

PROCEEDINGS

GYNECOLOGIC ONCOLOGY CONFERENCE 2026

JUNE 14, 2026 | ONLINE

10.00 AM CEST (GMT + 2)

Theme:

"From One-Size-Fits-All to One-for-Each:
Precision Oncology in Gynecologic Cancers".

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**Prof Dr Mohanad Al Ansari**

Board Certified Surgeon – Robotic Surgical Oncology
Minimal Invasive GI
Canadian Specialist Hospital Dubai
CEO – Metaverse Surgical Hospital USA

Title: AI, Metaverse in Surgical Oncology

The future of surgical oncology is being redefined by the integration of Artificial Intelligence (AI), Metaverse technologies, robotic-assisted surgery, laser tumor ablation, and metaverse-guided endoscopy. These innovations are collectively transforming cancer care by improving precision, safety, and efficiency in surgical interventions. AI contributes to enhanced diagnostic accuracy, predictive analytics, optimized surgical planning, and real-time decision support, enabling personalized oncologic treatment strategies. The Metaverse introduces advanced opportunities for virtual surgical simulation, global collaboration, remote mentoring, and patient-specific procedural rehearsal, enhancing both surgical education and operative preparedness.

Robotic surgery continues to offer significant advantages including superior dexterity, three-dimensional visualization, reduced blood loss, minimal invasiveness, and faster postoperative recovery. Laser tumor ablation provides targeted tissue destruction with greater precision, preservation of surrounding healthy structures, reduced complications, and shorter hospitalization. Metaverse endoscopy further strengthens early tumor detection, procedural navigation, and remote expert guidance through immersive digital integration.

The convergence of these technologies represents a paradigm shift in surgical oncology, offering improved clinical outcomes, enhanced surgeon training, and greater accessibility to advanced cancer care. This evolving digital ecosystem is expected to shape the next generation of precision oncology and minimally invasive cancer surgery.



Dr. Miral Mashhour

Consultant in Anatomic Pathology
Director of Pathology and Laboratory Medicine
King Fahad Hospital, Dammam, Saudi Arabia

Title: Folate Receptor Alpha: The Secret Weapon in Ovarian Cancer.

Ovarian cancer remains one of the most lethal Gynecologic malignancies worldwide due to late-stage diagnosis and limited targeted therapeutic options. Folate Receptor Alpha (FRa), a glycosylphosphatidylinositol-anchored membrane protein involved in folate transport, is overexpressed in a large proportion of epithelial ovarian carcinomas, particularly high-grade serous carcinoma, while its expression in normal tissues remains relatively limited. This differential expression makes FRa an important biomarker for both diagnostic and therapeutic applications. The objective of this study is to highlight the clinicopathologic significance of FRa expression in ovarian cancer and explore its potential role in targeted therapy. Immunohistochemical evaluation of FRa expression can assist in tumor characterization and may help identify patients who could benefit from FRa-directed therapies. Recent advances in targeted treatment, including antibody-drug conjugates and folate receptor-targeted agents, have demonstrated promising clinical outcomes, particularly in patients with recurrent or platinum-resistant ovarian cancer. These therapies utilize the selective overexpression of FRa on tumor cells to enhance targeted drug delivery while minimizing systemic toxicity. Understanding the molecular and pathological significance of FRa may contribute to improved patient stratification and the development of personalized therapeutic strategies. Continued integration of molecular pathology with targeted oncology therapies is expected to improve clinical outcomes and expand treatment options for patients.

**Dr. Eman Aboelkheir**

Asst lecturer – Clinical Oncology and Nuclear
Medicine
Alexandria university, Egypt.

Title: The role of PARP inhibitors in the first line maintenance therapy in Ovarian cancer.

Description: Most patients with newly diagnosed Ovarian cancer will have advanced

disease. Nearly 70% of women relapse within 3 years of first-line treatment. There is a significant need for better first-line treatment to improve outcomes for women with advanced ovarian cancer.

Approximately 50% of patients with high grade serous ovarian cancer have HRD. BRCA1 and BRCA2 mutations are the most common alterations among HRD. BRCA mutation and HRD testing are essential to be in routine clinical practice. Per guidelines, maintenance treatment with PARP inhibitors (olaparib, niraparib, and rucaparib) or olaparib +bevacizumab is recommended among patients with advanced ovarian cancer with BRCA mutation or HRD +ve disease.

