

National Cancer Research Institute

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NCRI announces new National Cancer Tissue Resource

The creation of a national system to collect and analyse cancerous tissue through a virtual UK "tumour bank" will provide a vital resource to help researchers find cancer treatments and cures more easily, scientists say today. *(3 April 2003)*

This initiative is being taken by the National Cancer Research Institute (NCRI) – the co-ordinating body between the Government, the Medical Research Council, Cancer Research UK and other cancer charities.

The proposed strategy for a managed distributed network, to be known as the National Cancer Tissue Resource, has been designed to provide the infrastructure, co-ordination and ethical framework required to meet both current and future cancer research needs.

The initial blueprint for the tumour bank has been drawn up by the National Translational Cancer Research Network (NTRAC) – a network of 10 comprehensive cancer centres designed to translate laboratory research more quickly to the bedside by integrating and sharing expertise and resources.

A number of hospitals and research centres currently run their own tissue collection banks, but there is no national infrastructure for standardisation of tumour sample and data collection and storage across the country.

Dr Liam O'Toole, Director of the NCRI, explained that with recent developments in medicine, such as the Human Genome Project which is mapping all the genes in the body, many new targets against cancer were being found, and new diagnostic tests and potential treatments invented, but these needed to be tried against a variety of real human cancers.

"Advances in genomics and proteomics give us a real opportunity to make progress in cancer research. If we don't do something now, lack of tissue samples could severely slow down the rate of progress. Now is the right time to change gear and really begin having an impact.

"Up until now we have had a fragmented approach to collecting and using tumour samples for research. This initiative from the NCRI partnership now gives us an opportunity to do things properly on a much bigger scale for the benefit of cancer patients."

Key areas of study requiring large scale sample collection include:

- Prediction of outcome and responses to therapy;
- Identifying inherited markers of prognosis;
- Identifying inherited markers of toxicity;
- Genetic susceptibility to cancer.

Funding for the first phase of the tumour bank has been agreed for five years in the first instance and has come from the Department of Health (£500,000 per year), Cancer Research UK (£250,000 per year) and the Medical Research Council (£250,000 per year).

The Welsh Assembly Government has also provided funding for a Welsh Tumour Bank that will be developed in partnership with the National Cancer Tissue Resource.

The long-term aim is to establish a network of tissue acquisition centres linked to a range of processing centres that will extract DNA, RNA and related bioproducts. Tissue microarrays will be produced for samples associated with key clinical trials.

The networks will be linked and managed through a co-ordinating centre that will work with the research community to develop standard protocols for collection and storage of tumour samples.

A central information system will track samples through the system and provide a bioinformatics hub to link histopathological data with clinical/outcome data and research results.

The NCRI partners recognise that there needs to be a coherent and ethical national framework to oversee the running of tumour sample collections, and the Department of Health and patient representatives will be involved in the oversight of the National Cancer Tissue Resource.

Mr Derek Stewart, patient representative on the NCRI Board, who has been treated for throat cancer with radiotherapy said: "As a cancer patient myself I was glad to have my tumour destroyed. I would have been pleased if my tumour could have been of use to help others.

"This NCRI initiative will ensure that we develop an efficient and ethical framework that makes the collection of tumour samples routine rather than an exception. All the cancer researchers I have spoken to have emphasised the importance of biological samples in the future of cancer research."

Professor Mike Richards, National Cancer Director said: "The establishment of the National Cancer Tissue Resource is a major step forward for cancer research in the UK. This initiative has been made possible because of the effective partnership between government and the cancer research charities which has developed within the National Cancer Research Institute."

Sir Paul Nurse, Cancer Research UK's Nobel Prize winner said: "This initiative is key to restoring public confidence in the research community and rebuilding bridges between doctors and their patients. It sets out clear boundaries for the collection of tumour samples which are essential for us to better understand cancer and help us improve treatments for people with the disease."

Sir George Radda, Chief Executive of the Medical Research Council and Chair of the NCRI Board said: "The NCRI has given us a forum for tackling major issues underpinning cancer research. Setting up this resource is an important step forward and demonstrates the power of working in partnership."

In drawing up the plan, NTRAC carried out a major consultation exercise on behalf of the NCRI and studied different models of tumour banks both nationally and internationally.

Professor David Kerr, Director of NTRAC said: “This is a very important development for cancer research in this country. A lot of hard work has gone into getting us this far and NTRAC staff look forward to working with the cancer community to make the NCRI National Cancer Tissue Resource available to front line researchers.”

The NCRI recognises that strategy development work, implementation and operation of the National Cancer Tissue Resource will require a dedicated team and so it has agreed that a senior Chief Operating Officer should be appointed, reporting to David Kerr, to finalise the details of the first phase.

Cancer Research UK will manage this process on behalf of the other NCRI funders and will also be responsible for establishing systems to oversee access to the resource once it is established.

ENDS

Notes to Editors

The National Cancer Tissue Resource will be a separate project from the Biobank UK collection (previously known as the UK Population Biomedical Collection) being set up by the Medical Research Council and the Wellcome Trust.

The Biobank aims to help researchers looking at the genetic and environmental factors that cause common conditions such as cancer and heart disease. It is hoped up to 500,000 volunteers could be involved, contributing DNA samples, lifestyle details and medical information.

The National Cancer Research Institute (NCRI) was set up in April 2001. It is a partnership between Government, the voluntary sector and the private sector, with the purpose of streamlining and accelerating the advancement of cancer research in the UK.

A key role of the NCRI is to provide a continually updated database of all the cancer research being undertaken in the UK. A wider aim is to draw up a new, more focused, cancer research agenda, encouraging work in neglected areas but also acting as a general resource and authoritative voice for cancer research. The NCRI aims to do this by developing an overall strategy for cancer research in the UK and co-ordinating activities between member organisations.

The NCRI consists of the main funding bodies for cancer research in the UK:

- the main Government cancer research funders: the Medical Research Council, and the Health Departments of England, Scotland, Wales, Northern Ireland, and the Biotechnology and Biological Sciences Research Council.
- the main cancer research charities: Cancer Research UK, Ludwig Institute; Marie Curie Institute; Tenovus; Breakthrough Breast Cancer; Association for International Cancer Research; Yorkshire Cancer Research, and Macmillan Cancer Relief.
- the pharmaceutical industry involved in cancer research.

The National Translational Cancer Research Network (NTRAC) promotes the translation of advances in basic science into promising new treatments for cancer through a network of centres.

NTRAC leads the NHS's contribution to early studies, by providing NHS infrastructure support for Phase I and early Phase II trials. It is directed by Professor David Kerr, of Oxford University.

Full NTRAC Network Centre status and funding has been awarded to ten centres of scientific and clinical excellence: Birmingham; Cambridge; Imperial College London; Leeds / Bradford; Manchester; Oxford; Newcastle; Royal Marsden; Southampton; and University College London.

Each centre will receive around £1m funding over 5 years to help build the research infrastructure and workforce capability needed to help fast-track research for cancer patients.

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**General information about the NCRI is available at the Institute's website:
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