

¹⁵Department of Radiation Oncology, Emory University Winship Cancer Institute, Atlanta, GA, USA.

¹⁴Pediatric Radiotherapy Unit, Fondazione IRCCS Istituto Nazionale dei Tumori, Milan, Italy.

¹⁵Northwestern University Feinberg School of Medicine, Chicago, IL, USA.

¹⁶Department of Radiation Oncology, University Hospital Heidelberg, Heidelberg, Germany.

¹⁷Department of Radiation Oncology, University of Florida College of Medicine, Jacksonville, FL, USA.

¹⁸Department of Radiation Oncology, Apollo Proton Cancer Centre, Chennai, Tamil Nadu, India.

¹⁹Department of Radiation Oncology, University Medical Center Utrecht, Utrecht, Netherlands.

²⁰Department of Radiotherapy and Radiation Oncology, Faculty of Medicine and University Hospital Carl Gustav Carus, Technische Universität Dresden, Dresden, Germany.

²¹Department of Radiation Oncology, Faculty of Medicine, University of Toronto, Toronto, Ontario, Canada.

²²Department of Radiation Oncology, Institut Claudius Regaud, Institut Universitaire du Cancer de Toulouse-Oncopole, Toulouse, France.

²³Department of Radiation Oncology, Dana-Farber Cancer Institute, Boston, MA, USA.

²⁴Department of Radiation Oncology, St. Jude Children's Research Hospital, Memphis, TN, USA.

²⁵Department of Radiation Oncology, Assistance Publique Hôpitaux de Marseille, Marseille, France.

²⁶Department of Radiation Oncology, Grootte Schuur Hospital and University of Cape Town, Cape Town, South Africa.

²⁷Department of Radiation Oncology, Medical Center Hamburg-Eppendorf, Hamburg, Germany.

²⁸Department of Radiation Oncology, Massachusetts General Hospital, Boston, MA, USA.

²⁹Department of Radiation Oncology, McGill University Health Centre, Cedars Cancer Centre, Montréal, Québec, Canada.

³⁰Department of Radiation Oncology, New York University Langone School of Medicine, New York, NY, USA.

³¹College of Medicine, Swansea University, Swansea, UK.

³²Department of Oncology, The Clatterbridge Cancer Centre, Liverpool, UK.

³³Department of Particle Therapy, University Hospital Essen, West German Proton Therapy Centre Essen, West German Cancer Center, German Cancer Consortium, Essen, Germany.

³⁴Department of Radiation Oncology and Cancer Imaging, Peter MacCallum Cancer Centre, Melbourne, Victoria, Australia.

³⁵Department of Radiation Oncology, Memorial Sloan Kettering Cancer Center, New York, NY, USA.

³⁶Department of Radiation Oncology, University of Leipzig, Leipzig, Germany.

*e-mail: mfmcalee@mdanderson.org

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Competing interests

The authors declare no competing interests.




Reply to 'Assembling the brain trust: the multidisciplinary imperative in neuro-oncology'

Kenneth Aldape, Kevin M. Brindle, Louis Chesler, Rajesh Chopra, Amar Gajjar, Mark R. Gilbert, Nicholas Gottardo, David H. Gutmann, Darren Hargrave, Eric C. Holland, David T. W. Jones, Johanna A. Joyce, Pamela Kearns, Mark W. Kieran, Ingo K. Mellinghoff, Melinda Merchant, Stefan M. Pfister, Steven M. Pollard, Vijay Ramaswamy , Jeremy N. Rich, Giles W. Robinson , David H. Rowitch, John H. Sampson, Michael D. Taylor, Paul Workman and Richard J. Gilbertson 

We thank Ludmir and colleagues (Ludmir, E. B. et al. Assembling the brain trust: the multidisciplinary imperative in neuro-oncology. *Nat. Rev. Clin. Oncol.* <https://doi.org/10.1038/s41571-019-0235-z> (2019))¹ for their positive comments on our Position Paper (Aldape, K. et al. Challenges to curing primary brain tumours. *Nat. Rev. Clin. Oncol.* <https://doi.org/10.1038/s41571-019-0177-5> (2019))², and we agree entirely that radiation oncology has, and will likely continue to have for many years, a critical role in the treatment of patients with primary brain tumours. In particular, we note the helpful references to newer radiotherapy approaches, such as stereotactic radiosurgery and proton beam therapy, that are advancing the treatment of brain tumours. As noted by Ludmir and colleagues¹, a substantial portion of our Position Paper² is given over to the discussion of radiation oncology.

