EORTC : 54 ans de recherche académique

12ème Biennale Monégasque de Cancérologie
5 février 2016

FRANCOISE MEUNIER, MD, PhD, FRCP
Director Special Projects, EORTC
Brussels, Belgium
Table of contents

• General introduction to EORTC
• Structure and activities
• Perspectives
European Organisation for Research and Treatment of Cancer (EORTC)

Private and not for profit organization created in 1962

- Main mission: promote and conduct research to improve cancer care
- Core activity: clinical research
  - All activities are
    - International
    - Multidisciplinary
    - Develop new treatments
    - Define new standards of care
    - Large academic trials
    - Trials on rare cancers
    - Translational Research
European visionaries

1949 NATO
1951 CECA
1957 EEC
1993 EU

Henri Tagnon
Co-Founder of EORTC

1962 GECA
1968 EORTC
1972 NCI liaison
1974 EORTC data center

The future of cancer therapy
From Dream to Reality : EORTC 2016

- > 187,600 patients in the databases
- > 24,000 patients being followed-up
- > 4,125 collaborators (clinicians, pathologists, researchers,....)
- > 632 institutions in the network
- >180 members in the HQ staff
- 442 publications in 2012-2014
- 34 different countries
- 45 trials open to patient entry, 207 active trials
- 18 trials opened in 2015
- 21 groups/task forces
EORTC Committees Peer Review Process

- Protocol Review Committee
- New Drug Advisory Committee
- Translational Research Advisory Committee
- Independent Data Monitoring Committee
- Quality Assurance Committee
- Scientific Audit Committee
- Institutional Review Board
- Membership Committee

To improve cancer treatment without commercial aim
Accrual of screened patients in EORTC clinical studies in 2000 – 2014: 79754 patients

European Union
- Netherlands: 16824
- France: 16057
- Belgium: 8477
- United Kingdom: 7538
- Germany: 7026
- Italy: 6859
- Spain: 3164
- Poland: 1148
- Sweden: 903
- Austria: 851
- Portugal: 649
- Denmark: 577
- Slovak Republic: 472
  - Croatia: 352
  - Slovenia: 338
  - Hungary: 222
  - Ireland: 202
- Czech Republic: 176
  - Cyprus: 83
  - Greece: 57
  - Bulgaria: 49
- Finland: 35
- Latvia: 34
- Malta: 20
- Romania: 20
- Luxembourg: 9
- Estonia: 7

> 84%

Non-European Union
- Switzerland: 1705
- Turkey: 631
- Norway: 463
- Serbia: 261
- Russian Federation: 178
- Bosnia And Herzegovina: 8
- Macedonia: 6

Rest of the world: 4353
Missions of EORTC Headquarters

• To provide an optimal infrastructure for carrying out multicenter cancer clinical trials
• To provide expertise in clinical research management
• To ensure independence and objective conduct, analysis and report of trials
• To promote and conduct internal research projects
• Education role: courses / manuals /PhD
EORTC STAFF
From 28 in 1991 to 180 in 2016
### EORTC Headquarters Fellows

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Doctors</td>
<td>86</td>
</tr>
<tr>
<td>Medical Doctors/Statisticians</td>
<td>6</td>
</tr>
<tr>
<td>Statisticians</td>
<td>30</td>
</tr>
<tr>
<td>Lawyer</td>
<td>2</td>
</tr>
<tr>
<td>Health economists</td>
<td>9</td>
</tr>
<tr>
<td>Computer scientist</td>
<td>1</td>
</tr>
<tr>
<td>Cancer Communication</td>
<td>2</td>
</tr>
<tr>
<td>Other scientists</td>
<td>11</td>
</tr>
</tbody>
</table>

**TOTAL** 151

49 PhD Theses
EORTC Infrastructure to support new generation of clinical trials

- Translational Research Unit
- Biobank
- Quality Assurance in RT(QART)
- Translation Research Unit
- Biobank
- Quality Assurance in RT(QART)
- Imaging
- Sample tool
- KEOSYS platform
- QART
- VODCA platform
- ORTA, VISTA, Safe, PRISMA
- Clinical infrastructure

The future of cancer therapy
EORTC phenomenal strength in Rare Diseases

• **Soft Tissue Sarcoma:**
  • Gist Trial record breaking

• **Melanoma:**
  • Largest adjuvant trials in shortest time frame

• **Brain Tumors:** Adjuvant TMZ/XRT trial in GBM

• **Haematology-oncology:**
  • Leukemia - trials / unique database
  • Lymphoma - trials / unique database
  • Children Leukemia - trials / unique database

