



Inside this Issue

President's Report	1
2025 MSTS Annual Meeting Presidential Guest Speaker	2
MSTS Executive Committee	2
2025 MSTS Annual Meeting Schedule at a Glance	2 - 4
2025 MSTS Annual Meeting Product Theaters	4
Thank You 2025 Annual Meeting Corporate Sponsors	5
Research Committee	7
Fellowship Committee	7
Skeletal Metastasis Committee	9
Musculoskeletal Tumor Registry Update	11
Guidelines and EBM Committee	11
AI Workgroup	13
Interested in Joining MSTS?	13
Communications and Technology Committee	13
Thank You Outgoing Committee Members	14
Donate through OREF & OrthoPAC ..	15
New Alternative Entry Pathway.	15
Specialty Day 2026	17
Musculoskeletal Oncology ICL's and Symposia Approved for AAOS Meeting in New Orleans in 2026	17
Save the Dates! MSTS Future Meetings	18

MSTS Headquarters

1515 E. Woodfield Road
Suite 345
Schaumburg, IL 60173
info@msts.org
847/698-1625

President's Report – Rajiv Rajani, MD



Rajiv Rajani, MD

Dear MSTS
Members,

I hope you
have enjoyed
a rewarding
summer and
fall — whether
traveling with
loved ones, car-
ing for patients,
teaching the

next generation, or pursuing personal and academic passions. If you are like many of us, the year seems to move faster and faster. As I near the end of my term as your President, I am grateful for this chance to pause, reflect, and appreciate all that we have accomplished together.

This year, I set out with one simple goal: to make MSTS about our members and the incredible work you do every day. Your commitment to patients, your curiosity, and your resilience continue to inspire me. Thank you for the privilege of serving you.

A highlight of this year has been planning our upcoming annual meeting in Mexico City — a dream I have long held. The vision was bold: to challenge assumptions, break down barriers, and dispel myths through shared science, culture, and community. For some, the idea of Mexico City felt unfamiliar at first. Yet the response has been extraordinary — we are on track for the largest attendance in MSTS history, with tremendous engagement from our partners at SLATME and colleagues across Latin America.

To our Program Chairs, Santiago Lozano-Calderon and Greg Domson — thank you for building something truly special. To our industry partners — and to Kerri and Deborah, whose dedication makes miracles look routine — your support and enthusiasm elevated this meeting beyond all expectations. We are so grateful.

Beyond the meeting, our collective progress this year has been remarkable.

Together, we:

- Elevated our members' voices and leadership in national conversations
 - Expanded inclusion of international colleagues and care team members — with new membership pathways underway
 - Supported meaningful research through new grant initiatives in metastatic disease and benign tumors
 - Continued critical collaboration with MsTR and MORI
 - Maintained stable member dues while greatly expanding value
- And perhaps most exciting: our volunteer pipeline is overflowing with new faces across all career stages — a testament to our strength, culture, and future.

We are also celebrating our most ambitious and innovative programming yet — including the percutaneous pelvis workshop and our first grant-writing workshop. Your energy is shaping the future of our field.

It has been humbling and deeply fulfilling to serve as your President. Thank you for your trust, your passion, and your belief in what MSTS can be. I cannot wait to see all of you in Mexico City as we celebrate our community, expand our horizons, and continue this amazing journey — together.

With gratitude and joy,
Rajiv Rajani, MD
President, MSTS





2025 Annual Meeting



Presidential Guest Speaker

Thursday, December 4
2:10 – 3:10 PM

Patient Advocacy in Turbulent Times

Bobby Mukkamala, MD



We are honored to have the esteemed AMA Board President Bobby Mukkamala, MD present at this year's Annual Meeting. You will not want to miss his presentation titled, "Patient Advocacy in Turbulent Times". Dr. Mukkamala is a board-certified otolaryngologist—head and neck surgeon. A graduate of the University of Michigan Medical School, he is in solo, private practice in Flint, Michigan.

Dr. Mukkamala, who has been active in the AMA since residency, is a past Michigan representative to the AMA Young Physicians Section, a past recipient of the AMA Foundation's "Excellence in Medicine" Leadership Award and, for 13 years, served as a member of the Michigan delegation to the AMA House of Delegates. In 2009 he was elected to the AMA Council on Science and Public Health and served as its chair from 2016 to 2017.

Schedule at a Glance

Wednesday, December 3

- 8:00 AM – 11:00 AM **Percutaneous Pelvis Fixation Workshop** *Separate Registration Required*
1:00 PM – 5:00 PM **MORI Young Member Session** *Separate Registration Required (Regency Ballroom A & B)*
6:00 PM – 8:00 PM **MSTS Welcome Reception** *La Residencia - Hyatt Regency*

Thursday, December 4

- 7:00 AM – 4:15 PM **E-Posters (Foyer)/Exhibits Open** *(Regency Ballroom C)*
8:15 AM – 4:00 PM **Nurse & Allied Health Professionals Symposium**
Separate Registration Required
8:00 AM – 8:10 AM **Introduction and Welcome**
Raj Rajani, MD
8:10 AM – 8:45 AM **Session I: Soft Tissue Sarcoma** *(Regency Ballroom A & B)*
Moderators: **Meena Bedi, MD, MS** and **Alexander Lazarides, MD**
8:45 AM – 9:20 AM Moderators: **Adam S. Levin, MD** and **Alexandra K. Callan, MD**
9:25 AM – 9:45 AM **Product Theater #1 - Onkos Surgical** *No CME Credit (Regency Room G)*
9:25 AM – 9:45 AM Break *(Regency Ballroom C) / E-Poster Viewing (Foyer)*
9:50 AM – 10:25 AM **Session II: Trials in Musculoskeletal Oncology** *(Regency Ballroom A & B)*
Moderators: **Benjamin J. Miller, MD, MS** and **Alysia Kemp, MD**
10:25 AM – 11:00 AM **Session III: Artificial Intelligence** *(Regency Ballroom A & B)*
Moderators: **Anthony Bozzo, MD, MSc, FRCSC** and **Tessa Balach, MD**
11:05 AM – 11:25 AM **Product Theater #2 - EMD Serono** *No CME Credit (Regency Room G)*
11:05 AM – 11:25 AM Break *(Regency Ballroom C) / E-Poster Viewing (Foyer)*



