D., Annarosa Leri, M.D., Mark A. Perrella, M.D., Joseph Loscalzo, M.D., Ph.D., and Piero Anversa, M.D.

Although progenitor cells have been described in distinct anatomical regions of the lung, description of resident stem cells has remained elusive.

Surgical lung-tissue specimens were studied in situ to identify and characterize human lung stem cells. We defined their phenotype and functional properties in vitro and in vivo. Human lungs contain undifferentiated human lung stem cells nested in niches in the distal airways. These cells are self-renewing, clonogenic, and multipotent in vitro.

After injection into damaged mouse lung in vivo, human lung stem cells form human bronchioles, alveoli, and pulmonary vessels integrated structurally and functionally with the damaged organ. The formation of a chimeric lung was confirmed by detection of human transcripts for epithelial and vascular genes. In addition, the self-renewal and long-term proliferation of human lung stem cells was shown in serial-transplantation assays. Human lungs contain identifiable stem cells. In animal models, these cells participate in tissue homeostasis and regeneration. They have the undemonstrated potential to promote tissue restoration in patients with lung disease.

N Engl J Med 2011;364:1795-806.

Cancer and aspirin

A meta-analysis of more than 25,000 people suffering from a variety of common, deadly cancers found that a daily dose of the **blood-thinner aspirin** taken for more than four years reduced the rate of death by about 20% (*Lancet* doi : 10.1016/SO140-6736(10)62110-1, 2010).

Medulloblastoma and mutations

An analysis of nearly 100 children with medulloblastoma, a brain cancer that mainly affects youngsters, found that **childhood brain tumors** have five to ten times less genetic alteration compared to solid tumors that affect adults, suggesting that fewer mutations are needed to drive tumor formation in kids (*Science* doi : 10.1126/science.1198056, 2010).

Statin standoff

Doctors are increasingly prescribing statins as a preventive measure, even for people who don't show signs of heart problems. But according to a new meta-analysis, the cholesterol-lowering drugs may not help avoid heart disease in healthy people. A team led by Shah Ebrahim, an epidemiologist at the London School of Hygiene and Tropical Medicine, analyzed data from 14 clinical trials, and found little added benefit from taking statins preventatively. Statins "should be used with caution in people at low risk of cardiovascular disease", Ebrahim says. The authors also reported that the mainly industry-sponsored trials suffered from selective reporting and the inclusion of study subjects with previous heart problems.

(*Cochrane Database Syst. Rev.* 1, CD004816, 2011).

A diabetes drug and its liabilities

Newspapers reported that UK pharma giant **GlaxoSmithKline** was setting aside \$3.4 billion to cover government investigations and product liability claims related to its diabetes drug, Avandia, which has been banned in European markets and is heavily restricted in the US.

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Avastin and heart failure

An analysis of data from five studies involving nearly 4,000 women with breast cancer found that those taking **Avastin** face a small but significantly higher risk of heart failure than their counterparts who received placebos

(*J. Clin. Oncol.* doi: 10.1200/JCO.2010.32.9060, 2011). The results are another blow to the top-selling cancer drug, which US regulators recently recommended against using for breast cancer.

Autism

Children born within a year of an older sibling are three times more likely to develop **autism** as those born at least three years after, according to a study of nearly 663,000 second – born children

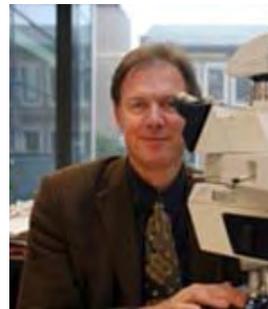
(*Pediatrics* doi: 10.1542/peds.2010-2371, 2011)

Good news in the fight against malaria

The WHO reported good news in the fight against malaria: annual deaths have declined from an estimated 985,000 in 2000 to 781,00 in 2009 including a 50% drop in cases of the disease in 11 sub-Saharan African countries.

From *Nature* 2010-11

What's new?



The Quality assurance program on KRAS testing of the ESP: results and plans.

Prof. Han van Krieken

One of the changes we as pathologists encounter is the rapid introduction of new biological agents for cancer treatment. For several of these we need to perform additional testing and therefore we have introduced several new tests in our laboratories. These new tests need a different approach to validation and external quality assurance (EQA) and it is therefore that the ESP had decided to set up a European program for EQA for KRAS mutational analysis in colorectal cancer. This program was set up with emphasis on the close interaction of pathologists and molecular biologists under the guidance of Els Dequeker, who is very experienced in quality assurance for molecular tests. The set-up of the program was supported by Amgen. The outline of this program has been described earlier in the newsletter, was published in *Virchows Archive* (and is well received: 57 citations within 2.5 years). Now we are able to report on the progress of the program. More details can be found in Bellon et al, *the Oncologist* 2011 and Bellon et al, *Virchow Archive*, in press).

