

Subtitles and transcriptions

Subtitles and transcriptions are available for selected materials for purpose of helping users understand the contents of the educational sessions.

Uncertain words have been indicated with ?? before and after the part.

Parts that could not be understood at all have been indicated as [Audio Not Clear].

Every effort has been made to faithfully reproduce the audio of the sessions as recorded.

However, no responsibility is accepted for mistakes or omissions. ESO does not endorse any opinions expressed in the presentations.

e-Session n 532002 - 19th June 2020

Choosing between doing research or clinical activities

Dr Sessa: Welcome to everybody. My name is Cristiana Sessa. I work at the Oncology Institute of Southern Switzerland. I'm medical oncologist and originally by training a gynecologist. And I was in charge of the development of new drugs in my institution with a particular attention to gynecological cancer. The topic of our meeting this afternoon will be how to choose between doing research or clinical activities. And I'd be glad to discuss this topic with Dr Ines Vaz-Luis, who is a medical oncologist working at the Institute Gustave Roussy, in Paris. So let's start the session. Well, what it's clear to all of us is that medical oncologist opened the way to many potential careers and personal growth, but also that there are many sources of stress and dissatisfaction. And that really the important point is just to choose the right career, which is the most critical step. And the point is that usually the decision about what you want to become is taken during the training period, when there are so many possibilities of help to take the right decision. So perhaps the first step is trying to identify the professional goals, or also to start with even a previous question: why did I decide to become a physician? and why did I choose to become an oncologist? And if we think of how we decided about it, we realize, or I realized that actually it was done by chance, but perhaps we were a bit more lucky and we had opportunities, but there were also perhaps some family pressures or good suggestion although, so we wanted to continue working and studying together with friends. Or we had some personal experiences, either happy or sad, sometimes there are sad previous experiences, somebody suffered from cancer in our family, and we had really a good memory of that. And we wanted to become really a good doctor, try to give back all the nice things we had. Now also the other important point is to identify the professional goals of our activity. And it's really important to understand which are the things I like most about my job, and also which are my motivations, which are the things which make me happy and I'm happy of the way I spend my day. Perhaps, I want to feel useful and good and I'd like to cure patients and relieve suffering. This is a typical attitude of oncologist. Or perhaps I want to make an important scientific discovery, I want to improve in general knowledge and help the society, or also, I want to run a successful private practice, which doesn't exclude to take care of patients. But also, in some ways, I want to take care of my personal well-being, or I want to have a good earning and try to have a concomitant activity, some more leisure, or not to have so much suffering. But what is always very much important is that during my career, during my work, I want to improve my understanding, my world vision, try to broaden my vision. And this should be a general goal when we are studying medicine. And choosing the right career is really the most critical step for a future personal satisfaction, but also for great distress. And very often we don't realize it, because we are young, we don't know how many things could be available, what we could really do at being a medical oncologist.

