

HAEMATOLOGY ONCOLOGY RESEARCH TEAM

MARCH 10 ISSUE 3

WELCOME!

Welcome to the third edition of the Haematology Oncology research team newsletter! In this edition we would like to announce that the new look newsletter will now include a welcome collaboration with the lymphoma team to include information on lymphoma clinical trials as well as continuing to update you on the latest haematology trial news.

INTRODUCING—THE LYMPHOMA TEAM

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The Christie Lymphoma Team is a combined clinical, medical and academic oncology unit that treats the majority of lymphoma subtypes. They have an emphasis on enrolling patients into clinical trials, being the top recruiter to NCRN badged lymphoma studies in the UK for the last two years (2008/9). They have close collaborations with the Christie Haematology Unit, the CRUK Paterson Institute and the Wolfson Molecular Imaging Centre.

Professor John Radford

John Radford is widely known and respected in both the national and international lymphoma community both as an investigator and opinion leader. He has over 100 peer reviewed publications to his name and is lead investigator on numerous clinical trials.

Dr. Kim Linton

Kim Linton was appointed as a Senior Lecturer and Honourary Consultant in 2009. Her main interest is in translational research, which aims to bring laboratory developments to the clinic for maximal patient benefit. Her current projects focus on the molecular pathology of lymphoma utilizing gene expression profiling technology

Professor Tim Illidge

Tim Illidge is a CRUK Professor of Targeted Oncology. His interests are in anti-CD20 monoclonal antibodies, radioimmunotherapy and antibody-drug conjugates. He is lead investigator on many of the studies involving these approaches.

Dr. Richard Cowan

Richard Cowan leads the Cutaneous Lymphoma service at The Christie, as well as coordinating medical education in the Trust.

Dr. Maggie Harris

Maggie Harris covers both lymphomas and lung cancers, with an emphasis on radiotherapy.

Dr. Ed Smith

Ed Smith treats lymphoma in the Teenage and Young Adult population, in liaison with the Christie Young Oncology Unit. He is an investigator with the Europe-wide EURONET pediatric Hodgkin Lymphoma study.

Clinical Research Fellow

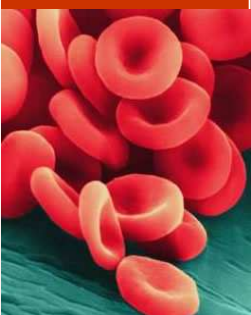
The team employs a full time research fellow (Adam Gibb) to facilitate trial administration.

Research Nurses

Three research nurses are employed within the team. They handle a variety of research activities including investigational agent administration, patient safety and liaison.

Data Management

A growing team of data managers and clinical trial administrators enable trial setup and administration.



STUDIES...OPEN

AML / MDS

- **AML16:** NCRN study for older AML/high risk MDS.
- **AML17:** NCRN study for adults with AML/high risk MDS
- **AML Len 5 :** Lenalidomide as monotherapy & in combination with standard chemotherapy for AML/high risk MDS with chromosome 5 abnormalities.
- **Romiplostim:** A randomized study of Romiplostim for thrombocytopenia in low or INT-1 Risk MDS.
- **MDS Registry Study:** European registry for newly diagnosed MDS with low or INT-1 Risk.
- **AZD1152 C14 Mass Balance:** Phase I study assessing metabolism, excretion & PK of AZD1152 and AZD1152 hQPA following IV administration of [¹⁴C]-AZD1152 in AML.

MYELOMA

- **Myeloma X:** NCRN study to determine the role of a 2nd autologous transplant following prior high-dose chemotherapy and autologous transplant.
- **Velcade:** Randomized study of SC and IV VEL-CADE in previously treated myeloma.
- **Vantage:** Open-label study of Vorinostat with Bortezomib in relapsed/refractory myeloma.
- **Myeloma IX:** Myelomatosis therapy trial for patients of all age groups. Relapsed sub protocol.
- **KW2478-INT-001:** Dose escalation phase 2/3 study of KW-2478 with Bortezomib in with relapsed/refractory myeloma.

ALL

- **UKALL2003:** UK national randomised trial for children and young adults with ALL.

TRANSPLANT

- **Ricaza:** Adjunctive azacitidine in patients undergoing RIC allogeneic transplantation for AML or MDS.