MSTS Executive Committee

President

Rajiv Rajani, MD
rrajani@ttuhsc.edu

President-Elect

Francis Y. Lee, MD, PhD
francis.lee@yale.edu

Secretary

Matthew R. DiCaprio MD
mdicaprio15@gmail.com

Treasurer

Nicholas Bernthal, MD
NBernthal@mednet.ucla.edu

Immediate Past President

Benjamin Miller, MD, MS
benjamin-j-miller@uiowa.edu

Past President

Michelle Ghert, MD
ghertm@mcmaster.ca

Education Committee

Ginger Holt, MD
holtginger@gmail.com

Research Committee

Bang Hoang, MD
bahoang@montefiore.org

Membership Committee

Odion Binitie, MD
odion.binitie@moffitt.org

Members-at-Large

Alan Blank, MD
alan_blank@rush.edu
Lisa B. Ercolano, MD
Lisa.Ercolano@ahn.org

2025 MSTS Annual Meeting – Schedule at a Glance, continued

Thursday, December 4, continued

- 11:30 AM – 12:05 PM **Session IV: Osteosarcoma** (Regency Ballroom A & B)
Moderators: **Joshua C. Patt, MD, MPH** and **Rosanna Wustrack, MD**
- 12:05 PM – 1:00 PM Lunch (Regency Ballroom C) / E-Poster Viewing (Foyer)
- 1:00 PM – 2:10 PM **MSTS Business Meeting** No CME Credit (Regency Ballroom A & B)
- 2:10 PM – 3:10 PM **Presidential Guest Speaker – Bobby Mukkamala, MD**
“Patient Advocacy in Turbulent Times”
- 3:15 PM – 3:35 PM **Product Theater #3 - Zimmer Biomet** No CME Credit (Regency Room G)
- 3:15 PM – 3:35 PM Break (Regency Ballroom C) / E-Poster Viewing (Foyer)
- 3:40 PM – 4:15 PM **Session V: Registries and Large Database Studies** (Regency Ballroom A & B)
Moderators: **Michelle Ghert, MD, FRCSC** and **Max Vaynrub, MD**
- 4:15 PM **Meeting Adjourns**
- 6:00 PM – 10:00 PM **Social Event - Casino Espanol** (bus transportation provided)

Friday, December 5

- 7:00 AM – 12:00 PM **E-Posters (Foyer)/Exhibits Open** (Regency Ballroom C)
- 8:00 AM – 8:05 AM **Announcements**
- 8:00 AM – 8:40 AM **Session VI-A: Chondrosarcoma** (Regency Ballroom A & B)
CONCURRENT SESSIONS
Moderators: **Julia D. Visgauss, MD** and **Lukas M. Nystrom, MD**
- 8:00 AM – 8:40 AM **Session VI-B: Genetics and Basic Science** (Regency Room E)
Moderators: **Kurt R. Weiss, MD** and **Francis Lee, MD, PhD**
- 8:40 AM – 9:00 AM **MSTS Research Updates & Grant Announcements** (Regency Ballroom A & B)
Bang H. Hoang, MD
- 9:05 AM – 9:25 AM **Product Theater #4 - Deciphera Pharmaceuticals** No CME Credit (Regency Room G)
- 9:05 AM – 9:25 AM Break (Regency Ballroom C) / E-Poster Viewing (Foyer)
- 9:30 AM – 10:05 AM **Session VII-A: Metastatic Bone Disease I** (Regency Ballroom A & B)
CONCURRENT SESSIONS
Moderators: **Ian English, MD** and **Brooke M. Crawford, MD**
- 9:30 AM – 10:05 AM **Session: VII-B Amputation** (Regency Room E)
Moderators: **Nicholas Arpey, MD** and **C. Parker Gibbs, Jr., MD**
- 10:05 AM – 10:45 AM **Session VIII-A: Metastatic Bone Disease II** (Regency Ballroom A & B)
CONCURRENT SESSIONS
Moderators: **Meredith Bartelstein, MD** and **Juan A. Pretel, MD**
- 10:05 AM – 10:45 AM **Session VIII-B: Pelvic Reconstruction** (Regency Room E)
Moderators: **Krista Goulding, MD, MPH** and **Nathan W. Mesko, MD**
- 10:50 AM – 11:10 AM **Product Theater #5 - Daiichi Sankyo, Inc (DSI)** No CME Credit (Regency Room G)
- 10:50 AM – 11:10 AM Break (Regency Ballroom C) / E-Poster Viewing (Foyer)
- 11:15 AM – 11:45 AM **Session IX-A: Giant Cell Tumor of Bone** (Regency Ballroom A & B)
CONCURRENT SESSIONS
Moderators: **Kevin A. Raskin, MD** and **David D. Greenberg, MD**
- 11:15 AM – 11:45 AM **Session IX-B: Miscellaneous: ICG in Musculoskeletal Oncology** (Regency Room E)
Moderators: **Raffi Avedian, MD** and **Mark T. Scarborough, MD**
- 11:45 AM – 12:35 PM Lunch (Regency Ballroom C) / E-Poster Viewing (Foyer)

