

LCTU NEWSLETTER

Cancer Research UK Liverpool Cancer Trials Unit

ESPAC-3(v2)

Two year ductal patient survival data
submitted for ASCO presentation

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GEMCAP

Publication submitted for review
to important journal.
Read more on page 2





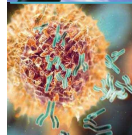
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Trials closed to recruitment

ESPAC-3(v2)

Professor Neoptolemos and the European Study Group for Pancreatic Cancer (ESPAC) have submitted the ESPAC-3(v2) two year ductal patient survival analysis as a 'late breaking abstract' to ASCO 2009. The ESPAC-3(v2) study has been running for 9 years with the aim of providing improved survival for patients with resected pancreatic cancer. ESPAC-3 (v2) compares 5FU/FA vs Gemcitabine to identify if either adjuvant chemotherapy regimen was associated with a significantly better survival. It is the largest adjuvant trial ever conducted for pancreatic ductal adenocarcinoma.

The 2 year follow-up data lock was on the 10th March 2009 and the analysis was carried out by Deborah Stocken at the Birmingham Cancer trials unit. The updated abstract including the survival analysis was submitted to ASCO on the 27th March. The abstract has been provisionally accepted for presentation and we are waiting confirmation after submitting the updated abstract. The ASCO conference is to be held in Orlando Florida for 29th May - 2nd June 2009. Many thanks to all ESPAC-3(v2) research sites for all their help and cooperation during the data collection and data query process prior to the data lock.

The study still has a lot of work still to do and the focus is now to concentrate on collecting patient follow-up and Quality of Life data ready for the 5 year analysis.

There is a Trial Working Group meeting planned for 14th May, in Frankfurt, with ESPAC members attending the ASGBI Conference in Glasgow able to join us via teleconference. The agenda for the meeting will be sent out shortly.

GEMCAP

GEMCAP was a phase III multicentre randomised clinical trial comparing gemcitabine alone or in combination with capecitabine for the treatment of patients with advanced pancreatic cancer. The main objective of the study was to find out if the addition of capecitabine to gemcitabine improved the survival or quality of life of patients with advanced pancreatic cancer with a primary endpoint of one-year survival.

GEMCAP was one of the first LCTU trials in pancreatic cancer. This trial is now closed and the analysis has been carried out. The manuscript has been written and submitted to the New England Journal of Medicine. We are currently awaiting the outcome of this review.

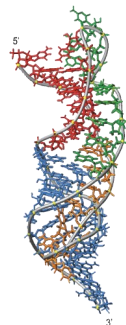


TeloVac Update

We are delighted to announce that we are about to open our 50th site in the TeloVac study and have, so far, recruited 373 subjects into the trial which represents 33% of total required. This is a tremendous achievement and means that the trial is now on target to hit all its key milestones. Interim analysis of the trial is due later in the year and feedback will follow.

Monitors are still visiting sites as most of you will know and we are delighted with the dedication that research staff are applying to the documentation in the study.

The TeloVac team has been enhanced recently by the arrival of two new Data Managers; Elisa Salvi and Tony Coffey have joined the TeloVac team in the last few weeks and will be allocated their own sites within the study soon.

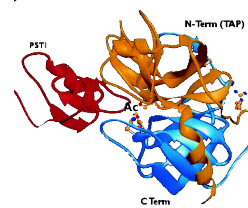


Immunomonitoring has been rolled out to most participating sites within the ECMC network. Invitations are open to any sites not currently involved in the immunomonitoring part of TeloVac to contact the team should they wish to participate.

Once again, thanks to everyone involved in TeloVac for their time and commitment to the study.

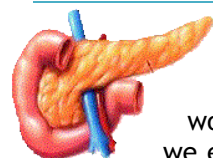
EUROPAC2

EUROPAC2 is a multi-centre, double blind, randomised controlled trial to investigate the efficacy of ANOTX (vers) 1.2 and MGCT (Magnesiocard®) compared to placebo in the treatment of pain in patients with hereditary pancreatitis and idiopathic chronic pancreatitis.