CML

- **Spirit 2:** Randomised comparison of imatinib and dasatinib in newly-diagnosed chronic phase CML.
- **CMML201:** A phase II study of azacitidine in CML.

CLL

- **The Continuum Trial:** Lenalidomide as maintenance therapy for B-cell CLL following second-line therapy.
- **Admire:** NCRN comparative study of FCR vs FCR plus mitoxantrone in previously untreated CLL.
- **Mabel:** A Phase IIIb study of Rituximab with bendamustine or Chlorambucil.
- **CLL009:** Safety and efficacy of Lenalidomide dose regimens in relapsed/refractory B-Cell CLL.

HODGKIN LYMPHOMA

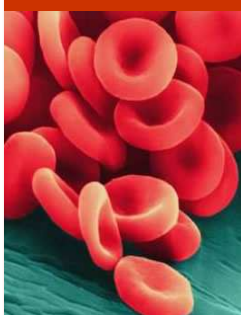
- **Escalated ABVD:** Phase 1 dose escalation study to find the MTD of doxorubicin in ABVD.
- **RAPID:** Does PET negativity allow the omission of radiotherapy in early stage HL?
- **PAIReD:** Reduced intensity transplantation using the BEAM-Alemtuzumab protocol for primary refractory/relapsed refractory Hodgkin's disease.
- **ReACH:** Reduced intensity sibling allogeneic transplantation for relapsed, chemosensitive, PET positive Hodgkin Lymphoma.

MANTLE CELL LYMPHOMA

- **MCP3:** Randomised phase 3 comparing FC Vs. FC-Rituximab 1st line.
- **Lenalidomide studies:** for relapsed disease.
- **CD19:** Phase I study of adoptive transfer of autologous T Cells with pre-conditioning chemotherapy and IV IL2 in CD19 positive malignancy.

T-CELL LYMPHOMA

- **T-cell project:** Database registration for all T-cell NHL.
- **SGN 035 ALCL:** Phase 2 study of a novel antibody-drug conjugate in relapse. Targets CD30.



STUDIES...OPEN

FOLLICULAR LYMPHOMA

- **FIZZ:** Fractionated radioimmunotherapy (Zevalin) as 1st line treatment.
- **FORT:** Randomisation of high Vs. low dose radiotherapy for any radiotherapy indication in FL.
- **GAUDI:** Phase 2 study of a 3rd generation anti-CD20 monoclonal in conjunction with chemo, for relapsed FL.
- **SCHRIFT:** Phase 2 study of abbreviated R-Chemo followed by Zevalin in relapsed FL.
- **CD19 :** Phase I study of adoptive transfer of autologous T Cells with pre-conditioning chemotherapy and IV IL2 in CD19 positive malignancy.

DLBCL

- **14 Vs 21 PET sub study:** prognostic value of early PET after 2 cycles of R-CHOP.
- **R-CHOP-Z:** Integrating Zevalin radioimmunotherapy into 1st line R-CHOP treatment.
- **R-GCVP:** Substitutes gemcitabine for doxorubicin in those unfit for anthracyclines.
- **ORRCHARD:** Rituximab-DHAP Vs. Ofatumumab-DHAP in relapsed disease.
- **Inotuzumab Ozogamicin:** Phase 2 study of a novel antibody-drug conjugate in relapsed disease. Targets CD22.
- **CD19:** Phase I study of adoptive transfer of autologous T Cells with pre-conditioning chemotherapy and IV IL2 in CD19 positive malignancy.

STUDIES IN PLANNING

- **Myeloma XI:** Randomised comparisons of Thalidomide, Lenalidomide and Bortezomib combinations, and maintenance Lenalidomide.
- **Respect:** Use of Lenalidomide in early stage CLL with poor prognostic factors.
- **UKALL 14:** Newly diagnosed adults with ALL (≥ 25 years to ≤ 65 years)
- **CMV impact:** Immunoprophylactic Adoptive Cellular Therapy Study
- **MDS 005:** Lenalidomide versus placebo in subjects with transfusion-dependent anaemia due to IPSS Low or Intermediate-1 risk MDS without deletion 5q[31]
- **YM155:** Phase 1 study of a survivin inhibitor in conjunction with rituximab.
- **AZD1152:** Phase 1 study of a novel cytotoxic targeting aurora b kinase.
- **RATHL:** PET-adapted dose-escalation of therapy in advanced stage HL.
- **CHT25:** Radioimmunotherapy in refractory Hodgkin Lymphoma .
- **Agent B:** 1st line Cisplatin/Gemcitabine/Bevacuzimab in T-cell NHL.
- **Belinostat:** HDAC inhibition in relapsed T-cell NHL.