2025 MSTS Annual Meeting – Schedule at a Glance, continued

Friday, December 5, continued

12:35 PM – 1:10 PM	Session X-A: Access and Health Disparities (Regency Ballroom A & B) CONCURRENT SESSIONS Moderators: Rajiv Rajani, MD and Cara A. Cipriano MD, MSc
12:35 PM – 1:10 PM	Session X-B: Endoprosthetic Reconstruction (Regency Room E) Moderators: Matthew T. Houdek, MD and Nicholas M. Bernthal, MD
1:10 PM – 1:45 PM	Session XI: SLATME I (Regency Ballroom A & B) Moderators: Marcos Galli Serra, MD and Adriana Hernandez, MD
1:45 PM – 2:05 PM	Break (Regency Ballroom C) / E-Poster Viewing (Foyer)
2:05 PM – 2:40 PM	Session XII: SLATME II (Regency Ballroom A & B) Moderators: Cecilia Belzarena, MD, MPH, MBA and Carlos Cuervo Lozano, MD
2:40 PM – 3:15 PM	Session XIII: Clinical Cases SLATME, “My Worst Case” Panel Discussion (Regency Ballroom A & B) Panelists: Luis Carlos Gomez Mier, MD , Francisco Linares, MD and Eduardo J. Ortiz-Cruz, MD
3:15 PM – 3:35 PM	Award Presentations No CME Credit
3:35 PM – 3:40 PM	Closing Remarks
3:40 PM – 4:00 PM	Bebidas in the Foyer - Thank you for attending the 2025 MSTS Annual Meeting.

2025 MSTS Annual Meeting Product Theaters

No CME Credits

(Regency Room G)

Thursday, December 4
9:25 AM – 9:45 AM

Onkos Surgical



Presenter: Alan Blank, MD
Title: Bringing Personalization to Pelvic Oncology:
My Surgical Insights from the My3D® Personalized Pelvic Reconstruction System

Thursday, December 4
11:05 AM – 11:25 AM

EMD Serono



Presenter: Alysia Kemp, MD
Title: Tenosynovial Giant Cell Tumor: Multidisciplinary Team Perspective on Complex Cases

Thursday, December 4
3:15 PM – 3:35 PM

Zimmer Biomet



Presenter: R. Lor Randall, MD, FACS
Title: Comprehensive Osteointegration-
Standing the Test of Time

Friday, December 5
9:05 AM – 9:25 AM

Deciphera Pharmaceuticals



Presenter: Nicholas Bernthal, MD
Title: The Clinical Management of TGCT

Friday, December 5
10:50 AM – 11:10 AM

Daiichi Sankyo, Inc (DSI)



Presenter: Alexander Christ, MD
Title: TURALIO Summit



2025 Annual Meeting



Thank You

The Musculoskeletal Tumor Society extends sincere appreciation to the following exhibitors for their generous support of the MSTS 2025 Annual Meeting.



Daiichi-Sankyo



Platinum Sponsors



Silver Sponsor



Bronze Sponsor



Sponsors

3D Side
Adler Ortho US
Biocomposites
Bone Solutions, Inc.
Curvafix
Globus Medical
IlluminOss

Implantcast North America
Insight Surgery
Lazurus 3D
Link Bio
MTF Biologics
OsteoCentric Technologies
Signature Orthopaedics

Mexico City, Mexico



Together, We Can Create Better Tomorrows

We are advancing our science in pursuit of life-changing medicines.

We are proud to support MSTs in its mission to advance the science of orthopedic oncology and to promote high standards of patient care through excellence in education and research. As proud collaborators, we work together to make meaningful strides for patients.

Get to know us better.



Research Committee – Bang Hoang, MD, Chair

The MSTS Research Committee (RC) had a productive and engaging summer, continu-

ing its mission to advance musculoskeletal oncology research and support innovative

scientific inquiry within our community.

Upcoming Event: Building Competitive Grants and a Sustainable Research Program

The RC would like to remind all MSTS members to join us for this educational session at the Annual Meeting on **Wednesday, December 3, 2025**, from **3:00–5:00 PM** in **Regency Ballroom AB**, Hyatt Regency Mexico City.

To attend this session, don't forget to [register for MORI on the MSTS Annual Meeting website](#).

Co-chairs Bang Hoang and Kurt Weiss have assembled an outstanding faculty to lead this interactive and educational session:

Michelle Ghert – Clinical Trials
Regis O'Keefe – Sustainable Research
Kevin Jones – Funding Sources
Eric Henderson – NIH Training Grants
Kurt Weiss – Specific Aims
Rick Terek – Review Process: Do's and Don'ts

This session will provide insights for both early-career and established investigators seeking to strengthen their grant writing and research strategies. At the conclusion of the session, there will be an opportunity to interact with the faculty panel and ask questions, allowing attendees to gain advice and guidance on their own research and funding goals.

AAOS Specialty Society Research Support Fund

A highlight of the season was the committee's rigorous review of proposals submitted for the AAOS Specialty Society Research Support Fund. After a detailed evaluation of scientific merits, innovation, feasibility, and potential clinical impact, the committee selected the grant application from Dr. Christopher Collier, titled: **"Muscle Wasting in Metastatic Bone Disease: Mechanisms and Translational Targets."** The committee recognized the

proposal's strong mechanistic foundation, its clear translational potential, and the applicant's well-structured research plan as key factors supporting this recommendation. The RC formally endorsed Dr. Collier's proposal for the \$100,000 AAOS award, reflecting MSTS's commitment to fostering impactful research that bridges translational science and clinical care.

If selected by the AAOS for funding, Dr.