As stated in our manuscript², this narrative was composed following a series of international, multidisciplinary meetings, hosted by Cancer Research UK, which engaged many individuals involved in brain tumour research and treatment. It is important to note that our manuscript is a Position Paper and not a Meeting Report. Thus, rather than

synthesising the entirety of the discussions that took place during these meetings, it reports the opinions of those authors listed on the paper. The discussions held by the committee did indeed engage radiation oncologists as well as individuals in other disciplines; however, other commitments precluded these individuals from participating in many of the meetings and in the writing of our Position Paper². Nonetheless, we wish to assure Ludmir and colleagues¹ that the entire brain tumour research and treatment community recognizes and values the importance and contribution of radiation oncology to the management of brain tumours. We very much look forward to continuing our interactions with colleagues in this discipline for the good of all patients with these terrible diseases.

Kenneth Aldape¹, Kevin M. Brindle², Louis Chesler³, Rajesh Chopra⁴, Amar Gajjar⁴, Mark R. Gilbert⁵, Nicholas Gottardo⁶, David H. Gutmann⁷, Darren Hargrave⁸, Eric C. Holland⁹, David T. W. Jones¹⁰, Johanna A. Joyce¹¹, Pamela Kearns¹², Mark W. Kieran¹³, Ingo K. Mellinghoff¹⁴, Melinda Merchant¹⁵, Stefan M. Pfister¹⁶, Steven M. Pollard¹⁷, Vijay Ramaswamy , Jeremy N. Rich¹⁸, Giles W. Robinson , David H. Rowitch²⁰, John H. Sampson²¹, Michael D. Taylor²², Paul Workman⁵ and Richard J. Gilbertson ^{2,23*}

¹Department of Pathology, University Health Network, Toronto, Ontario, Canada.

²CRUK Cambridge Institute, Li Ka Shing Centre, Cambridge, UK.

³The Institute of Cancer Research, London, UK.

⁴Department of Oncology, St Jude Children's Research Hospital, Memphis, TN, USA.

⁵Center for Cancer Research, National Cancer Institute, Bethesda, MD, USA.

⁶Telethon Kids Institute, Subiaco, Western Australia, Australia.

⁷Department of Neurology, Washington University School of Medicine, St. Louis, MO, USA.

⁸Great Ormond Street Hospital for Children, Great Ormond Street, London, UK.

⁹Human Biology Division, Fred Hutchinson Cancer Research Center, Seattle, WA, USA.

¹⁰Pediatric Glioma Research Group, Hopp Children's Cancer Center at the NCT Heidelberg, Heidelberg, Germany.

¹¹Ludwig Institute for Cancer Research, University of Lausanne, Lausanne, Switzerland.

¹²Cancer Research UK Clinical Trials Unit, Institute of Cancer and Genomic Sciences, University of Birmingham, Edgbaston, Birmingham, UK.

¹³Dana-Farber Boston Children's Cancer and Blood Disorder's Center and Harvard Medical School, Boston, MA, USA.

¹⁴Human Oncology and Pathogenesis Program and Department of Neurology, Memorial Sloan Kettering Cancer Center, New York, NY, USA.

¹⁵Oncology, AstraZeneca IMED Biotech Unit, Boston, MA, USA.

¹⁶Division of Pediatric Oncology, Hopp Children's Cancer Center at the NCT Heidelberg, Heidelberg, Germany.

¹⁷Cancer Research UK Edinburgh Centre and Medical Research Council Centre for Regenerative Medicine, University of Edinburgh, Edinburgh, UK.

¹⁸Department of Pediatrics, The Hospital for Sick Children, Toronto, Ontario, Canada.

¹⁹Division of Regenerative Medicine, Department of Medicine, University of California, San Diego, San Diego, CA, USA.

²⁰Department of Pediatrics, University of Cambridge and Wellcome Trust-MRC Stem Cell Institute, Cambridge, UK.

²¹The Preston Robert Tisch Brain Tumour Center, Duke Cancer Center, Durham, NC, USA.

²²The Arthur and Sonia Labatt Brain Tumour Research Centre, and Division of Neurosurgery, The Hospital for Sick Children, Toronto, Ontario, Canada.

²³CRUK Cambridge Institute and Department of Oncology, University of Cambridge, Hutchison/MRC Research Centre, Cambridge Biomedical Campus, Cambridge, UK.

*e-mail: richard.gilbertson@cruk.cam.ac.uk

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Competing interests

P.W. and R.C. are employees of The Institute of Cancer Research (ICR), which has a commercial interest in a range of drug targets. The ICR operates a Rewards to Inventors scheme whereby employees of the ICR may receive financial benefit following commercial licensing of a project. P.W. is a consultant and/or scientific advisory board member for NextechInvest, Storm Therapeutics, Astex Pharmaceuticals and CV6 and holds stock in Chroma Therapeutics, NextInvest and Storm Therapeutics; he is also a Non-Executive Director of Storm Therapeutics and the Royal Marsden NHS Trust and a Director of the non-profit Chemical Probes Portal. R.C. is an adviser to Syncona Limited and holds equity in Celgene Corporation, e-Therapeutics and Monte Rosa Therapeutics. The other authors declare no competing interests.