



My World

Ramon Salazar is head of translational research at the Institut Català d'Oncologia near Barcelona. He leads the Early Clinical Research Unit and is in charge of the colorectal and neuroendocrine tumour clinics. He is a leading figure in national and European groups on GI cancers and NETs.

■ Why I chose to work in cancer

I was attracted by the scientific challenge and I wanted to help patients live longer with a better quality of life.

■ What I love most about my job

Studying cancer and how to defeat it. I hate the disease for its consequences on my patients, but I am fascinated scientifically by the biology, and I take pleasure in reading science and medicine related to the disease.

■ The hardest thing about my job

When the disease takes away my patients too early. I will never learn to cope with this. You make yourself strong and try to help the families, but there is no way to help them with the terrible feeling of loss.

■ What I've learnt about myself

I am compassionate and intuitive. When you are young you think nothing will prevent you from a successful career curing cancer. But after a while you look back and see how many of your patients you have lost, and you realise that maybe spending time on palliation and consolation is at least as important as healing. We can do so much for people we do not cure.

■ I'll never forget...

My clinical and translational ESMO fellowship at the Beatson Oncology Centre in Glasgow, under the direction of Stanley Kaye and Chris Twelves. I discovered all the faces of the speciality – the biological background and preclinical and clinical pharmacology.

■ A high point in my career

Being part of successful research that can improve the life of my patients, such as the discovery of new resistance mechanisms in BRAF-mutant colorectal cancer or the validation of a prognostic genomic classifier in stage II colon cancer.

■ I wish I were better at...

Understanding the economics related to my job, and my sleep habits (going to bed earlier).

■ What I value most in a colleague

Team work and dedication to improve both knowledge and patient care.

■ The most significant advance in my specialty in recent years

ErbB2 [HER2] in breast cancer. Amongst all the molecular targets that seem to offer significant progress, it is the

only one that has shown a real relevance in the adjuvant setting.

■ My advice to someone entering my specialty today would be...

Do formal training in both communication skills and molecular technology. People are looking for empathy and want to feel there is a human being taking care of them who really cares for them. This can be trained. Oncologists also need to learn about the molecular technologies behind biomarker validation and testing, because there is so much bias and noise in the literature, and we are the ones who have to interpret and apply it.

■ What I wish I'd learnt at medical school

How to budget and organise teams, and provide leadership. We now find ourselves facing a huge challenge because of the economic situation, where we have limited budgets and have to lead teams that provide cancer care to patients and also do research. Skills in how to control expenses and deliver within budget, along with the interpersonal and leadership skills needed to run a team, are even more important than technical, medical or research skills. ■