Collier's team will also receive a \$25,000 matching fund from MSTS, further amplifying the reach and impact of this important work. Due to a very tight deadline set by AAOS, we regrettably could not provide written critiques to the applicants after our reviews were concluded. Special thanks to our President, Dr. Rajani, who reached out to AAOS to voice our concerns regarding the impact of this tight timeline and to help improve future review process.

Committee Recognition

The Research Committee would like to recognize the following members for their expertise and positive energy: Anthony Bozzo, Elyse Brinkmann, Chris Collier, Ian Dickey, Josh Lawrenz, Brock Lindsey, and Brian Walczak. Your contributions continue to strengthen our collective efforts and advance the research mission of MSTS.

Special thanks go to our outgoing members, Chris Collier and Brock Lindsey, for

their dedication, leadership, and service to the committee. Their insight and commitment have been invaluable, and we wish them continued success in their future endeavors.

The RC extends its appreciation to all members for their continued engagement and dedication to advancing musculoskeletal oncology research. If you have any suggestions to improve your experience or

our logistics, feel free to reach out to me (bahoang@montefiore.org) or any member of the RC at info@msts.org. We look forward to seeing you in Mexico City this December!

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

The fellowship committee is very excited to announce a hybrid program director meeting this coming MSTS Annual Meeting in Mexico City on December 3rd, 2025 at 9:00 am. Statistics from the past match cycle will be presented and discussed. Another cycle year of evaluation starts

for the MSTS recognized programs. The previous platforms for data collection will be tested again as well as the newly implemented platform with New Innovations for surgical case collection for fellows in training.

Non-program directors are welcome to participate but number of participants is limited. Please contact Kerri Mink at kmink@msts.org to confirm your participation virtually or in person.

IN TGCT

GO BEYOND TUMOR RESPONSE

WITH PROVEN SYMPTOMATIC
AND FUNCTIONAL IMPROVEMENTS^{2*}

In adults with symptomatic TGCT when surgery will potentially cause worsening functional limitation or severe morbidity²

See the tumor response data, active ROM results, impact on PROs like physical function and worst pain, and safety profile at [ROMVIMZAHCP.com](https://romvimzahcp.com)

*Improved function is defined as an improvement in PROMIS-PF, which measures a patient's ability to do a range of daily activities.^{3,4}

NCCN=National Comprehensive Cancer Network® (NCCN®); PRO=patient-reported outcome; PROMIS-PF=Patient-Reported Outcomes Measurement Information System Physical Function (TGCT-specific); ROM=range of motion; TGCT=tenosynovial giant cell tumor.

INDICATIONS AND USAGE

ROMVIMZA is indicated for treatment of adult patients with symptomatic tenosynovial giant cell tumor (TGCT) for which surgical resection will potentially cause worsening functional limitation or severe morbidity.

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

Hepatotoxicity:

- Cases of serious and fatal liver injury have occurred with the use of another kinase inhibitor that targets CSF1R. Serious and fatal liver injury have not been observed with ROMVIMZA.
- Elevated AST and ALT can occur with ROMVIMZA.
- Avoid ROMVIMZA in patients with pre-existing increased serum transaminases; total bilirubin or direct bilirubin (>ULN); or active liver or biliary tract disease, including ALP.
- Monitor liver function tests prior to initiation of ROMVIMZA, twice a month for the first two months and once every 3 months for the first year of therapy and as clinically indicated thereafter. Withhold and reduce the dose, or permanently discontinue ROMVIMZA based on the severity of the hepatotoxicity.

Embryo-Fetal Toxicity:

- ROMVIMZA may cause fetal harm when administered to pregnant women. Advise pregnant women on the potential risk to the fetus.
- Advise females of reproductive potential and males with female partners of reproductive potential to use effective contraception during treatment with ROMVIMZA and for 1 month after the last dose.

Allergic Reactions to FD&C Yellow No. 5 (Tartrazine) and No. 6 (Sunset Yellow FCF):

- ROMVIMZA 20 mg capsule contains FD&C Yellow No. 5 (tartrazine) which may cause allergic reactions (including bronchial asthma) in certain susceptible patients. FD&C Yellow No. 5 (tartrazine) sensitivity is frequently seen in patients who also have aspirin sensitivity.

- Advise patients that ROMVIMZA 14 mg and 20 mg capsules contain FD&C Yellow No. 6 (Sunset Yellow FCF), which may cause allergic reactions.

Increased Creatinine without Affecting Renal Function:

- Increases in serum creatinine can occur with the use of ROMVIMZA. These increases in serum creatinine may not be associated with changes in renal function. Increases in creatinine reversed upon ROMVIMZA discontinuation. During ROMVIMZA treatment, use alternative measures that are not based on serum creatinine to assess renal function.

Adverse Reactions:

The most common (≥20%) adverse reactions, including laboratory abnormalities that occurred in patients receiving ROMVIMZA were increased AST, periorbital edema, fatigue, rash, increased cholesterol, peripheral edema, face edema, decreased neutrophils, decreased leukocytes, pruritus, and increased ALT.

Drug Interactions:

- **P-glycoprotein (P-gp) substrates:** Avoid concomitant use of ROMVIMZA with P-gp substrates. If concomitant use cannot be avoided, take ROMVIMZA at least 4 hours prior to P-gp substrates.
- **Breast Cancer Resistance Protein (BCRP) substrates:** Avoid concomitant use of ROMVIMZA with BCRP substrates.
- **Organic Cation Transporter 2 (OCT2) substrates:** Avoid concomitant use of ROMVIMZA with OCT2 substrates.
- Concomitant use of vimseltinib with P-gp substrates, BCRP substrates or OCT2 substrates may increase exposure of these substrates.