**WE NEED
YOUR
HELP!**

As a tertiary referral centre we specialise in clinical trials that may not be available anywhere else in your catchment area. We ask you to review all your patients who may be eligible for our studies. We are relying on outside referrals to recruit to these studies, so please get in touch.

If you would like any more information about any of our studies, contact details for the research team are available on page 7.



FOCUS ON... TRANSPLANT

PAIRED

A phase II study of reduced intensity allogeneic transplantation for refractory Hodgkin lymphoma.

Primary Objective: To investigate toxicity, feasibility and survival following reduced intensity transplantation from HLA-compatible sibling or unrelated donors.

Inclusion Criteria:

- Confirmed diagnosis of Hodgkin lymphoma
- HLA-compatible sibling or unrelated donor
- Two subgroups: Primary refractory HL achieving <CR to one line of salvage chemotherapy and HL in first relapse achieving <PR to one line salvage chemotherapy
- Age 16—65 years with WHO performance status grade 0-1

Exclusion criteria:

- Progressive disease or complete response
- Previous HDT or allograft
- Impaired renal, hepatic or cardiac function (LVEF <40%) or systematic respiratory compromise
- Previous malignancy in the past 5 years, except non-malignant skin tumours or stage 0 cervical carcinoma
- HIV positivity

REACH

A phase II study of reduced intensity sibling allogeneic transplantation for relapsed, chemosensitive, PET positive Hodgkin lymphoma.

Primary Objective: To document the toxicity, feasibility and survival following reduced intensity transplantation.

Inclusion Criteria:

- Confirmed diagnosis of Hodgkin Lymphoma
- HLA matched sibling donor
- Relapse following first remission, and in complete or partial remission following salvage therapy, but with residual FDG-avid lesions
- Age 16-65 years with WHO performance status grade 0-1

Exclusion criteria:

- Impaired renal, hepatic or cardiac function (LVEF < 40%) or symptomatic respiratory compromise
- Previous treatment with Ofatumumab
- Previous malignancy in the past 5 years, except non-melanoma skin tumours or stage 0 cervical carcinoma
- HIV positivity
- Previous HDT or allograft