• **Head and Neck Cancer:** Larynx preservation
Looking towards the 21st century

- Cost containment is a major threat for Pan-European TR/clinical research
- Less than 5% of (cancer) patients benefit from clinical trials because of lack of access to the trials methodologies in most hospitals
- Competitiveness of Europe - Brain drain
- Clinical research is not a luxury!
- Capacity for medical excellence: final goal
- Impact on public health and healthcare budget
**EORTC studies have led or contributed to drug registration**

<table>
<thead>
<tr>
<th>Study Number</th>
<th>Duration</th>
<th>Sponsor/Sponsors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Squamous cell Carcinoma of H&amp;N</td>
</tr>
<tr>
<td>EORTC 20981 (1999-2004)</td>
<td></td>
<td>Roche – Mabthera</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Relapsed follicular non-Hodgkin’s Lymphoma</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Newly diagnosed glioblastoma multiforme</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Stage III Melanoma</td>
</tr>
<tr>
<td>EORTC 62072 (2008-2010)</td>
<td></td>
<td>GSK – Pazopanib</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Soft Tissue and Bone Sarcoma</td>
</tr>
<tr>
<td>EORTC 18071 (2008-2011)</td>
<td></td>
<td>BMS – Ipilimumab</td>
</tr>
<tr>
<td></td>
<td></td>
<td>High-risk Stage III Melanoma</td>
</tr>
<tr>
<td><strong>ONGOING</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EORTC 26101 (2011- )</td>
<td></td>
<td>Roche – Bevacizumab and Lomustine</td>
</tr>
<tr>
<td></td>
<td></td>
<td>First recurrence of a glioblastoma</td>
</tr>
<tr>
<td>EORTC 1307-BCG (2014 - )</td>
<td></td>
<td>Tesaro – Niraparib</td>
</tr>
<tr>
<td></td>
<td></td>
<td>HER2 negative Breast Cancer</td>
</tr>
<tr>
<td>EORTC 1325 – MG (2015 - )</td>
<td></td>
<td>Merck SPRI – Pembrolizumab</td>
</tr>
<tr>
<td></td>
<td></td>
<td>High-risk Stage III Melanoma</td>
</tr>
<tr>
<td>EORTC 0811 (2014 - )</td>
<td></td>
<td>Amgen – Denosumab</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Non Small Cell Cancer</td>
</tr>
<tr>
<td>EORTC 1410-BTG (2015- )</td>
<td></td>
<td>AbbVie M14-483 Temozolomide versus</td>
</tr>
<tr>
<td></td>
<td></td>
<td>lomustine or temozolomide – Recurrent Glioblastoma</td>
</tr>
</tbody>
</table>
THE DECLINE AND FALL OF EUROPE

(Written by Rana Foroohar)

THE END OF EUROPE

Its economic union is unraveling. London is ablaze, and the continent's once dependable trading partner, the U.S., is too feeble to save the day or the euro. Say goodbye to the old order.

Illustration by Simon Wiesberger for TIME

Wake up call

The future of cancer therapy
Does the Legislation Protect the Researchers or the Patients?

Median length of Patient Information Sheet, including informed consent
(based on 285 EORTC trials from 1999 to 2014)

Uncertainty is inherent to scientific research

2014 red tape project: 40 pages spread over 3 documents
Regulatory framework in Europe: a major bottleneck

EU

- Data protection regulation
- ATMP directive
- Clinical trial regulation
- Medical device regulation
- Cross border directive
- In vitro diagnostics regulation

Europe must build an integrated and harmonized legal and ethical framework to foster relevant international cancer clinical research

Streamline - Simplify - Harmonize

MSs: x28

Other human research (interventional or not)
Genetic testing & consulting
Radioprotection laws
Tissue research

Other human research (interventional or not)
Genetic testing & consulting
Radioprotection laws
Tissue research
...
Need for Comprehensive EU Research Approaches:
High quality clinical research to translate laboratory discoveries to routine practice

• Appropriate infrastructures for:
  • local investigators
  • coordinating centers
• Education and career tracks for clinical investigators
• And Funding!
The Way Forward?

Streamline - Simplify – Harmonize

Building a bright future together requires
Wisdom - Courage – Vision and Trust

“COLLABORATE OR DIE”
(Steve Arlington – PwC)
Decrease in mortality per cancer in Europe (all types) and its evolution (based on 100,000 people) between 1970 and 2015

Malvezzi M et al., Annals of Oncology, 2015;26(4):779-786
2nd EORTC Cancer Survivorship Summit

Under the High Patronage of
His Serene Highness Prince Albert II of Monaco

Survive and thrive
Help us address these issues

31 March - 1 April 2016
Square Meeting Centre
Brussels, Belgium
From the Channel to the Moon

1909

Bleriot

1969

JULY 20, 1969

The future of cancer therapy
THANK YOU FOR YOUR ATTENTION