You will be aware that recently, therapeutic agents targeting the epidermal growth factor receptor (EGFR) have been developed for the treatment of colorectal cancer (CRC). Cetuximab and Panitumumab, two anti-EGFR monoclonal antibodies, have been approved in several countries for the treatment of CRC. However, these therapies are only effective in a subset of patients. It has been clearly shown that in patients with CRC anti-EGFR treatment is only effective in those patients that have a wild-type Kirsten RAS (*KRAS*) gene.

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Point mutations in codons 12 and 13 of the *KRAS* oncogene are predictive of poor response to anti-EGFR therapy and can be detected in approximately 30% to 40% of all patients with CRC. Thus; *KRAS* mutational status can be used as predictive biomarker for the response to anti-EGFR therapy in patients with CRC.

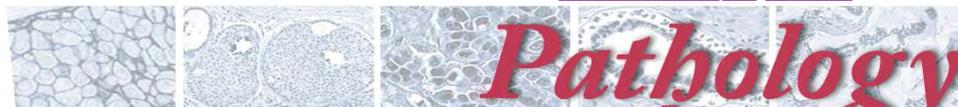
A thorough validation of testing methods and a high standard of quality assurance are critical for accurate and reliable *KRAS* mutation testing in clinical practice. A pilot external quality assessment scheme for tumor specific mutations on routine formalin-fixed paraffin-embedded (FFPE) tissues was set up for a selected group of laboratories. Each participant received a set of slides of 14 cases. The laboratories were asked to use their routine protocol for HE staining, slide evaluation, DNA isolation and molecular testing and to return the datasheet with results to the European scheme organizer within 14 days after arrival of the samples. Of the 13 experienced laboratories that perform *KRAS* testing only 10 correctly identified the *KRAS* in all 14 cases that were circulated. Furthermore, there was a remarkable difference in the estimates of the percentage of tumor cells by pathologists in the tissue samples. These results indicated that quality assurance for *KRAS* testing is important and supports the need of the European quality assurance program.

Next, the EQA scheme was set up in 9 different European countries/region. Nine regional/national coordinating laboratories sent consecutive unstained sections from 10 invasive colorectal carcinomas with known *KRAS* mutation status to each participating laboratory. The laboratories could use their own preferred method for histological evaluation, DNA isolation and mutation analysis and were required to provide the results within 10 working days. From the 59 participating laboratories, 41 reported all 10 genotypes correctly, 14 laboratories made 1 genotype mistake and 4 laboratories made 2 or more genotype mistakes. Reports of the analyses often lacked essential information. The results indicate that 70% of laboratories correctly identified the *KRAS* mutational status in all cases; furthermore, but also that better standardization in estimating tumour cell percentages is needed. We expect that this EQA scheme to be a useful tool that provides information about the performance of a given laboratory compared to others, and stimulates participants to optimize suboptimal lab procedures and reports. Therefore, laboratories that perform *KRAS* testing in colorectal cancer are encouraged to participate in the quality assurance program set up by the European Society of Pathology.

On June the 9th the ESP will host in its office in Brussels an invitational conference for which clinicians, molecular biologists, pharmaceutical industries, quality assurance programs and of course pathologists have been invited. The aim of this conference is to exchange experiences and to formulate a vision and action plan on EQA for molecular pathology.

It is the vision of the ESP that molecular pathology is now an integrated part of pathology and thus it is important high quality can be delivered. Where possible the ESP wishes to support this vision. Much more information can be found on the website.

Han van Krieken



European School of Pathology



Polish Society of Pathologists



Update in



Department of Pathomorphology, UJCM

Gastro-Intestinal Pathology

Faculty: Arzu Ensari, Fatima Carneiro, Fredrik Bosman, Karel Geboes

2011 course

June 16-18, Kraków, Poland

AIM

Post-graduate residential course for young European pathologists based on workshops, slide seminars and lectures to update and standardize participants' diagnostic ability. The three-day course (June 16–18, 2011) in Kraków, Poland, will cover the broad spectrum of the pathology of gastrointestinal tract. Traditionally, the course will be led by the highly recognized European experts.