And always when we are taking trainings, we don't have so many opportunities, so many chances to take the right decision, because we are mostly doing clinical activities, so we don't have a sight of the lab activity of really the research activity. We have a limited insight of the challenges of research and challenges of research very often are also administrative challenges. And if we want to become a scientist or to be the head of a lab, we should take care of that, also get administrative challenges. During the training period, we have a heavy clinical workload. Very often we don't have an intellectual rewarding, and there are no mentors taking care of our personal growth. So it's really important to help our self to avoid future regrets and discontent. So not to start too late when everything has been already decided, or, in some way, you go automatically to a career. Try to prepare yourself and set up your career and mostly your growing. And we know, and we know perhaps already because we had some experience during the long study period of medicine, that there's a burnout and burnout is a syndrome where you have emotional exhaustion, you feel very tired, you don't find any meanings of your activity. So there's a loss of meaning and loss of goal and also there's depersonalization. The point is that when you are in burnout, there are consequences also on the quality of your work. And there are consequences also on the quality of your life, and on your personal relationship with the people you care for around you. And these are the results, some of the results, of a survey, which was run in 2012, among 3,000 medical oncologists, 50-50 men and female, on 60 questions. Trying to understand which were the causes for burnout. And by doing a multivariate analysis, it was shown that there was a strict correlation between the time span seeing patients each week, and the grade of the burnout, the score, with the significant highest score over 30, which is the cut-off in the physician who spent more than 50 hours per week seeing patients. And if you're a medical oncologist, inevitably, you'll be looking after patients who are sick, who are in a very advanced stage of disease, and very often you feel inadequate. Because you don't have really good treatments for them, or you're not able to cope with also their psychological needs. But also there's a correlation between the number, the time spent seeing patients per week, and the degree of depersonalization. And the degree of personalization is higher when you spend more than 50 hours per week seeing patients. So clearly this is related your activity, but also that's related mostly to do only clinical activity, and also perhaps to work in a private practice. Because, if you work in a group, and this is the other important point, if you work in a team, and you should be able to do it in a proper way, this kind of challenges and responsibility is shared among the team, provided you have a good relationship with the team. Which is also related to your competence to be a leader, or to support the others and to make the others feel confident in yourself. Now, back to the same survey I mentioned already, which are the factors related to the burnout? Because these are the situations where we should try to make some modification, or try to rescue, according to the situation. They were the age, and younger medical oncologists are more exposed to burnout than the older ones. This is the number of hours spent seeing patients, but also the number of hours spent at home during work task. But what is also relevant, and this is important when the activity is mostly focusing on one type of cancer, because you know more about this cancer and you see more patients. So perhaps you are more expert in this, but you have more experience and you know more on the, perhaps, negative prognostic factors. So this is an important point. And the same factors which are related to burnout are present also in the academic practice. So in general they are present in all oncologist, but also in academic practice, where generally you're focusing more on a tumor type, you run perhaps clinic dedicated to one particular tumor type. So the concept is that it is important to keep a broadened vision, to know what is going on in your preferred type of cancer, but know what is going on in general in oncology and also in molecular oncology preclinical activities. So try always to join together the clinical activity and the preclinical activity. Now another important advice, decide what you want to do, it is very difficult to be in between. And this decision on where you want to develop more your competence, are taken at the beginning of your career, because then it's difficult to change unless you don't have already some knowledge and you don't have developed already some competence and expertise. So in this paper which was published already in 2006, there is the attempt to identify the four main categories of medical oncologist and there are duties there are rewards. So try in some way to identify yourself. Which are the activities that you identify most, or you run more? Perhaps you are doing mostly clinical activities, you work in a private practice or in a multiple practice, but