This trial aims to recruit 240 patients aged between 5 -65 years old that have been diagnosed with HP or ICP. We have currently recruited 12 Patients within the UK, taking total recruitment across Europe to 72. The LCTU is currently looking to open more centres within the UK, if your hospital is interested in taking part in the trial please contact the trials unit for more information.

ESPAC-4 Update



ESPAC-4 has opened to recruitment at the Royal Liverpool and Broadgreen University Hospital, Yeovil District Hospital and Clatterbridge Centre for Oncology and the first patient was randomised on the 10th November 2008 and the trial currently has a total of five patients recruited. The Trial Coordinator would like to thank all the research site staff for the hard work that has gone into setting up the study and we expect to open many new centres in the coming months. Currently 25 UK sites have ethical approval and we are waiting on Research Site Agreement and local R&D approval prior to giving the 'Green Light' for recruitment.

ESPAC is an international collaboration and we are working with our international colleagues to open the study across Europe and worldwide. Professor Lind and his colleagues in Sweden organised and attended a successful ESPAC-4 study launch meeting at the Swedish Medical Society, Stockholm, in early February this year and we are planning to open sites there in the next few weeks. We will also be promoting the study across Europe and the rest of the world seeking new Investigators to join the ESPAC collaboration. Congratulations to Professor Markus Büchler who has been awarded a grant from the German Government to conduct the ESPAC- 4 trial in Germany.

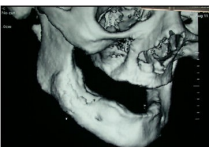
If you would like more information or would like to take part in ESPAC-4 please contact the Senior Trial Coordinator, Charlotte Rawcliffe, on +44 (0) 151 794 8932 or by email c.rawcliffe@liv.ac.uk.

Open and recruiting trials - Phase II

HOPON

HOPON is a two year study looking at hyperbaric oxygen in the prevention of osteoradionecrosis following at risk surgical procedures on irradiated mandibles in comparison with standard management involving antibiotics and mouthwashes.

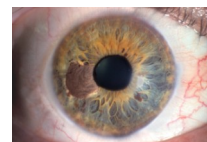
There are now 11 patients recruited out of the target number of 50. HOPON is open to recruitment at University Hospital Aintree, the Royal Liverpool Dental Hospital, Aberdeen Royal Infirmary, Leeds, Yeovil Hospital, Musgrove Park hospital, Derriford Hospital, University Hospital Birmingham. Research Site Agreements are now being developed between the Sponsors and other participating sites which will hopefully open to recruitment shortly including North Manchester General, Manchester Royal Infirmary, Gloucester, St Luke's, Royal Devon and Exeter, Portsmouth and London.



For more information contact the Trial Co-ordinator Matthew Bickerstaff on +44 (0) 151 794 8934 or by email oasis@liv.ac.uk

ITEM

ITEM is a single arm phase II study of Imatinib in good performance status patients with c-Kit positive metastatic Uveal Melanoma. ITEM has been open to recruitment at Clatterbridge Centre for Oncology, Mount Vernon Hospital, Weston Park Hospital and St James's University Hospital.



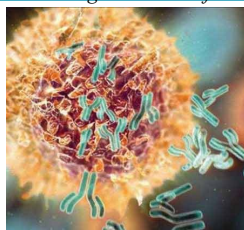
A total of 14 patients are required in the first stage before an interim analysis is carried out which is expected this summer. This will help to determine whether the trial will continue to recruit up to a maximum of 25 patients. A MACRO database and a Trial Management System are in place. For more information contact the Trial Co-ordinator Matthew Bickerstaff +44 (0) 151 794 8934 or by email oasis@liv.ac.uk

Trials in setup/awaiting funding confirmation

PACIFICO

PACIFICO* is a new phase III randomised controlled trial comparing two different immuno-chemotherapy regimens in patients with Follicular Lymphoma (FL) aged 60 years or over (or less than 60 but more intensive chemotherapy considered inappropriate due to comorbidity).