Registration & hotel reservation at

<http://www.konferencje-uj.pl/>

(please register, when choose EscoP course)

Registration fee is 150 €

VENUE

Jagiellonian University, Auditorium Maximum
33 Krupnicza Str. Kraków, Poland

Preliminary program

June 16

09.00 – 10.00: Prof. Fredrik Bosman

Introductory lecture:

- *Gastro-esophageal reflux, Barret's esophagus and its evolution towards adenocarcinoma of the Esophagus*

10.00 – 11.30: Slide session esophageal inflammatory lesions

11.30 – 12.30: Interactive wrap-up

(Coffee break during the slide session)

12.30 - 13.30

LUNCH

13.30 – 14.30: Prof. Fatima Carneiro

Introductory lecture:

- *Classification of chronic gastritis, intestinal metaplasia and dysplasia*

14.30 – 16.00: Slide session Chronic Gastritis

16.00 – 17.00: Interactive wrap-up

17.00 – 18.00: Prof. Fatima Carneiro

Special Lecture:

- *Helicobacter pylori and Gastric Cancer/Lymphoma*

(Coffee break during the slide session)

June 17

09.00 – 10.00: Prof. Arzu Ensari

Introductory lecture:

- *Small intestinal pathology in malabsorption syndromes*

10.00 – 11.30: Slide session Small intestinal Biopsies

11.30 – 12.30: Interactive wrap-up

(Coffee break during the slide session)

12.30 – 13.30

LUNCH

13.30 – 14.30: Prof. Karel Geboes

Introductory lecture:

- *Biopsy pathology of Idiopathic Enterocolitis*

14.30 – 16.00: Slide session Biopsy Diagnosis of IBD

16.00 – 17.00: Interactive wrap-up

17.00 – 18.00: Prof. Fred Bosman

Special lecture:

- *Neuroendocrine tumours of the GI tract*

(Coffee break during the slide session)

June 18

09.00 – 10.00: Prof. Karel Geboes

Introductory lecture:

- *Pathology of colon cancer and its precursor lesions*

10.00 – 11.30: Slide session Colon Cancer

11.30 – 12.30: Interactive wrap-up

(Coffee break during the slide session)

12.30 - 13.30

LUNCH

13.30 – 14.30: Prof. Arzu Ensari/Fred Bosman

Introductory lecture:

- *Serrated lesions of the colon*

14.30 – 16.00: Slide session serrated lesions

16.00 Evaluation, end of the course



European School of Pathology - Zagreb Edition 2011 *Update in Gynaecological Pathology*

Dr Raji Ganesan,
Birmingham, UK
Dr Lynn Hirschowitz,
Birmingham, UK
Dr John Smith,
Sheffield, UK
Prof. Mike Wells,
Sheffield, UK

This course is created for younger pathologists and pathology residents. During three-day course (**November 02-04, 2011**) the broad spectrum of gynaecological pathology will be covered. Participants will have opportunity to listen to few lectures and to take active part in slide seminars, followed by wrap-up sessions. It is designed for improvement and standardization of diagnostic abilities of participants. The course is organized by the Institute of Pathology, University of Zagreb School of Medicine and Ljudevit Jurak University Department of Pathology, Sestre Milosrdnice University Hospital, and led by highly recognized European pathology experts.

LIMITED NUMBER OF PARTICIPANTS!!!

Registration fee:

180 euro or 1300 kuna
(lunch, dinner and wine road trip included, accommodation not included)

Venue and contact:

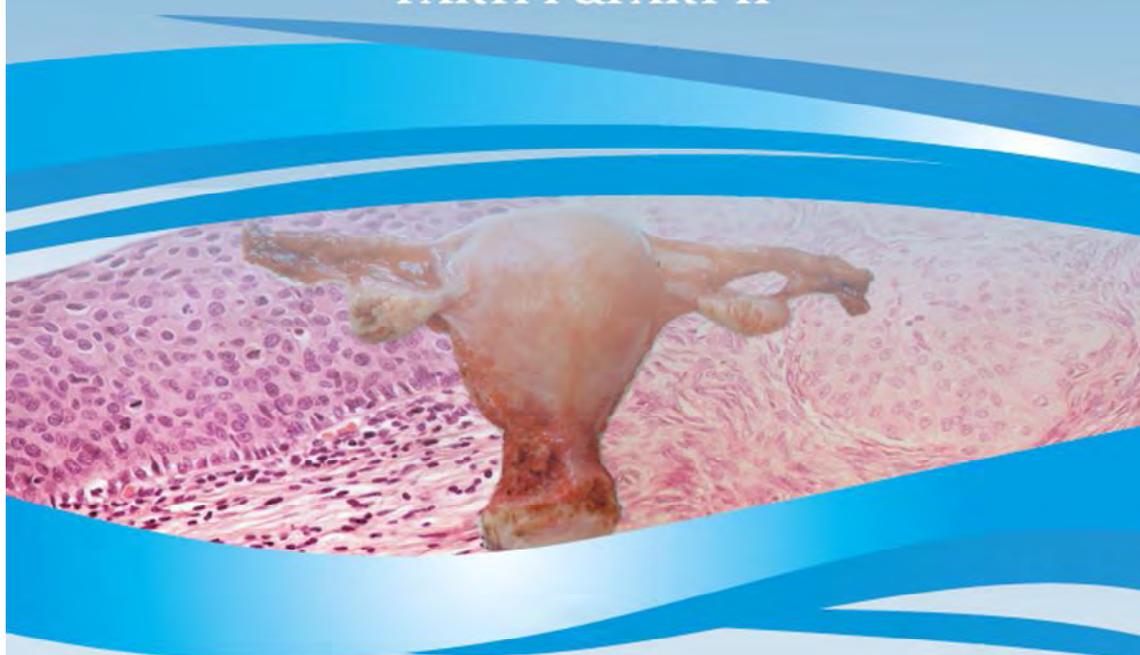
Institute of Pathology, University of Zagreb School of
Medicine, Šalata 10, Zagreb, Croatia
phone: +385 91 3693693
fax: +385 1 4921151
e-mail: lbrcic@mef.hr



