Confederation of Cancer Biobanks

# CCB Update

Issue 4, July 2011

## Inside this issue...



www.ncri.org.uk/ccb

## Note from the Editor

*Caroline Magee, Communications Lead, NCRI (CCB Secretariat)*

**Welcome to this issue of CCB Update – the newsletter from the National Cancer Research Institute's Confederation of Cancer Biobanks (CCB).**

**Methods for increasing the provision of biosamples that are of appropriate quality for use by researchers are gaining greater momentum both here in the UK and internationally. We have reports of two initiatives that are taking place to help address this.**

We also have several updates on our members activities with articles on the centralisation of the CCLG Tissue Bank as well as introductions to two new members and insight into the work of the Leeds GIFT Research Tissue Bank.

To provide feedback on the newsletter, please contact ccb@ncri.org.uk

## A public-private consortium: working to increase the effectiveness of tissue sample provision in the UK.

STRATUM – **S**trategic **T**issue **R**epository **A**lliance **T**hrough **U**nified **M**ethods – is one of the projects to be awarded a grant by the Technology Strategy Board (www.innovateuk.org) through the Stratified Medicines Competition. The announcement in May listed seven research projects to be funded through this initiative which is planning an investment of over £50million over five years. The purpose is to support innovative research and development in areas such as tumour profiling to improve cancer care, developing biomarkers for more effective drugs and new business models. STRATUM is a collaborative project between industry and academia developed by a consortium of 6 partners, with AstraZeneca as the lead partner. Other members of the consortium are GlaxoSmithKline, Lab21 and the universities of Manchester, Nottingham and Leicester.

The aim of STRATUM is to deliver methods that will increase the effectiveness of tissue sample provision and ensure that UK pharma, biotech and diagnostic sectors have the ability to access an adequate supply of well-characterised tissue samples to increase the probability of drug development success. The project will assess public opinion on biobanking and the use of samples; and develop policies for the governance of biobank resources enabling visibility and access. It will establish methods covering consent; sample characterisation; quality control of samples on acquisition, processing, transport and storage; and define a scenario-based cost model for access and sample provision. It is hoped that these will create the foundations for a UK biobanking network and a unified business model for biobanking. To achieve all this in the 18 month timeframe the scope of the work will be limited to generic samples generic for all diseases and those of the respiratory system, however the outcomes should provide a model for other tissues and body systems.

The consortium gained support to its proposal from a wide variety of stakeholders including the Royal College of Pathologists, the Medical Research Council and a number of patient organisations and industry trade associations.

"The consortium members are delighted to have been awarded the grant," commented Julie Corfield of AstraZeneca. 'Planning is ongoing with the aim to start the project in September.'

## Centralisation of the Children's Cancer and Leukaemia Group (CCLG) Tissue Bank

**Dr Gita Mistry, Tissue Bank Manager, based at the CCLG in University of Leicester, tells us of changes taking place with the CCLG Tissue Bank.**

The CCLG Tissue Bank has been operating as a 'multi-centre' virtual tissue bank with banking centres across the UK and Ireland, and centrally coordinated and managed at the CCLG Coordinating Centre, Leicester. It has been dedicated to facilitating research into childhood cancers. For some time there has been a need for a more efficient and streamlined system for collecting samples from contributing clinical centres and for specimen despatch from the Tissue Bank to researchers. A central tissue bank was proposed and supported by Cancer Research UK. In 2010, following the review of several prospective biobanks to host the Tissue Bank, the Newcastle Biomedicine Biobank (NBB) at Newcastle University was chosen as the location for the central CCLG Tissue Bank.

2011 is set to be an exciting and challenging year with the transfer of retrospectively banked tissues and the implementation of new processes for continuously transferring tissues to the Central Bank. There are two teams to facilitate the move from a 'virtual' to a 'central' Bank, one located at Newcastle that will be responsible for tissue storage and despatch and the other at Leicester that will retain the management and coordination of the tissue bank and CCLG Biological Studies. There is a strong emphasis from all stakeholders involved for the move to a central Bank to be a success, in order to improve banking and to increase the use of paediatric solid tumours in biological research. Image: CCLG Central Bank image.jpg [image may need some work]

The CCLG Central Tissue Bank will be officially launched in July at a one day Educational Meeting, 'Focus on Central Banking', for personnel in all the banking centres that participate in registering tissue for the CCLG Tissue Bank.

For further information about the CCLG Central Tissue Bank contact:

Zoe Davison zoe.davison@ncl.ac.uk

Gita Mistry ym60@le.ac.uk

## Researchers - Find samples using the NCRI Cancer Biosample Directory

NCRI ONCOLOGY INFORMATION EXCHANGE

Samples from over **100,000** patients covering around **100 tumour types** are now included in the NCRI online Cancer Biosample Directory – these are arranged in collections associated with clinical trials and biobank collections.