Image shows Rituximab binding to a cell surface



The trial will compare R-FC (rituximab, fludarabine, cyclophosphamide) to the current gold standard treatment R-CVP (rituximab, cyclophosphamide, vincristine, prednisolone)

The trial has been submitted to MREC and MHRA for their review and approval and the CRF's are currently in development. We hope to open the trial to recruitment sometime in May 09.

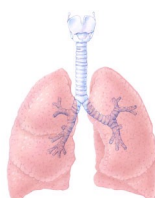
If you require any further information regarding the PACIFICO trial, please contact the trial coordinator Stacey Carruthers on 0151 794 8897 or stacey.carruthers@liv.ac.uk

*Purine-Alkylator Combination In Follicular lymphoma Immuno-Chemotherapy for Older patient: a phase III comparison of first-line R-CVP versus R-FC

UK Lung Screening Trial

The UK Lung Screening Feasibility study has been completed and an application has been submitted to the NIHR (National Institute for Health Research) Health Technology Assessment Programme (HTA) for a Pilot Trial.

The UKLS will be a randomised controlled trial of CT scanning against no intervention. If the trial is funded the pilot trial will recruit 5,600 participants over a 12 month period.



INPIC—Invasive Procedures In Cancer

There are around 1800 new cases of mesothelioma annually in the UK. Between 2006 and 2020 up to 30,000 people will die of the disease in the UK. Palliative care and symptom control is central to the management of patients with mesothelioma as the disease is often associated with difficult pain syndromes and other symptoms that may respond poorly to pharmacological approaches alone. The National Mesothelioma Framework (2007) has suggested that patients should have access to services that offer cordotomy as a palliative intervention to provide relief from challenging pain syndromes.

There is, however, great inequity in the provision of services offering cordotomy; new services are being established, whilst others services have closed. The level of evidence to support the provision of invasive neuro-destructive procedures such as cordotomy is poor. For this small group of patients the procedures may yield significant analgesic benefit, however there is an as yet unquantified associated morbidity.

This study proposes to use consensus methodology to clarify the role of cordotomy in the management of mesothelioma-related pain. This approach has been successfully applied in the past in formulating practice in refractory angina.

The study team will examine whether there is sufficient evidence to support continued provision and commissioning of cordotomy, and aim to provide a benchmark for the availability and use of this procedure in the treatment of pain associated with mesothelioma in the U.K. Following this it is proposed to establish a national registry study for cordotomy in mesothelioma-related pain management in collaboration with Dendrite Clinical Systems.

For more information please contact the Coordinator Gary Jeffers on +44 (0) 151 794 8814 or by email gary.jeffers@liv.ac.uk

Liverpool Experimental Cancer Medicine Centre

The Liverpool ECMC has now been awarded Full Centre Status from Cancer Research UK. It currently has 21 trials open with another 21 in set up. Three trials are in follow-up and 14 trials are now closed altogether. There are also a further 15 trials lined up for possible adoption. To date the Liverpool ECMC has collected (or contributed) over 2500 samples from nearly 900 patients.

Following discussions within the NCRI H&N CSGs about priorities for biomarker studies, a national meeting "New Perspectives in H&N Pre-malignant Lesions" was hosted by the Liverpool ECMC on 27th February 2009, in Liverpool. Delegates (from UK and Europe) totalling 125 from a variety of disciplines presented their latest findings and discussed areas of greatest clinical need. Keynote lectures were warmly received given by Dr Ruud Brakenhoff, Research Director of the Lung & H&N group in VUMC Amsterdam and Dr Jay Boyle from Memorial Sloan Kettering Cancer Centre New York. It is hoped that a further meeting on this theme will be arranged by the Newcastle team and that further themed H&N symposia will be hosted within Liverpool in future years.



For more information please visit the Liverpool ECMC website www.lctu.org.uk/lecmc/

ESPAC-Tplus

ESPAC-TPlus was funded by the Translational Research in Clinical Trials Committee (TRICC) of Cancer Research UK in order to enable high quality translational research to be embedded in the ESPAC trials. ESPAC-TPlus is designed to allow both prospective and retrospective sample collection and analysis.