Lactation: Advise females not to breastfeed during treatment with ROMVIMZA.

Please click for the full Prescribing Information.

References: **1.** Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for Soft Tissue Sarcoma V.5.2024. © National Comprehensive Cancer Network, Inc. 2025. All rights reserved. Accessed March 12, 2025. To view the most recent and complete version of the guideline, go online to NCCN.org. NCCN makes no warranties of any kind whatsoever regarding their content, use or application and disclaims any responsibility for their application or use in any way. **2.** ROMVIMZA [package insert]. Waltham, MA: Deciphera Pharmaceuticals, LLC. **3.** Gelderblom H, Bhadri V, Stacchiotti S, et al. Vimseltinib versus placebo for tenosynovial giant cell tumour (MOTION): a multicentre, randomised, double-blind, placebo-controlled, phase 3 trial. *Lancet*. 2024;403(10445):2709-2719. **4.** Gelderblom H, Bhadri V, Stacchiotti S, et al. Vimseltinib versus placebo for tenosynovial giant cell tumour (MOTION): a multicentre, randomised, double-blind, placebo-controlled, phase 3 trial. *Lancet*. 2024;403(10445)(suppl):1-124.



Skeletal Metastasis Committee – Felasfa Wodajo, MD, Chair

The MSTs Skeletal Metastasis Committee has had a busy first year of existence. We divided up into six teams, below is some of the work that has been done:

1. Disparities

- We completed a SEER database analysis of racial and other disparities in the treatment of skeletal metastases. The manuscript is in its final stages of revision, before submission for publication.

2. Education

- We worked with Annual Meeting Committee to highlight skeletal metastases research at our Annual Meeting in Mexico City, including a new awards for best skeletal metastasis poster and podium presentation.
- In collaboration with ASCO and ASTRO, we are planning a first-ever multidisciplinary skeletal metastasis “tumor board” at Specialty Day 2026.

3. Investigation

- We are completing a systematic review of percutaneous treatments for skeletal metastases, planned for publication.
- We disseminated a Delphi survey to

MSTs members to identify top research priorities for skeletal metastasis research

4. Society Partnerships

- We continue to build relationships with other medical and surgical societies, including ASTRO, ASCO, OTA and patient support organizations

5. Workshop and Industry Partners

- We are planning our 2nd workshop on percutaneous treatment of pelvic metastases to be held during our 2025 Annual Meeting (see below)

MSTs Consensus Classification of Skeletal Metastases

This is a long term initiative to develop a multi-disciplinary consensus classification scheme for skeletal metastases to be used for clinical communication, investigation, registries and quality metrics. It is being developed in collaboration with the MSTs Guidelines and Evidence Based Medicine (GEBM). We have invited representatives from Interventional Radiology (SIO), Medical Oncology (ASCO), Orthopedic Surgery

(OTA/AAOS), Radiation Oncology (ASTRO), Radiology (ACR) and Spine surgery (NASS), of which several have already nominated representatives. Our goal is to start work in the beginning on 2026.

MSTs Percutaneous Pelvis Metastasis Workshop:

At the 2024 MSTs Annual Meeting in Chicago, we held the first ever MSTs hands-on workshop on the percutaneous treatment of pelvic bone metastases. We are building on that success for the 2025 meeting in Mexico City, with a more streamlined curriculum, more attendees and wider range of industry partners, demonstrating their products and how they can be used in the treatment of skeletal metastases.

The members of the MSTs Skeletal Metastases Committee are Meredith Bartlestein, Matt Cable, Ian English, Joe Kendal, Aditya Maheshwari and Felasfa Wodajo. If you have any ideas or suggestions, please feel free to reach out to any of us.

stryker

One Baseplate. Multiple solutions.



The foundation of the Triathlon® Hinge system is the versatility of the Triathlon Revision Baseplate, with multiple intraoperative and post-operative revision knee implant options, allowing for seamless conversion to any Stryker revision procedure.



A surgeon must always rely on his or her own professional clinical judgment when deciding whether to use a particular product when treating a particular patient. Stryker does not dispense medical advice and recommends that surgeons be trained in the use of any particular product before using it in surgery. The information presented is intended to demonstrate the breadth of Stryker's product offerings. A surgeon must always refer to the package insert, product label and/or instructions for use before using any of Stryker's products.

Products may not be available in all markets because product availability is subject to the regulatory and/or medical practices in individual markets. Please contact your sales representative if you have questions about the availability of products in your area. Stryker Corporation or its divisions or other corporate affiliated entities own, use or have applied for the following trademarks or service marks: GMRS, Stryker, Triathlon. All other trademarks are trademarks of their respective owners or holders.



We invite you to
**learn more about TGCT
at MSTS 2025**
by attending the session:

**Tenosynovial Giant Cell Tumor:
Multidisciplinary Team Perspective
on Complex Cases**

TGCT is relentless.
And so are we—in continuing to raise
awareness about the burden of TGCT.

Join us at the **Musculoskeletal Tumor Society Annual Meeting** for an
expert-led session exploring real-world approaches to complex TGCT cases.

Thursday, December 4th
11:05 AM to 11:25 AM
Regency Room G

TGCT=tenosynovial giant cell tumor.

EMD Serono is the Healthcare business of Merck KGaA,
Darmstadt, Germany in the US and Canada.

© 2025 Merck KGaA, Darmstadt, Germany or its affiliates.
All rights reserved. US-NONOTGCT-00031 10/25

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

This update for the MsTR will focus on how the MSTs/AAOS registry relates to the International Sarcoma Registry (ISR), a combined effort with MSTs, ISOLS, EMSOS, SLATME, and APMSTS. Much as the AAOS and MSTs recognized that the current state of technology and surgeon enthusiasm provided an opportunity to create the MsTR to improve sarcoma data collection, quality improvement, and research in North America, other global professional orthopaedic oncology societies have reached the same conclusion.