the majority of the time is devoted to the care of patients. And you should cover the full spectrum of cancer, including palliative care, which means that you are exposed to a lot of suffering and pain from the patients. And you have a very heavy schedule, because you are alone or you are in a small team, but you should be independent and auto-sufficient. It's a common experience that if you work in a hospital or in the academy, you have a group around you. And when you're younger, this is very much of comfort. If you work, or if you have a role like a clinical educator, you spend less time with patients, because you have also teaching duties, and perhaps, or of course, you like to do it. You have a more controlled schedule, because you should keep time dedicated to teaching. And you cover the full spectrum of cancer, but also you are already specialized. If you are a translational scientist and this is, I think very much interesting, because you should keep both competencies at the preclinical, at the clinical level, you have a specialized clinical expertise, the schedule is more controlled. However, this is a situation which is typically in between and what is difficult is to keep the balance and try to keep the competence and not to lose the sight on the what is going on outside your activity. So it's important to share the time between the two responsibilities and the two teams, and try to put the two of them together, which is the main aim, but also responsibility of translational science. If you are a basic scientist and you can become it, even though at the beginning, you studied medicine, because you had the idea you wanted to cure patients, the time devoted to patient care is very limited. Even though I recommend very much to keep an eye and to keep in contact with the clinic, because you can't understand the value of your research if you don't know what is applicable or what is really relevant in the clinics. You have a very much specialized clinical expertise and your schedule is very much dependent on the lab responsibility. When you are at the high level of basic scientist, you don't work at the bench anymore. You are responsible of the activity of the people working with you. So you have also a role of educator, as well as a mentor. So remember as older you become the challenges and the responsibilities are increasing because your knowledge is greater and also you have the responsibility to give back what you have already received. And which are the rewards? Well you can have intellectual rewards, and if you work in a private practice, the reward is that you know a variety of patients and disease, you have definitely a greater financial compensation. Perhaps you have a recognition in the community, but there are also sources of distress, because you have overwhelming administration duties. Because you should run your office, you are also an administrator, unless you don't try to have somebody who helps you in this very boring activity, which takes out from you energy and resources. If you are a clinical educator you like teaching, and therefore the intellectual rewards come from your scholars, from your school, from the people you teach. You don't have really very often a high financial compensation, it's a salaried position, and you can be recognized at the regional level as educator, but also you are significantly exposed to suffering because as clinical educator, you have a contact with patients. And also, which are the other sources of distress. The point is that you don't know really, if you will have some academic career, your position is not so well defined. And also the point is that perhaps you want to have a greater recognition, that it's difficult, because you don't have more time dedicated to improve your expertise. If you are a translational scientist, it's great. The challenge is to develop both expertise. And personally, I think this is the best position because you can increase your vision, but it's the most difficult one, because your position is also uncertain. Everybody will ask you, but are you a clinician? Are you a scientist? Well, you're doing research, what are you doing as research? and sometime it's really difficult to define it. And you can get some recognition at the national, perhaps at the international level, as a clinical expert, but what is difficult is to keep the balance and to maintain a high level of expertise, and you have anyway your salary position. And it's really important to have a kind of intellectual freedom, because these are the positions where you're also more in contact with drug companies. And to be really a good translational scientist, it's really important to keep your scientific freedom. And then you're a basic scientist, you can make a bigger discovery, you have the huge scientific knowledge, you have a salary position again, if you want to keep your intellectual freedom. You can be recognized as a scientist at the international level, but you have a lot of distress. Because you should manage the lab and very often you are away, and therefore once you're back, you're not recognized as a leader. And it's important to keep this position and you should be able to manage the position of leader, so you need to acquire the skills for doing it. And there's a lot of