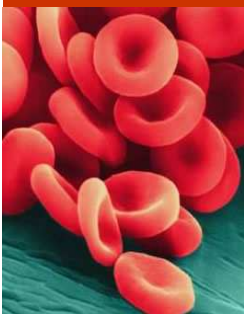
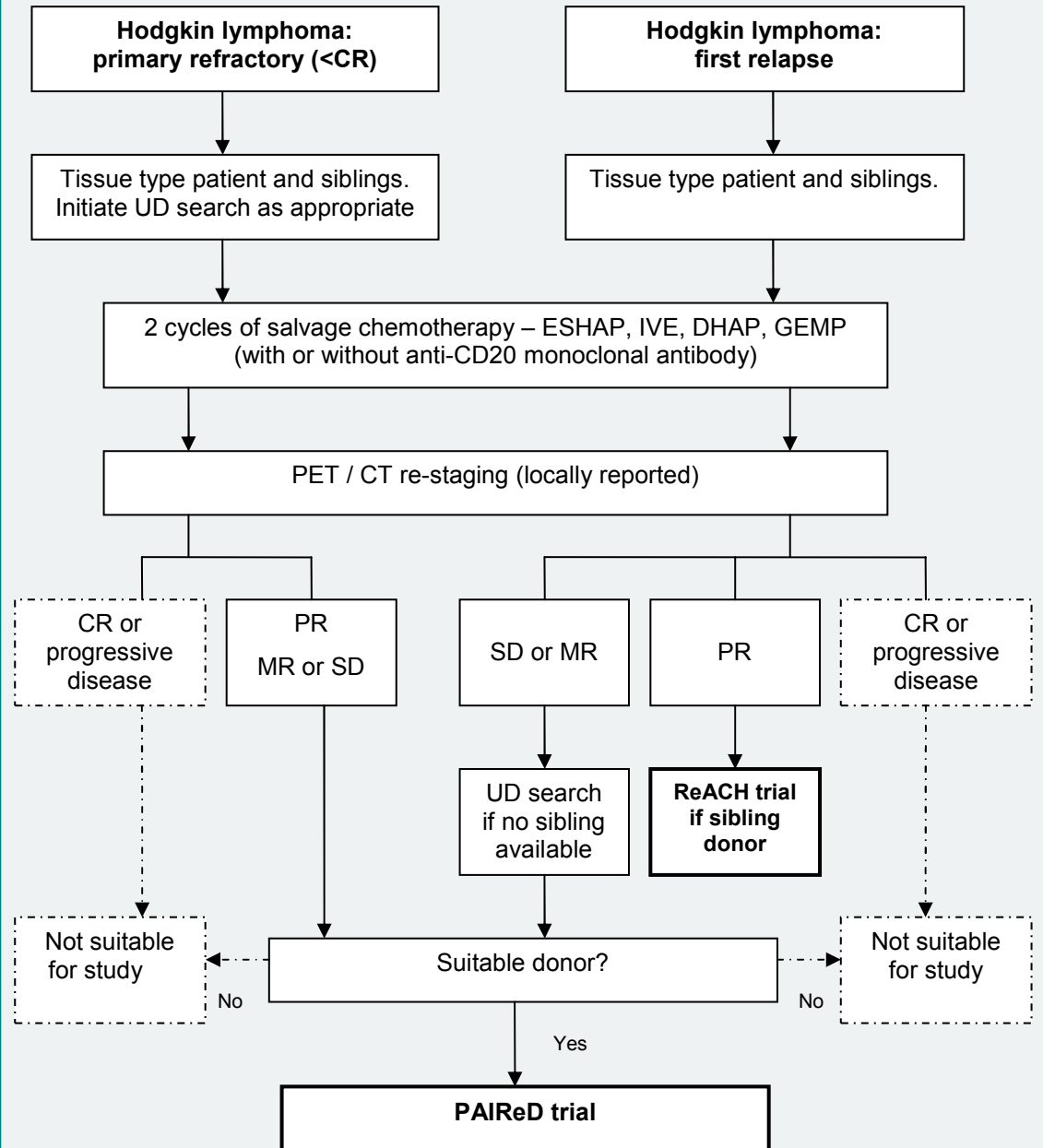
FOCUS ON... TRANSPLANT

FOCUS ON...

Every issue we will be focusing on a specific study or disease area in order to increase recruitment. Please see our 'focus on transplant pages' this month featuring three studies which will be suitable for your transplant patients. See pages 4, 5 & 6 for more details.

We will be closely monitoring outside referrals to studies and presenting a league table so make sure you're top of the league for recruitment!

Paired and Reach eligibility



FOCUS ON... TRANSPLANT

CHT 25

Radioimmunotherapy in Refractory Hodgkin Lymphoma (aka I¹³¹Basiliximab)

This radio-immunotherapeutic (Iodine-131 conjugated to basiliximab, an anti- CD25 mAb) trial is currently between Phase 1 and 2. It is available compassionately at the Royal Free, with PCT approval necessary. Patients relapsing following autograft, or ineligible for transplantation, are the target population.

Inclusion Criteria:

- Relapsed, biopsy proven HL in a patient who has failed or is unsuitable for all conventional therapies for relapsed HL. The patient will have relapsed following an autologous stem cell transplant or be unsuitable for that procedure due to significant co-morbidity
- The tumour has demonstrable IL2-R expression as assessed by CD25 immunostaining of paraffin-embedded tissue. This may be present on either the Hodgkin-Reed-Sternberg cells or the T-cells present in the background tumour milieu. At least 10% of either cell group must be positive for CD25.
- Persistent and measurable disease following salvage chemotherapy administered following the point of relapse
- Evidence of adequate haematopoietic reserve (marrow cellularity >20% ; ANC >1.5x10⁹/L.; haemoglobin >10g/dL; platelet >100x10⁹/L)

Exclusion Criteria:

- More than 25% of the marrow space is involved by HL
- Radiotherapy to areas with viable marrow (within the 4 weeks of enrolment)
- Salvage chemotherapy with alkylator or platinum based therapies (within 4 weeks)
- Previous immunotherapeutic product (including rituximab)

Note that HIV infection is not a contra-indication to enrolment on study

DATES TO KEEP IN MIND!