With international support and collaboration, a working group representing all five multi-national orthopaedic oncology societies have met regularly since January 2025 to create a minimal dataset. This dataset consists of 25 unique questions

regarding provider information, patient details, tumor characteristics, and treatment of individual sarcoma patients. The minimal dataset was based upon experience from the MsTR, Europe, and Australia. The goal of the ISR at this stage is to encourage every surgeon treating sarcoma to collect the same data points in the spirit of quality improvement and with the anticipation of future collaborative efforts. The minimal dataset and data dictionary are available to anyone by request in RED-Cap and Excel by emailing Abby Grothe at abigail-grothe@uiowa.edu.

The ISR does not replace the MsTR. The MsTR collects much more robust data and allows for national benchmarking, individual and institutional comparisons, trends over time, surgical and adjuvant treatment

details, and outcomes at a much higher level. However, the ISR does present an opportunity for those not currently participating in the MsTR to start collecting data in a clear and consistent manner. Current MsTR participants are submitting the data elements critical to the minimal dataset already, and are effectively participating in the ISR.

Please reach out to a steering committee member or find one of us in Mexico City if you have any questions. We also encourage everyone to fill out this survey about current registry participation, barriers, and interest in future collaboration: (QR code).



Guidelines and Evidence Based Medicine Committee Update

– Nicholas Tedesco, DO, Chair

To the entire MSTs membership: I would like to express my sincere appreciation of your support the past several years. I have been on The Guidelines and Evidence-Based Medicine (GEBM) for 5 years now and have chaired this fantastic committee for the last 3. Unfortunately, that means I will be turning the committee over to the next chair to continue moving us into the future of musculoskeletal oncology research and care. I have truly been honored to have served in this role.

The GEBM and Skeletal Metastases Committee are going to be embarking on the daunting task of defining and classifying pathological fractures with the goal of ultimately working with the Practice Management Committee on defining “impending pathologic fracture” for the purpose of improving documentation, research, and reimbursement improvements and standardization. The plan will be a multi-year task force including key stakeholders from

the MSTs, ASTRO, ASCO, NASS, AAOS, and ACR. We look forward to engagement with this task force and development of a reproducible and clinically helpful classification schema.

In the meantime, we are also vetting a scoring system that will be used for predicting bias and methodological weaknesses in abstracts submitted for the yearly meeting. The hope is to decrease the time requirements and offload administrative burden on the selection committee volunteers, as our abstract numbers continue to increase year after year. We are also hard at work on our next novel clinical practice assessments (NCPA's) to help you decide what may or may not be practice changing for your institution. Topics to be covered this year include percutaneous acetabuloplasty with or without ablation, fluorescence in tumor surgery, amputee osseointegration, and new and emerging medical treatments (vimseltinib, selumetinib, and

mirdametinib). They will be posted at the time of the Annual Meeting in Mexico City on the MSTs website.

Finally, we once again have a \$5000 grant as part of an ongoing endowment plan for new grants each year for quality improvement projects. Please reach out to us or info@msts.org for further details, requirements, and be on the lookout for ongoing email blast reminders for the fund RFA.

The GEBM Committee is here to serve the entire MSTs membership! If you have any ideas for clinical practice guidelines, appropriate use criteria, novel clinical practice assessments, systematic reviews, clinical decision aids, or quality improvement projects, 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.

Delivering **Comprehensive Solutions** for **Significant Bone Loss**

**VISIT OUR BOOTH AT THE MSTs 2025
ANNUAL MEETING TO LEARN MORE**

DISCOVER OUR
LIMB SALVAGE
SOLUTIONS



ZIMMER BIOMET

This material is intended for health care professionals. All content herein is protected by copyright, trademarks and other intellectual property rights, as applicable, owned by or licensed to Zimmer Biomet or its affiliates unless otherwise indicated, and must not be redistributed, duplicated or disclosed, in whole or in part, without the express written consent of Zimmer Biomet. Distribution to any other recipient is prohibited. For product information, including indications, contraindications, warnings, precautions, potential adverse effects and patient counseling information, see the package insert and www.zimmerbiomet.com. Check for country product clearances and reference product specific instructions for use. ©2022 Zimmer Biomet • A0550.1-US-en Issue Date 2025-10

AI Workgroup – Felasfa Wodajo, MD, Lead

The MSTS Artificial Intelligence (AI) Workgroup convened in March 2025 with six at-large volunteers and three representatives from MSTS committees, one each from Education, GEBM and Research. The charge of the Workgroup to educate MSTS members on AI advances and to help guide AI development in musculoskeletal oncology. This is what we have been working on:

1. **AI Webinar**

We are planning a webinar to educate MSTS members on the clinical uses of AI, both present and looking into the future. The webinar will have a didactic and an interactive portion, and is currently planned for March 2026

2. **MSTS Patient Education Chatbot**

Since our patients are already using LLMs to ask their questions, we should develop our own chatbot with information sources that we have verified. We are working on testing the initial version on a small panel of patients to see if it shows adequate promise for deployment.

3. **AI Literature Literacy**

We are developing an “AI Handbook” to help MSTS members better understand the language and concepts of the AI literature to become more discerning and empowered readers.

4. **MSTS AI Guidelines**

We are developing a position state-

ment for MSTS to define our Society’s position on the appropriate use of AI. Other medical societies have published position statements, which we are adapting to be appropriate for our specialty. We will maintain it as a “live” document, updating it periodically as the technology evolves.