To view the directory visit http://www.ncri-onix.org.uk/portal/#S103a

For more information and details of how to get your collection included visit http://www.ncri.org.uk/default.asp?s=1&p=8&ss=12

# Getting to know you: Leeds GIFT Research Tissue Bank

**Aidan Hindley is the GIFT Research Tissue Bank Coordinator. His role is quite varied and covers many aspects of the bank from speaking to potential donors and their families, performing cadaveric tissue retrievals including donor reconstruction to dealing with tissue requests from researchers.**

The GIFT bank in its current form opened for business as they say in 2009 and is based in the University of Leeds and the Leeds Teaching Hospitals Trust. Their aim is to provide bespoke collections of material for ethically approved research or education and also assist in helping people with their wish to donate tissues after their death for research and education

**What's the most enjoyable/satisfying part of your job?**

Helping families honour the wishes of their relatives in donating to research and saying YES to researchers requesting tissues that previously they have not been able to obtain.

**What's been the toughest challenge your organisation has had to overcome?**

Satisfying the legal and ethical issues encountered when working in this field and obtaining the necessary funding to support the initial start up of the bank.

**What's coming up for your biobank in the next 12months?**

Increasing publicity and promoting cadaveric tissue donation for research in the health care community, patient groups and allied organisations. We are also working to raise awareness of what we can offer to the wider research community.

**What are you doing to engage with patients/donors and the public?**

We have a website that is constantly evolving to reflect feedback we receive from potential donors, relatives, health care professionals and others. We also participate in teaching and educational sessions for a wide variety of groups from health care related and allied organisations to patient groups. We have an e mail address and telephone number as well as being contactable by mobile phone and are always happy to give advice, information or any help that we can to anybody who contacts us.

**What's the best feedback you've had from a member of the public regarding tissue banking?**

"Thank goodness that we have been able to make her last wish come true to help try and find a cure for cancer so others won't have to go through what she and us went through, she would be so happy."

**What's the most useful thing you've learnt from your tissue banking colleagues in the CCB network?**

That you are not alone, there is always someone who has or is going through the same problems.

**What would your motto be?**

Live life to the full as you don't know how long you have got and treat others as you would expect to be treated (it's the Nurse in me).

**You wouldn't know it but I am really good at…**

Restoring vehicles, two and four wheeled. (Those that know me would probably not be that surprised!)

**Tell us a joke…**

Notice outside a Spirtualist church:

Please ring… knocking confuses!

**To provide feedback on this newsletter or to contribute articles please email us at ccb@ncri.org.uk**

## The Biobank Certification Programme in Canada

**Anne Carter, Biobanking Portfolio Lead at the NCRI provides details of how the Canadians are approaching the need for greater harmonisation and consistency with best practice standards in biobanking.**

Earlier this year I was invited to a workshop by the Canadian Tumour Repository Network (CTRNet) to discuss the need for biobank certification and education. CTRNet is a translational cancer research resource, funded by the Canadian Institutes of Health Research. It is a consortium of the leading tumour biobanks and programmes in Canada, and one of its aims is to improve standardisation and quality in biobanking.

CTRNet has developed plans for a Biobank Certification Programme (BCP), with a strong educational component, and the workshop presented the scheme and sought stakeholder feedback. Attendees included biobanks, Research Ethics Boards and researchers.

The biobank certification scheme was developed because of:

- gaps in the oversight for Canadian biobanks – especially the non-ethical aspects of biobanking,
- uneven standards for Canadian biobanks so that biospecimens from different biobanks are not comparable
- limited resources for education around how to biobank in Canada.

Replace "Canadian" and "Canada" with "British" and "United Kingdom" – the same issues apply here!

CTRNet's proposed BCP aims to address these issues. It has three components:

- guided self-assessment of consistency with best practice standards,
- education on best practice standards in biobanking,
- external/peer verification that the biobank has undertaken to adapt to and/or comply with the standards.

Broad support for the BCP was evident throughout the meeting and gives confidence that take-up of the scheme will be high even though participation is voluntary. The next steps, planned for 2011-2012, are the further development of the educational modules and official launch of the scheme. It is anticipated that the registration process will be available in summer 2011, with the pilot certification process completed by summer 2012.

Further details can be found on the CTRNet website www.ctrnet.ca

CANADIAN TUMOUR REPOSITORY NETWORK
RÉSEAU CANADIEN DE BANQUE DE TUMEURS

There is an increasing interest in harmonisation, certification and accreditation schemes for biobanks. Internationally, schemes to give some form of "quality mark" to biobanks are proliferating; I have written previously on this subject . The CCB has identified harmonisation, certification and accreditation as areas of benefit to the Confederation's members.

Work in these areas is progressing with full involvement of the CCB members. This workstream complements the STRATUM project described elsewhere in this newsletter and the aim is for us to work together to coordinate activities. This is an exciting time for biobanks in the UK -further developments will be reported in later editions of the CCB Newsletter – watch this space!