competitions within the lab, within the institution, and internationally. Also because you should get grants to run the lab. And there's a continued distress to get the money, to maintain the lab activity, to maintain the salary of the people working with you, to prepare grants, to have the support, to be able to develop the research you think of interest, or the research you like to do, or the research you think it's important and for which, very often, there are no financial support. Now, the point is that, at this point, if this is life, it's really important to prepare yourself. And it's important to commit early, which means that early you should decide what you like to do. So select the field you like the most, but select something where you have already knowledge. Because, really to understand what you like most, you should know already something, or try to develop your knowledge. And then, try to identify a place where you want to go. Even though you're scared and, very often, you're scared to have a fellowship, it's important to do it. Because you should confront yourself at different situations, a new world, perhaps hostile situations. But facing difficulties is always something to make you stronger. And then if you have identified a place, identify the key persons and try to contact them. So be bold, nobody can hurt you. Let's try, could be fellows who are there or past fellows, or perhaps the directors, or really experts in the field you know work in this place. And try to contact them at meetings or by mail. I mean, there's no anything bad if you try to contact persons you like to meet or you like to talk. And then try to look for grants, because you are always very well accepted if you have your own money, your own grant, because you bring help to the lab. You bring a work force to the lab, or to the institution where you want to go to work. And then, this is a personal suggestion which was always very useful for me, plan an exploratory visit, you pay by yourself. You ask, if you can go there to be a visitor for really a short period, it could be two or three days or one week. Perhaps people are not available to receive you because you can be a burden. But if you want to go to a big place, usually, they have already experience with fellows, so they have already a program for a short visit. And you can do that, provided you are a visitor, you don't want to see patients and provided there's somebody who have time to be followed or to talk to you, or to bring you to the clinic or to the patient's activities. So to see how the place is organized, to see who are the persons who work there. And very often in this small visit, you have the flavour, if you like the place or not. If really the place looks as it was presented, or if it looks at how you imagined it in your mind and in your vision. And then, before decided to apply, and then if you decide that this is really the place you should apply for a grant, provided that your chief agrees with that and also the chief of the receiving place. But before going to the fellowship, try to improve your knowledge and your self-confidence. So also, if you want to start a new activity, try to go there being prepared, because you are less scared. You are aware that you know something, and in this way you feel more protected. And then take risks, everybody did it, you're not the first one, nothing really serious could happen to you. And any failure is a lesson. At least you have the satisfaction that you tried, and if you tried, you're already good, because you had the courage to try. And if you succeed, you're even more happy and you're proud of yourself. So this is really a good lesson. The other point is that to prepare yourself, you should try to have a mentor. And I think it's really important to understand what you want to get from a mentor and also, which is the role of a mentor. I think all of us, in some ways, we had a mentor. Perhaps we didn't realize it, but there was somebody who inspired us and who gave us some indication, or typically is the person you thought, well, I'd like to be like her, or I'd like to become like her or him. And mentoring consists in setting up a long term relationship, and to support the growth and the development of the mentee. So when you will be older, and when you'll be wiser remember which could be your duties as a mentor, because it's something you received. So it's really important to give back what you received. And the mentor is a kind of a wise person, is a source of teaching, but also support. It is not the person who gives you the advice and solve the problem, the daily problem. That something, it's easier to find somebody, if you work in the hospital, you can solve the immediate problems, which is there. It's more difficult to find somebody who take care of you and provide indication, and it really pays attention to your personal growth, and also gives indication or give feedbacks on how to modify perhaps your character and your behaviour. So the mentor is not someone who advises on specific actions and changes in daily work, it is definitely more than that. And it's important to identify the right mentor, what you'd like to get. Well, a mentor is a person who has competence has a professional knowledge, but also expertise and experience.