The AI Workgroup members are Zach Burke, Anthony Bozzo, Alex Christ, Bang Hong, Joseph Ippolito, Alysia Kemp, Giovanni Paralicci, Dipak Ramkumar and Felasfa Wodajo. AI is developing at an incredible speed. If you have any ideas or suggestions, please feel free to reach out to any of us.

Interested in Becoming a MSTS Member or Are You Ready to Advance In Your Career to the Next Membership Category?

Membership Application Deadline: **February 9, 2026**

Details [here](#).



Communications and Technology Committee – Cecilia Belzarena, MD, Chair

Over the past several months, our committee has continued its mission to enhance the visibility of MSTS and foster engagement among our members and the broader musculoskeletal oncology community.

We remain active across all MSTS communication channels—our website, monthly e-blast, newsletter, and social media—ensuring that important updates, educational resources, and society initiatives reach both professionals and patients. Our MSTS Instagram and LinkedIn pages continue to grow steadily, helping us connect with colleagues, patient groups, and sarcoma foundations around the world.

The **Member Spotlight** and “**I’m Your Orthopaedic Oncologist**” series remain key features of our outreach, highlighting the incredible diversity, dedication, and

impact of our members. We have also continued to expand our Patients’ Topics Library on the MSTS website, providing reliable and accessible information for patients and families affected by musculoskeletal tumors.

We are also proud to support and promote the work of other MSTS committees by amplifying their initiatives and resources across our communication platforms.

Looking ahead to **MSTS 2025 in Mexico**, we invite all members to connect with us during the conference—share your favorite moments, photos, and experiences, and help us showcase the energy and community spirit that make MSTS unique.

We would like to extend our sincere thanks to all members of the Communi-

cations Committee (Alysia Kemp, Susan McDowell, Izu Ibe, Nicholas Arpey and Matthew Wells) and to Kerri Mink for their continued dedication, creativity, and collaboration in advancing our shared goals.

We are grateful for the ongoing support and engagement of our members and excited about what’s ahead. Together, we’ll keep strengthening MSTS’s voice and expanding its reach within the sarcoma and orthopedic oncology communities.

Thank You Outgoing Committee Members

As their terms end, thank you to the following members for their contributions to their respective committees:

Alan Blank, MD

Executive Committee Member-at-Large

Michelle Ghert, MD, FRCSC

Executive Committee Past President

Robert J. Esther, MD

Education Committee

Karim Masrouha, MD

Education Committee

Odion Binitie, MD

Membership Committee Chair

Kevin MacDonald, MD

Membership Committee

Vincent Ng, MD

Membership Committee

Christopher Collier, MD

Research Committee

Brock A. Lindsey, MD

Research Committee

Alysia Kemp, MD

Communications & Technology Committee

Susan McDowell, MD

Communications & Technology Committee

Megan Anderson, MD

Fellowship Committee

John H. Alexander, MD

Fellowship Committee

Nicholas Tedesco, MD

Guidelines and Evidence Based Medicine Committee Chair

Pietro Ruggieri, MD

Guidelines and Evidence Based Medicine Committee

Adam Levin, MD

Practice Management Committee Chair

thank you

OsteoCool™ 2.0 RF bone tumor ablation

Powerful

Four probes

Predictable

Independent channel control

Proven

Backed by OPuS One study¹



[medtronic.com/OsteoCool](https://www.medtronic.com/OsteoCool)

1. Levy et al. Cardiovasc Intervent Radiol. 2023;46(5):600-609.

©2025 Medtronic. All rights reserved. Medtronic, Medtronic logo, and Engineering the extraordinary are trademarks of Medtronic.
***Third-party brands are trademarks of their respective owners. All other brands are trademarks of a Medtronic company. UC202411500EN





Learn about the results of the ChonDRAGON clinical trial

ChonDRAGON is a randomized registrational phase 2 study of ozekibart (INBRX-109) in unresectable or metastatic conventional chondrosarcoma

Scan or [click here](#) to find out more



Ozekibart (INBRX-109) is an investigational medicine whose efficacy and safety profile have not been established. It has not been approved by the U.S. FDA or other health authority for any use.

INHIBRX

© 2025 Inhibrx Biosciences, Inc. All Rights Reserved.

MED-US-INBRX-109-2500013
11.25

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.

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

AAOS
AMERICAN ACADEMY OF
ORTHOPAEDIC SURGEONS

MsTR
MUSCULOSKELETAL
TUMOR
REGISTRY

A SIMPLER WAY TO PARTICIPATE IN THE MSTR



The new Alternative Entry Pathway (AEP) makes it easier to participate in the AAOS Musculoskeletal Tumor Registry (MsTR).

With the AEP, providers submit short forms via a centralized REDCap platform. It's ideal for institutions with limited technical resources and serves as a flexible starting point for Registry participation.

The AEP offers:

- Minimal setup without the need for EHR integration
- Centered on collecting key clinical data elements
- Designed to simplify onboarding and support meaningful participation

Get started with the MsTR today and begin receiving tumor data insights.