We now have approval for 16 UK sites and have received samples from Royal Liverpool University Hospital, North Manchester Hospital, Bristol Royal Infirmary, Peterborough District Hospital, Western General Hospital, St James's University Hospital, Ninewells Hospital and Walsgrave Hospital.

We would like to thank Queen Elizabeth Hospital, Birmingham for their co-operation during our recent visit to identify samples.

The table on the right shows breakdown of samples received by country.

If any sites are in need of help to retrieve samples please let us know and we will arrange a time to visit. Please contact Tracy Ball on +44 (0) 151 794 8807 or by email tracyb@liv.ac.uk

Country	Paraffin Embedded	Frozen	Blood
UK	146	64	14
Germany	57	48	
Greece	34		
Italy	99		
Canada	31		
Total	367	112	14

Staff Update

Since our last newsletter we have three new additions to the LCTU team. We welcome Elisa Salvi and Anthony Coffey as the two new TeloVac Data Managers and Gary Jeffers as the new INPIC coordinator/ESPAC-3 Data Manager.

We bid farewell to Chris Smith who is currently the UK Lung Screening coordinator. Chris will be leaving to take up a post as Trial Coordinator at the MCRN. We also say goodbye to Julia West the current acting Operational Director. Julia will be leaving us to take up a position as Deputy Director of the R&D department within the Royal Liverpool University Hospital. We wish them both the best of luck.

*Elisa Salvi (TeloVac
Data Manager)*



*Anthony Coffey (TeloVac
Data Manager)*



*Gary Jeffers
(INPIC/ESPAC-3)*

CR-UK Cancer Centre awarded to Liverpool



A Cancer Research UK Centre (CRUK) was recently launched in Liverpool enabling scientists to lead national and international progress in the study of cancer of the pancreas, head and neck, and blood, as well as pioneer the latest techniques in surgery, radiotherapy and the treatment of children's cancers.

The Centre will become part of a chain of research centres to be opened around the country later this year and will bring together the University of Liverpool, the Royal Liverpool University Hospital, Clatterbridge Centre for Oncology NHS Foundation Trust, Liverpool City Council and Cheshire Cancer Task Force. Researchers at the Centre aim to develop treatments tailored to individual cancer patients based on understanding the biology of the disease and how it varies among different people.

Professor John Neoptolemos, Head of the University's School of Cancer Studies and surgeon at the Royal Liverpool University Hospital, will chair the Centre's board. He said: "Cancer Research UK has brought together eminent researchers and clinicians to collaborate to improve the lives, and extend the survival, of Merseyside's cancer patients. "The North West has poor survival rates in a number of cancers. By launching this project the charity has attracted an impressive field of expertise to benefit the people of Liverpool. One of CRUK's goals is to invest more money in treating patients who have what we call the 'neglected' cancers, where survival is poor, for example in pancreatic cancer."

Cancer Research UK will contribute £3 million a year to develop the Centre, which will also focus on furthering understanding of how cancers start and behave, as well as how to develop better treatments with fewer side effects.

Tony Bell, Chief Executive of the Royal Liverpool University Hospital, said: "This Centre puts Liverpool and its strength in research and pioneering healthcare firmly on the map. As a regional cancer centre, we have some of the country's best medical expertise at our fingertips. This centre will ensure that they - along with the people of Liverpool - are at the cutting edge of research and the development of new tests and treatments for cancer."

Darren Hurrell, Chief Executive of Clatterbridge Centre for Oncology NHS Foundation Trust, said: "Clatterbridge Centre for Oncology is committed to the development of world-class cancer services and we believe working in partnership will enable us to provide the best possible results for cancer patients."

Harpal Kumar, Chief Executive of Cancer Research UK, said: "Funding these centres of excellence is one of the charity's priorities and will enable us to work towards the goals we have set to improve the treatment and survival of cancer patients. But we continue to welcome the generous donations we receive from the public to ensure we can continue to build on what we have started today."