It's a person who's respected by the team. And also is a person who has good skills in communication and a good judgment. And it's something you realize very soon, even though you haven't been in contact very closely, but you understand who are the persons who have a good judgment, and also who are good in communications and relationship. And also the mentor is a person who is committed and invests time and energy, and also shares a personal experience. So I think, perhaps, you identify a mentor, you start and you agree together with this person to have a kind of a mentorship relationship. So it's really important to look at these characteristics. Because if a certain point you are not satisfied with your mentor, you should also discuss and try to improve it and try to decide whether it's worthwhile continuing or perhaps whether it wouldn't be better to split up. Because the point is that it's important to feel well, and to have a personal well-being and interaction. Also, the mentor is somebody who shares contacts and resources, there is no jealousy. I mean, the point is that the mentor is a person who has already reached a certain level and like to improve the growth of the younger person working with her or with him. And also the mentor is a person who's personally, I think, should be enthusiastic, it's a person who provides indications or new initiatives and takes risks. Because the point is that there should be an interaction and the general enthusiasm. So the mentor shouldn't be too negative, shouldn't kill all the good proposals or the new proposals. And it's important that we have a feedback from the mentor. The mentor could be also nasty sometimes, but you understand, perhaps not immediately later on, that this nastiness was done with a good purpose to improve and made us aware of the mistake we did. Now I think this is also an important point. We should think as women, that we are still in a more difficult situation. Even though perhaps at the beginning when we are young, we don't recognize it, the other ones don't want to recognize it, but this is the situation. And you'll perceive it as long as you increase your career, or you're getting older, that the position of the chief, of the upper top management is different with women and men. So the point is that even today, if you look at the position of women in the oncology societies, and we know we are very much aware that the percentage of women in medical oncology is increasing, as well as is increasing in many other specialties, mostly in gynecology. The female members in the board of oncology societies is definitely lower than the number of men members, male members. As well, the presidents of oncology societies are definitely less women than men. These are the data from a survey, which was conducted by ESMO and is referring to 2017. We know that the situation has improved mildly, in some medical oncology societies, mostly in USA, not in Europe, but it's important that we, in some ways, improve our expertise and our capacity to the interaction and to the connection, also with other women to become members of the board. Because the point to become members of the board is strictly related to the activities, to the expertise, to the interaction and passion we put in our work. And this is also something to keep in mind, when we are working to develop our career. Which are the main sources for a burnout? and which are also the main barriers that prevent reaching a gender parity? In some ways, we feel inadequate, that's something that when we were younger or when I was younger, I felt completely inadequate. But in many different situations, that I wasn't good enough, that there was always somebody who was better than me, that I didn't have the competence, that I didn't have the quality without any particular reasons, but because I was used to think in this way. And I realized that I can prepare myself, because I don't see any reasons to feel inferior if I prepare myself, if I study, if I try to interact with other persons and to learn from the others. I can be exactly equal to the other ones. The point is that which are the most difficult task when we are women in oncology? Try to balance the work and the private life. Because, very often we want to have a family, we want to have children. So it's really important to keep a balance on that. Otherwise we'll feel inadequate because we won't be good at work, we won't be good in the family, and everybody will be complaining about us. The other point is that there is some societal pressure, but the point is that we very often have a lack of self-confidence. So you can see the difference between men and women, regarding the lack of female professional self-esteem here, it's definitely greater in women than in men. And also we lack role models, because we didn't have a good mentor. So we were not able to identify or we didn't look for them. And this is the reason why told you, prepare yourself. Prepare yourself with the training abroad or in another place. So that at least you can try and invest on yourself, and try to have a mentor who should be the person who can give you good advice, or where you can build up

your personal growth. And this is the other important point: to set up connections. Because, connections with other female network, because, there are many, many opportunities, there are national and international networks, and there are activities tailored to women needs. They could be professional association, could be medical association, oncologist association, social media. And then you can find that there are many, many other female young colleagues who have the same problems. So you don't feel alone and you feel that if you are together you can improve and you can identify really new ways of satisfaction and improvement. And in ESMO there is this initiative, women for oncology, which is a network of women, professionals in oncology, who want to help women to improve their career and try to decrease this inequity between the gender balance. So there are many initiatives and to join it through social media, through Facebook and so on, you can see which are the activities, but also, which are the feelings of the other young medical oncologists and you can try to set up something together. And whatever is the choice, I think that really the key is the education. And the education should start early. So you can get education because you have a real life experience, and this is what I told you about training, because you participated to international events. So ask your chief to go to a meeting or to have a presentation, to participate to some interesting workshop. Also look for the fellowship opportunity and try to develop your leadership skills, including communication. And to have some specific oncology trainings and above all, try to improve your self-confidence. And I show you some example of how to do it, that's a common problem. If everybody apparently succeeded, why you shouldn't be able to do it? And also education is really important to increase your competence and expertise. And then if you have competence and if you have knowledge and if you have already some real-life experiences, I'm pretty sure you'll be able to choose and decide, which is the career which fits most. Thank you very much.