IS YOUR GCP TRAINING UP TO DATE?

If you are working in clinical trials, it is essential that you complete GCP training every 2 years.

The following dates for Christie GCP training are available:

Wednesday 31st March 2010

Thursday 3rd June 2010

Update sessions are being held on:

Tuesday 30th March 2010 (am or pm session)

Wednesday 2nd June 2010 (am or pm session)

To book on please contact Rachael Baxter in R&D (Rachael.Baxter@christie.nhs.uk).



CONTACT DETAILS

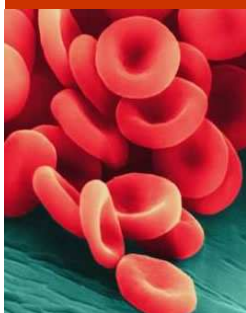
**NEXT
ISSUE**
June 10

In our next issue we will be focusing on...

Myeloma and relapsed DLBCL.

ADDRESS

Haematology and Transplant Unit,
The Christie NHS Foundation Trust,
Wilmslow Road,
Manchester,
M20 4BX.



LYMPHOMA TEAM

Name	Job Title	Telephone	Email
Professor John Radford	Consultant	0161 446 3612	John.Radford@christie.nhs.uk
Dr Kim Linton	Consultant	0161 918 7227	Kim.Linton@christie.nhs.uk
Dr Adam Gibb	Clinical Research Fellow	Bleep via Switch	Adam.Gibb@christie.nhs.uk
Professor Tim Illidge	Consultant	0161 918 7225	Timothy.Illidge@christie.nhs.uk
Dr Richard Cowan	Consultant	0161 466 3409	Richard.Cowan@christie.nhs.uk
Dr Maggie Harris	Consultant	0161 446 3302	Margaret.Harris@christie.nhs.uk
Dr Ed Smith	Consultant	0161 446 3952	Ed.Smith@christie.nhs.uk
Susan Neeson	Lead Research Nurse	0161 446 3019	Susan.Neeson@christie.nhs.uk
Caroline Hamer	Research Nurse	0161 918 7226	Caroline.Hamer@christie.nhs.uk
Suzanne Allibone	Research Nurse	0161 918 7220	Suzanne.Allibone@christie.nhs.uk
Nicola Stones	Scientific Administrator	0161 918 7221	Nicola.Stones@christie.nhs.uk
Tanya Massey	Data Manager	0161 446 3874	Tanya.Massey@christie.nhs.uk
Hannah Johnson	Senior Clinical Trial Assistant	0161 446 3711	Hannah.Johnson@christie.nhs.uk

HAEMATOLOGY TEAM

Name	Job Title	Telephone	Email
Dr Adrian Bloor	Consultant / Research Lead	0161 446 3657	Adrian.Bloor@christie.nhs.uk
Dr Mike Dennis	Consultant	0161 446 3271	Mike.Dennis@christie.nhs.uk
Dr Jim Cavet	Consultant	0161 446 3272	Jim.Cavet@christie.nhs.uk
Michelle Davies	Lead Research Nurse	0161 918 7248 (12679)	Michelle.Davies@christie.nhs.uk
Simeon Mitton	Research Nurse	0161 446 8093	Simeon.Mitton@christie.nhs.uk
Nita Smeeton	Research Nurse	0161 446 8298	Nita.Smeeton@christie.nhs.uk
Joanne Allen	Research nurse (Young Oncology Unit)	0161 918 7098 (12343)	Joanne.Allen@christie.nhs.uk
Benjamin Kisaka	Senior Clinical Trial Assistant	0161 918 7224	Benjamin.Kisaka@christie.nhs.uk
Antonia Veale	Clinical Trials Coordinator	0161 918 7222	Antonia.Veale@christie.nhs.uk