Also, maintenance treatment with PARP inhibitors or bevacizumab alone is recommended among patients with advanced ovarian cancer with HRD -ve & wild BRCA.

Treatment of patients with HRD-ve tumors remains in an unmet need and face a poor prognosis, with 90% experiencing relapse within 3 years, highlighting the urgent need for new treatment options.

Keywords: ovarian cancer, PARP inhibitors, BRCA and HRD



Dr. Brunilda Haxhiu

Clinical Oncologist
Head of the Patient Admission in Radiotherapy
University Clinical Center of Kosovo
Prishtina, Kosovo

Title: Current State of Cervical Cancer Prevention, Screening and Treatment in Kosovo: Progress, Challenges and Future Perspectives.

Cervical cancer remains a significant public health challenge despite being one of the most preventable malignancies through vaccination, screening, and early intervention. This presentation aims to provide an overview of the current status of cervical cancer prevention, screening, and treatment in Kosovo and to identify key opportunities for improvement. Epidemiological data demonstrate an increasing incidence of cervical cancer, with cases rising from 108 in 2020 to 167 in 2023, highlighting the need for strengthened prevention strategies. Since April 2023, Kosovo has successfully introduced the HPV vaccination program into the national immunization schedule, achieving approximately 85% coverage among the target population and expanding vaccination to boys in 2025. However, organized cervical cancer screening remains limited, and implementation of a nationwide HPV-based screening program represents a major priority. The presentation also outlines the current treatment infrastructure at the University Clinical Center of Kosovo, including modern radiotherapy techniques such as IMRT, VMAT, and image-guided brachytherapy. Despite substantial advances in oncology services, challenges persist, including delayed diagnosis, limited access to specialized care, financial burden, psychosocial impact, and restricted research opportunities. Aligning national efforts with the WHO 90-70-90 targets offers a realistic pathway toward cervical cancer elimination. Continued investment in vaccination, screening, public awareness, and advanced treatment technologies is essential to improve outcomes and reduce the burden of cervical cancer in Kosovo.

Keywords: Cervical cancer, HPV vaccination, screening, Kosovo, prevention, radiotherapy



Dr. Kenza AALAOUI

Radiation Oncology resident
University Hospital International
Shaik Zaid – Morocco

Title: Radiotherapy Techniques in Breast Cancer: Experience from the Radiation Oncology Department of Cheikh Zaid International University Hospital.

Radiotherapy is a cornerstone in the locoregional management of breast cancer and is commonly delivered postoperatively to improve local control and reduce recurrence risk. Several external beam radiotherapy techniques, including three-dimensional conformal radiotherapy (3D-CRT), intensity-modulated radiotherapy (IMRT), and volumetric modulated arc therapy (VMAT), are available, each with specific advantages and limitations. The aim of this study was to compare the dosimetric performance of these techniques in breast cancer patients treated at the Radiation Oncology Department of the International University Hospital Cheikh Zaïd in Rabat. This retrospective, descriptive, and analytical study included 89 patients treated between January 2017 and December 2018. Breast cancer represented 24% of all treated cases, with a median age of 53 years. The most commonly used technique was 3D-CRT (67%). Dosimetric analysis showed that IMRT and VMAT provided superior target coverage compared to 3D-CRT, particularly for D95%, along with improved dose homogeneity. VMAT achieved the best overall homogeneity and target coverage, especially in both radical and breast-conserving settings. Regarding organs at risk, VMAT offered better cardiac and spinal cord sparing, whereas 3D-CRT showed better ipsilateral lung sparing and reduced dose to contralateral structures. Although IMRT and VMAT resulted in slightly higher cardiac doses, these remained within acceptable limits. Overall, all techniques achieved clinically acceptable results, and the choice of technique should be individualized based on patient anatomy and treatment planning objectives.