[Explore Participation Options](#)

NanoCept[®]

Antibacterial Implant Technology

60-70% of periprosthetic joint infections (PJIs) are associated with intraoperative contamination, a major clinical challenge.¹

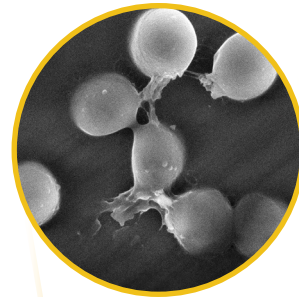
\$1.85B is the estimated cost to the healthcare system by 2030.²

NanoCept[®] is the First FDA-granted Antibacterial Coating Technology for Orthopaedic Implants

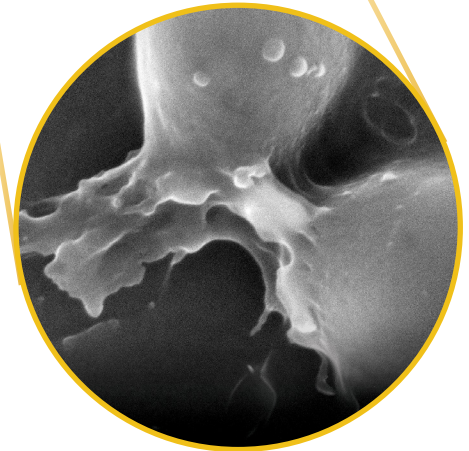
- ➔ **Demonstrates excellent safety and biocompatibility** in preclinical *in vivo* and *in vitro* studies³
- ➔ **Delivers broad spectrum efficacy** (up to 99.999% kill rate of bacteria commonly found in the OR)^{3*}
- ➔ **Avoids the emergence of bacterial resistance** with non-eluting, nanoscale surface³



Antibacterial coated surface
disrupts bacterial cell walls



Magnified view of disrupted
bacterial cell walls



Contact us to learn more: **973.264.5400** | onkossurgical.com/nanoccept

Disclaimer: Onkos Surgical and NanoCept are registered marks and trademarks of Onkos Surgical. A surgeon should rely on his or her own professional medical/clinical judgement when deciding which particular product to use when treating a patient. Onkos Surgical does not prescribe medical advice and advocates that surgeons be trained in the use of any particular product before using it in surgery. A surgeon must always refer to the product label and/or instructions for use for product risks and complete prescribing information before using any Onkos Surgical product.

1. Izakovicova P, Borens O, Trampuz A. Periprosthetic joint infection: current concepts and outlook. EFORT Open Rev. 2019;4(7):482-494. doi: <https://doi.org/10.1302/2058-5241.4.180092>.
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. doi: 10.1016/j.arth.2020.12.005.
3. Data on file. Onkos Surgical, Inc.

* *In vitro* testing.

© 2025. Onkos Surgical, Inc. All Rights Reserved. CORP 10.22.25 v0

**2025 MSTs
Diamond Supporter**

VISIT US AT **TABLE 3** | MSTs 2025 | MEXICO CITY



Specialty Day 2026

Registration is open to attend the MSTS 2026 Specialty Day session on Friday, March 6th from 8:00 am to 4:00 pm in New Orleans at the Morial Convention Center, Room 261. The Program Committee includes chair Dr. Alan Blank, vice chair Dr. Alexander Lazarides and at large members Drs. Christopher Collier and Samir Sabharwal. The group has developed an interesting and informative agenda with focuses including molecular oncology, a

young investigator forum, pelvis-spine surgery, ortho-plastics, as well as 2 interactive case discussions. Dr. R Lor Randall plans to give an inspiring key note presentation titled "From the Bard Parker to the Molecular Scalpel – A Surgeon's Perspective on Sarcomatology."

[Click here for additional details, to view the Program Agenda and to register.](#)



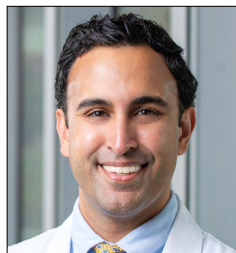
Alan Blank, MD
Specialty Day
Program Chair



Alexander Lazarides, MD
Specialty Day
Vice Chair



Christopher Collier, MD
Specialty Day
Member-at-Large



Samir Sabharwal, MD
Specialty Day
Member-at-Large



Look out for Musculoskeletal Oncology ICL's and Symposia Approved for AAOS Meeting in New Orleans in 2026

ICL's

Title: **Management of the Infected Endoprosthesis**
Applicant: **Matthew Houdek, MD**

Title: **Advances in Surgical Planning and Reconstruction Options of the Shoulder Girdle after Oncologic Resection**
Applicant: **Matthew Houdek, MD**

Title: **Pathologic Fractures: Who Should Manage Them?**
Applicant: **Rajiv Rajani, MD**

Title: **Percutaneous Treatment of Periacetabular Osteolytic Metastases and Pathological Fractures**
Applicant: **Rosanna Wustrack, MD**

Symposia

Title: **Global Consensus and Controversies on Massive Pelvis Defects and Reconstruction: From Minimal to Extreme**
Moderator: **Francis Hornicek, MD, PhD**

Future Meetings – Save the Dates!



MSTS
EST. 1977
MUSCULOSKELETAL
TUMOR SOCIETY

MSTS 2026 Specialty Day
Friday, March 6, 2026
Morial Convention Center, Room 261
New Orleans, Louisiana



MSTS
EST. 1977
MUSCULOSKELETAL
TUMOR SOCIETY

50TH ANNIVERSARY MSTS ANNUAL MEETING
October 29 - 31, 2026
JW Marriott Turnberry Conference Center – Miami, Florida

ABSTRACT SUBMISSION
Opens: February 1, 2026
Closes: March 31, 2026

Celebrating
50 YEARS




Francis Hornicek Jr., MD, PhD
Chair



Francis Lee, MD, PhD
President

www.msts.org



Save the Date

MSTS
EST. 1977
MUSCULOSKELETAL
TUMOR SOCIETY

2027 MSTS ANNUAL MEETING
Charleston, South Carolina • October 13 - 15, 2027

THE
CHARLESTON PLACE
HISTORIC DOWNTOWN



2027 MSTS President
Matthew R. DiCaprio, MD, FAAS, FAOA



Program Chair
Lee R. Leddy, MD, MSCR