Dr Vaz-Luis: Thank you Professor Sessa, it was really inspiring and a very honest presentation that I think will serve all our young trainees. We all face the different points of decision challenging around our career. And I think this perspective that you gave, that upfront, try to have this understanding that are different tracks that you should explore and then you should try to learn more about it, and direct you is key. Because otherwise we spend a lot of time in our training, always expecting to be something and not really investing our energy. So if I look back, I wish since the beginning, it would have been important for me to have this perspective. What I want to be? A clinician, a researcher, and what do I have to do upfront to achieve this? And then I think another key thing is the mentor piece. I can tell you, so I'm Portuguese, I did my clinical training in Portuguese and then because I was struggling with this idea that I wanted to be a researcher, I went to the US. And so my research training was done in the US and I had an outstanding mentorship, that completely shaped me as a researcher and as a person also. And completely gave me this idea of structuring what I should focus, and I think that's totally key. But what I wanted to ask you is for me, and you gave a little bit this answer, for me it was almost like a chance. I just landed in the hands of Nancy Lynn and she completely shaped me as the best mentor in the world. But for those that don't have this chance of landing in someone amazing like I had, I know you told us to try to search, but is there any other tips that you can give to the young oncologists, how to search the good mentor?

Dr Sessa: Well, the point is that I had different mentors but I identified them. So there was one person who was really important at the beginning of my activity. Because just by chance, I went to oncology because I was trained as a gynecologist and by chance, I went to gynecologic-oncology. But before, I had two years working in the lab and this changed completely my life. So I think it's really important to have some lab experience and to have it early, because if you don't have it early it's difficult to put in later on, because you are too much involved in the clinics. And this lab activity when I didn't see patients at all, I started seeing patients very late, once I had already almost finished my studies, change completely my perspective. And then I decided I wanted to work with the ovarian cancer, because it's what I did in the lab. So I went to gynecology-oncology I met these particular patients and I still think they are really special patients, patients with ovarian cancer. And then at that point there was a woman who was very famous and was treating ovarian cancer in UK. And I said, I want to meet her because she is so great and she is so special. And I wrote

to her, so the truth is that I felt so embarrassed. And I've seen her talking at the Congress and I liked very much the way she was talking, gesturing and so on. So I wrote a letter saying, "I'd like to come to see you "and to stay in your department." And I paid my trip. And I paid my trip, there was somebody, a friend who was living nearby, so I stayed in the flat and I went there. And the point is that I like her because she was doing something completely new. Something completely new and very courageous, but that was also really scientifically sound. And there was a good connection with the lab and I liked the place where she was working. So I said, she could be a good mentor, but also the place could be a good mentorship place for me. So I decided to invest on that, but I had already a very good chief in my institution and he helped me in finding the money for a small fellowship grant. And I didn't want to go to USA because I didn't like the system, and the way they were working, I prefer to stay in Europe. And I thought that in some ways it was easier, because I wasn't still so bold to go to the States. Also because I studied in Italy and it was already something difficult for me to come to Switzerland, because it was already a different place. And that when I arrived, I realized how much ignorant I was. So I had to set up all my medical oncology knowledge, because I was a gynecologist, so it was already a stress. And then once I was a bit more ready, I decided I wanted to go abroad on a department of medical oncology. So it was really stressful, but then I enjoyed it so much, because I could bring back something and I had something on which I could grow, work and develop because it was an evolving field. And when I was there, I set up contacts with people I liked, and I kept these contacts ongoing. So it was a kind of a mentorship on distance, but I had to put a lot of energy because they were far away. So I had to put energy to keep these years on. And also I started setting up something in my institution, which was also difficult. So I had to fight for that, but at the same time I had to expose myself, so to study, to prepare a speech, to go to other meetings. So I invested a lot of time and work and I was young, so I had to sacrifice something. And this is also the other choice, how much time you need, and which are the decisions in your personal life you feel ready to take. And this is also the other important point, you shouldn't arrive at a certain point when it's too late to take a decision, or when it's too late to change something. So keep the situation under control, each time decide what you want to do. And if you are still in a balanced situation, or if you're pending too much in a situation from which you cannot get back, you know what I mean. At a certain point, you are so used to live with yourself and you feel so well, then it's difficult to compromise in some other way. So always keep an eye on that. Don't become a work alcoholic this is the other important thing, because it's true.

Dr Vaz-Luis: That's very hard.