**IOANNINA UNIVERSITY COURSES IN PATHOLOGY
(IUCP)**

Third Series

**GYN PATHOLOGY - ONCOLOGY
UTERUS & OVARIES
PART I & PART II**



Director: Emeritus Prof. Niki J. Agnantis

31 May - 3 June, 2011

HOTEL PALLADION, IOANNINA, GREECE

Scientific Information: <http://www.iucp.gr>

Secreteriat Information: Conferre Ltd, Ioannina, Greece

Tel: (+30) 2651068610, Fax: (+30) 2651068611

Email: info@conferre.gr



European Society of Pathology



Pathology newsletter

EuroClonality

Workshop
Nijmegen, the Netherlands, February 2012

www.EuroClonality.org

EuroClonality Board

- Dr. Liz Hodges, Chair
- Prof. Jacques J.M. van Dongen, past-chair
- Dr. Ton Langerak, Treasurer
- Dr. Monika Brüggemann, Secretary
- Dr. Patricia Groenen, member
- Dr. Frederic Davi, member
- Dr. Jose Cabeçadas, member

Agenda

Educational Workshop

EuroClonality/BIOMED-2:
 “Clonality assessment in Pathology”
 February 2012
 Nijmegen, the Netherlands



European Society of Pathology



23rd European Congress of Pathology

27 August – 1 September 2011
 Helsinki, Finland
 Helsinki Exhibition & Convention Centre

www.esp-congress.org

ESP President 2009 –2011
 Michael Wells, United Kingdom

Local Organising Committee
 Veli-Pekka Lehto,
 Chair Ilmo Leivo,
 Secretary Anna Sankila
 Panu Kovanen



First Macedonian Congress of Pathology

European School of Nephropathology supported by the ERA-EDTA
and the Working Group Nephropathology of the **ESP**

14. October 2011, Ohrid, Macedonia

www.pathology2011.com

Program:

Welcome Address

Gordana Petrusavska (Macedonia)

Introduction and Biopsy Work Up

Michael J. Mihatsch (Basel, Switzerland)

Glomerular diseases:

Hereditary diseases

Marie Claire Gubler (Paris, France)

ANCA associated diseases: Immunoserology, Pathogenesis and Pathology

Alenka Vizjak and Dusan Ferluga (Ljubljana, Slovenia)

Amyloidosis diagnosis and classification in native kidney and renal transplants

Handan B. Özdemir (Ankara, Turkey)

Break

Tubulo-interstitial diseases:

Acute and chronic interstitial nephritis

Marlene Praet (Gent, Belgium)

Tubulo-interstitial changes in primary glomerulopathies

Slavica Kostadinova - Kunovska (Macedonia)

Break

Transplant Pathology:

Acute humoral and cellular rejection

Eva Honsová (Prague, Czech Republic)

The value of protocol biopsies in renal allografts

Gordana Petrusavska (Macedonia)

**All information about the Congress and the Course are available at the congress
web-site: www.pathology2011.com.**



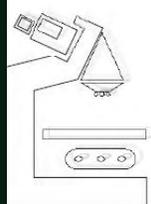
“E.Sco.P. CRAIOVA”

“Thyroid and Parathyroid Pathology

*Prof. Gianni Bussolati (Torino), Prof. Manuel Sobrinho Simões (Porto)
Assoc. Prof. Marco Volante (Torino), Dr. Catarina Eloy (Porto)*

29th of September - 2nd of October 2011

UNIVERSITY OF MEDICINE
AND PHARMACY
CRAIOVA
DEPARTMENT OF PATHOLOGY



Details about the Course in

www.escop.umfcv.ro/2011/Welcome.html