Key Aims

1. Understanding the biological mechanisms of cancer and individual susceptibility to specific cancers.
2. Identify biological signatures from/dependencies on key gene families for normal and cancer cells.
3. Using these signatures/dependencies to specify targets for the development of novel chemical agents.
4. Target validation and compound screening (in conjunction with CRT).
5. Utilise our expertise to test and further develop pilot compounds.
6. Closing the loop from molecular targets and novel compounds to patients - clinical trials.

Areas of Expertise

The Centre has a spectrum of research expertise that spans from clinical activity at one end to fundamental cancer biology at the other. The central strategy for the next 5-10 years will be to build on existing strengths producing an integrated translational research programme in which basic research identifies new drug targets, which can then be tested in clinical trials. Biomarker and drug resistance studies done as part of these trials can then indicate new areas for both clinical and basic research. The Centre will integrate basic research in cell biology, drug metabolism and chemistry with clinical research into pancreatic cancers, chronic leukaemias, head and neck cancers and eye cancers. Our basic science programme is focussed on the systematic understanding of gene families required for cell growth control and cell division which can be broken down into four main areas:

For more information please visit the Liverpool Cancer Centre website at http://www.liv.ac.uk/cancerstudies/CRUK_centre.htm



LCTU STAFF AND CONTACT INFORMATION

Director - Professor John Neoptolemos (j.p.neoptolemos@liverpool.ac.uk)
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Acting Operational Director - Julia West (Julia.west@liverpool.ac.uk)
Lecturer in medical statistics - Susanna Dodd (s.r.dodd@liverpool.ac.uk)

EUROPAC2 Coordinator—TBC

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EUROPAC Database Manager - Matthew Harcus (mjharcus@liverpool.ac.uk)

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PACIFICO Data Manager - James Dodd (j.p.dodd@liverpool.ac.uk)

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Lung Cancer Screening Coordinator - Chris Smith (c.smith6@liverpool.ac.uk)

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Clinical Research Officer - Seema Chauhan (seema.chauhan@liverpool.ac.uk)

Research Practitioner - Catherine Whittemore (c.whittemore@liv.ac.uk)

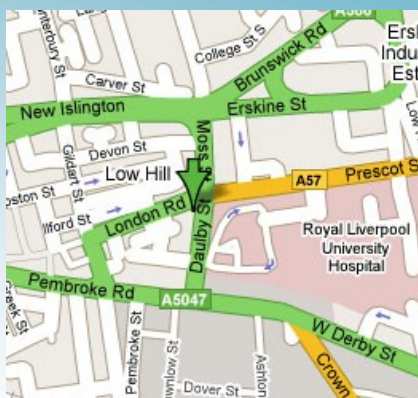
LCTU Website & Email

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New Trials Update

The LCTU has now been awarded funding for a new Uveal Melanoma trial called SUAVE. Please see the Summer edition of the newsletter for more information and job posts.

Patient Liaison Representative

If you are interested in becoming a patient liaison representative for patients in the TeloVac trial or other studies run through the LCTU; or if you are aware of anyone that would be interested please email lctu@liverpool.ac.uk

A patient liaison representative will be an independent advocate for patients.

Consumer Involvement

We are looking for people who can get involved with our cancer research and the way that our trials are run. If you have suffered from cancer or know of someone that has, and you would like to get involved please contact us using the details below. We would be delighted to hear from you.

Liverpool Cancer Trials Unit Vision

- ◆ The LCTU works closely with Cancer Research UK in the Clinical Research of new and existing products for the treatment of cancer, easing suffering and improving the quality of life of these patients.
- ◆ The LCTU is recognised for having a positive impact on peoples' lives, meeting the needs and surpassing external expectations with the services we offer.
- ◆ The LCTU offers a dynamic workplace in which people can realise their professional ambitions while being involved in a dedicated team to Clinical Research.



LCTU

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CANCER RESEARCH UK