Dr Sessa: Yeah. It's very hard because it's the most, very ambitious as well.

Dr Vaz-Luis: Yeah.

Dr Sessa: So keep always the others point of view. There is not only yours, there are also the others point of view and needs. But the point is to identify this mentor and then at a certain point, I felt the need to increase my growth in another field. And it was in palliative care, because of my activity in new drug development, it was patient with very advanced stage of disease and I was doing phase one and I felt completely unprepared. So the point is that I did an e-learning in palliative medicine, which brought me in a very difficult situation because I felt completely new and everybody was better than me as a palliativist. And everybody was looking at me as a really cruel person who was doing cruel things with new drugs. But it was good because I realized the other positions and other perspectives. And I identified a good mentor in that as well and again, I wrote a letter. I asked to go there to visit the place. And this lady was so good that I could stay with her for two days in her house. And we went together to the place, was a hospice. And I like very much the way she was interacting with people. So she was never sad, she was not crying all day. She was always very enthusiastic, very practical. And I thought, well, palliative treatment should be a practical approach. You should give a program, you should give hope, you should give aim to the patients and to the young people working with you. And that was good because I heard of her by chance. I read something she wrote and I thought, well, she should be good. And again, I wrote the stupid letter and she said, "Why don't you come?" And then I had

to fight for the money. And I found a grant and the other part, I paid by my myself, but I thought it was too much important. And then this training course really, it was a nightmare. I didn't realize it was so difficult when you're doing e-learning because you have commitment, you have to write papers, you have to prepare projects. And it was that together with my job, so it required extra time. So when you want to start a new activity, or you want to set up a new situation, prepare a plan, and try to define how much time you need, how much resources, because very often we say, "Yeah, okay, that's great. "Let's do it." And later on you realize you put yourself in trouble. So the other suggestion is make a work plan, what you need and how much time, how many resources, personal and financial and time resources. Because you should always try to be balanced. If you are unbalanced, you have the burnout. I had many periods of burnout, perhaps I didn't realize it, but we have periods when we are very much unsatisfied and we feel lousy, and we don't find reasons for what we are doing and that's burnout. We should be able to recognize it and to prevent it. And to prevent there are really the stupid things everybody's doing even though they don't tell it. Take one day out, go walking around, doing nothing, feel lazy. Perhaps there are people who spend a lot of money buying something, or perhaps you want to go to the mountains, which is what I do and have a nice walk and read good books and feel really stupid and lazy. That's the best way to recharge yourself.

Dr Vaz-Luis: Thank you. This is very, very inspiring. It was, we could stay here all day. It was really inspiring I think I can see parts of my life in what you describe. It's really important to try to have a plan, realize that we cannot do everything. But be a dreamer and continue to work in the projects that we believe it can be a difference. One thing that you told me, I think it's very interesting that we invest in our training and we have this amazing mentors, but there is a moment that we have to fight by our own. And that's very exciting to come back and do our own project and that's the goal and that's very exciting.

Dr Sessa: It's because I think that eventually all of us, we are privileged persons. So it's our duty to explore it, the good things we have, but also to give to the young persons, to the young people, our young colleagues, the possibility to grow themselves. If we hadn't had this help when we were young, we couldn't have the pleasure to do what we are doing, because I still like my activities, even though I think I'm tired, and so on. But there are always so many reasons and things to be happy about, that we should be glad, we should thank for all the big things we had.

Dr Vaz-Luis: And I think with this positive note, we will finish the session, which was really a pleasure and thank you, thank you so much for sharing all these experience with us.

Dr Sessa: And thanks to you because I feel exactly as you feel, so it's really good that at least we are two and I think that both of us, we hope that we have been able to give some hints of good inspiration to the young person who'll see and listen to this video. So thank you very much and I really hope to meet you in person.

Dr Vaz-Luis: Me too.

Dr Sessa: Yeah, good. Take care. Bye, ciao.

Dr Vaz-Luis: ciao.