## New Members

**CCB is pleased to welcome two new members to the Confederation.**

### Guy's & St Thomas' Research Tissue and Data Bank

Guy's and St Thomas' NHS
NHS Foundation Trust

The Guy's & St Thomas' Breast Tissue & Data Bank (BTDB) was designed originally to hold tissue and data from breast cancer patients and has an archive of material from patients diagnosed at Guy's & St Thomas' NHS Trust since 1974. The tissue collection consists of formalin-fixed paraffin embedded (FFPE) primary tumours (7,000) with associated positive axillary nodes (3,000), ductal carcinoma in situ (500) and various benign lesions (14,000). More than 2,000 of the primary tumours also have matched frozen tissue and a further 800 have extracted tumour and peripheral blood DNA. There is an ongoing programme of tissue microarray (TMA) construction, with more than 2,000 FFPE invasive tumours already incorporated into consecutive series TMAs.

Since 1976 there has been a standardised approach to handling breast specimens for banking. All are examined fresh and sliced prior to fixation, to ensure the process is rapid and thorough. Data (demographic, pathological, clinical and follow-up) have been collected prospectively and added to dedicated breast research databases, which facilitate cohort selection, epidemiological studies and translational research.

The BTDB resource has been utilised for many national and international studies leading to more than 275 peer-reviewed publications. Kings Health Partners (Guy's & St Thomas' NHS Trust, Kings College Hospital and King's College London) have identified expansion of biobanking as a key enabler for R&D. The BTDB model has already been adapted to facilitate banking of thoracic, and head and neck cancers, with urological and upper gastrointestinal biobanking due to start later in 2011.

KING'S College LONDON

The Guy's & St Thomas' Research Tissue and Data Bank welcomes applications to use the resources.

For more information contact Dr Cheryl Gillett, KCL Head of Tissue Banking, **cheryl.gillett@kcl.ac.uk**

### UK CLL Trials Biobank

The UK Chronic Lymphocytic Leukaemia (CLL) Trials Biobank is supported equally by Leukaemia Lymphoma Research and Cancer Research UK. The aim of the Biobank is to collect material from all consenting patients entering NCRI trials of CLL therapy.

The sample collection is undertaken and conforms to ICH-GCP and also GCP for Laboratories (guidelines issued by the MHRA). All kits issued for sample collection have the tubes barcoded and are logged on a bespoke Laboratory Information Management System (LIMS). The LIMS also records when kits are returned, all aspects of processing, freezer locations and chain of custody.

The sample collection is for the use of researchers within the UK (predominantly) for biomarker discovery/validation projects related to the parent trials. Researchers wishing to access the Biobank are required to complete a simple proforma which is reviewed by the NCRI CLL Subgroup. Biobank governance is formally reviewed by a Governance Committee with an independent chair and broad stakeholder representation including the NCRI CLL subgroup, The UK CLL Forum, the CLL Support Association, Cancer Research UK, Leukaemia and Lymphoma Research and Cancer Research Technology.

Director of the Biobank, Professor Andy Pettitt said "The UK CLL Trials Biobank is of pivotal importance to the NCRI CLL trials portfolio as it allows the collection and storage of clinical samples to the highest standards across multiple trials. In doing so, the Biobank provides the UK with an unrivalled resource for high-quality biomarker research which will ultimately lead to the application of stratified medicine to CLL therapy."

For more information contact **ukctbb@liv.ac.uk**

Upcoming Event

# The 2011 NCRI Cancer Conference

## BT Convention Centre, Liverpool, UK
## 6 - 9 November 2011

cancer conference
ncri
national cancer research institute

## 2011 NCRI Cancer Conference

## Registration now open

The NCRI Cancer Conference is the major forum in the UK for showcasing the **best British and international cancer research.**

The conference brings together the **leading experts across all disciplines** with a compelling mix of **high-quality plenary speakers, symposia, parallel sessions, focussed satellite meetings and workshops.**

### Plenary speakers

**Michael Hall** (Switzerland)
**Michael Stratton** (UK)
**Hans Clevers** (The Netherlands)
**Maria Blasco** (Spain)
**Harald zur Hausen** (Germany)
**Jeffrey Settleman** (USA)
**Murray Brennan** (USA)
**Mike Richards** (UK)
**Eva Grunfeld** (Canada)
**John Potter** (USA)

### Also featuring symposia on

**Cancer screening and prevention**
Hosted by Robert Steele

**Epithelial mesenchymal transition**
Hosted by Nicholas Hastie

**Transformational impact of symptom control for cancer patients**
Hosted by Peter Selby and Julia Brown

**Predictive models of human cancer**
Hosted by David Tuveson

**Metabolism and cancer**
Hosted by Eyal Gottlieb

**The diagnostic and therapeutic potential of the tumour microenvironment**
Hosted by Thorsten Hagemann

**Epigenetics and cancer**
Hosted by Peter Adams

**Stratified medicine**
Hosted by Alan Ashworth

### Important dates for the 2011 NCRI Cancer Conference

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| Late breaking abstract submission opens: | **Monday 11 July** | Late breaking submission closes: | **Wednesday 31 August** |
| Earlybird registration closes: | **Monday 1 August** | Online registration closes: | **Friday 30 September** |

NCRI Cancer Conference commences: **Sunday 6 November**

NCRI Conference Secretariat, Angel Building, 407 St John Street, London EC1V 4AD, UK
www.ncri.org.uk/ncriconference