Comparative Table of Different Radiotherapy Techniques in Radical and Breast-Conserving Surgery

Région / Indicateur	Type / Paramètre	RC3D	IMRT	VMAT	RC3D	IMRT	VMAT
Chirurgie radicale				Chirurgie conservatrice			
PTV 50 Sein	D95% (Gy)	31,08	40,98	45,62	39,28	46,37	46,33
	Dmin (Gy)	9,5	28,5	30,53	2,58	25,14	25,57
	Dmean (Gy)	46,78	49,32	45,91	54,36	64,95	65,10
	D2% (Gy)	51,31	51,66	50,42	72,76	67,5	67,85
	Dmax (Gy)	52,2	53,3	52,5	72,09	67,09	67,48
PTV BOOST	D95% (Gy)	—	—	—	67,39	62,33	62,25
	Dmean (Gy)	—	—	—	69,33	63,87	63,98
	D2% (Gy)	—	—	—	71,5	65,84	66,16
	Dmax (Gy)	—	—	—	72,09	67,09	67,48
	Dmin (Gy)	—	—	—	64,26	61	61,06
Cœur	Dmean (Gy)	1,227	10,63	6,8	2,8	6,7	7
	Dmax (Gy)	9,3	43,2	21,1	47,54	44,41	44,29
	D25% (Gy)	1,37	18,59	8,24	2,42	8,14	8,18
Poumon homolatéral	Dmean (Gy)	9,023	16,267	10,352	0,12	1,25	1,26
	D20% (Gy)	16,270	30,781	17,014	36,7	27,21	27,37
	D30% (Gy)	5,13	24,45	10,373	17,9	19,38	19,42
Poumon controlatéral	Dmean (Gy)	0,758	4,277	2,386	0,82	2,6	2,56
	D20% (Gy)	1,338	5,955	3,29	1,3	3,23	3,07
	D30% (Gy)	1,140	4,045	3,036	1,08	2,82	2,73
Sein controlatéral	Dmean (Gy)	0,577	5,443	2,701	0,76	2,9	2,7
Moelle épinière	Dmean (Gy)	9,149	8,736	3,203	2,89	2,08	2,17

SCIENTIFIC PROGRAMME

14- JUNE 2026

SUNDAY

10.00 AM CEST

WELCOME NOTE BY PROGRAM MANAGER



HONORABLE CHAIR

10.10 AM - 10.30 AM

Prof Dr Mohanad Al Ansari

Board Certified Surgeon – Robotic Surgical Oncology
Minimal Invasive GI
Canadian Specialist Hospital Dubai
CEO – Metaverse Surgical Hospital USA

TOPIC

AI, Metaverse in Surgical Oncology



KEYNOTE PRESENTATION

10.30 AM - 10.50 AM

Dr. Miral Mashhour

Consultant in Anatomic Pathology
Director of Pathology and Laboratory Medicine
King Fahad Hospital, Dammam, Saudi Arabia

TOPIC

Folate Receptor Alpha: The Secret Weapon in
Ovarian Cancer.



10.50 AM - 11.10 AM

Dr. Eman Aboelkheir

Asst lecturer – Clinical Oncology and Nuclear Medicine
Alexandria university, Egypt.

TOPIC

The role of PARP inhibitors in the first line maintenance
therapy in Ovarian cancer.

11.10 AM - 11.30 AM



Dr. Brunilda Haxhiu

MD, PhD, Clinical Oncologist
University Clinical Centre of Kosovo

TOPIC

Current State of Cervical Cancer Prevention, Screening and Treatment in Kosovo: Progress, Challenges and Future Perspectives.

11.30 AM - 11.50 AM



Dr. Kenza AALAOUI

Radiation Oncology resident
University Hospital International Shaik Zaid - Morocco

TOPIC

Radiotherapy Techniques in Breast Cancer: Experience from the Radiation Oncology Department of Cheikh Zaid International University Hospital.

11.50 AM - 12.00 PM



Dr. Dalila Loredana Lo Bue

Breast Surgeon
Humanitas Research Hospital in Milan, Italy

TOPIC

Surgical de-escalation after neoadjuvant chemotherapy in breast cancer: a real-world single breast unit experience.

Closing Remarks

Organizations

Represented by our **Speakers**



**Alexandria
university, Egypt.**



**University Hospital
International Shaik
Zaid - Morocco**



**Metaverse Surgical
Hospital USA**



**Canadian
Specialist
Hospital Dubai**



**King Fahad Hospital, Dammam,
Saudi Arabia**



**Pristin University
Kosovo**



**University
Clinical Centre of
Kosovo**

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GET IN TOUCH



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