

Central England Haemato- Oncology & Oncology Research Biobank (CEHRB)

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Annual Report April 2015 to March 2016

CEHRB C/o West Midlands Regional Genetics Laboratory
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<http://www.bwnft.nhs.uk/healthcare-professional/west-midlands-regional-genetics-laboratory/central-england-haemato-oncology-and-oncology-research-biobank>

PART 1- Staff, Samples Stored and Patient Consent

- 1.1 CEHRB Staff
- 1.2 Steering Committee
- 1.3 Types of samples and material stored
- 1.4 Hospitals involved in requesting patient consent
- 1.5 Consented patient figures
 - 1.5.1 Cumulative figures for patient consent
 - 1.5.2 Patients consented from individual hospitals

PART 2 - Projects and Publications 2015-2016

- 2.1 Existing Projects receiving samples from CEHRB between April 2015 and March 2016
- 2.2 Newly Approved projects that have received samples from CEHRB between April 2015 and March 2016
- 2.3 List of Publications/presentations (2015/2016) that have used samples from CEHRB

PART 3 –Bank sustainability and Targets

- 3.1 Promotion of CEHRB
- 3.2 Sustainability of CEHRB

- 3.3 Review of Targets for 2015 - 2016
- 3.4 New Targets for 2016 - 2017

PART 1- Staff, Samples Stored and Patient Consent

1.1 CEHRB Staff

The following staff members, from the West Midlands Regional Genetics Laboratory contribute to CEHRB activities.

Director

Prof Mike Griffiths Email: mike.griffiths@bwnft.nhs.uk

Manager and HTA Designated Individual

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1.2 Steering Committee

Prof Charles Craddock (Chair and Representative for Cure Leukaemia)

Consultant Haematologist
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University Hospital Birmingham NHS
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1.3 Types of samples and material stored

Samples

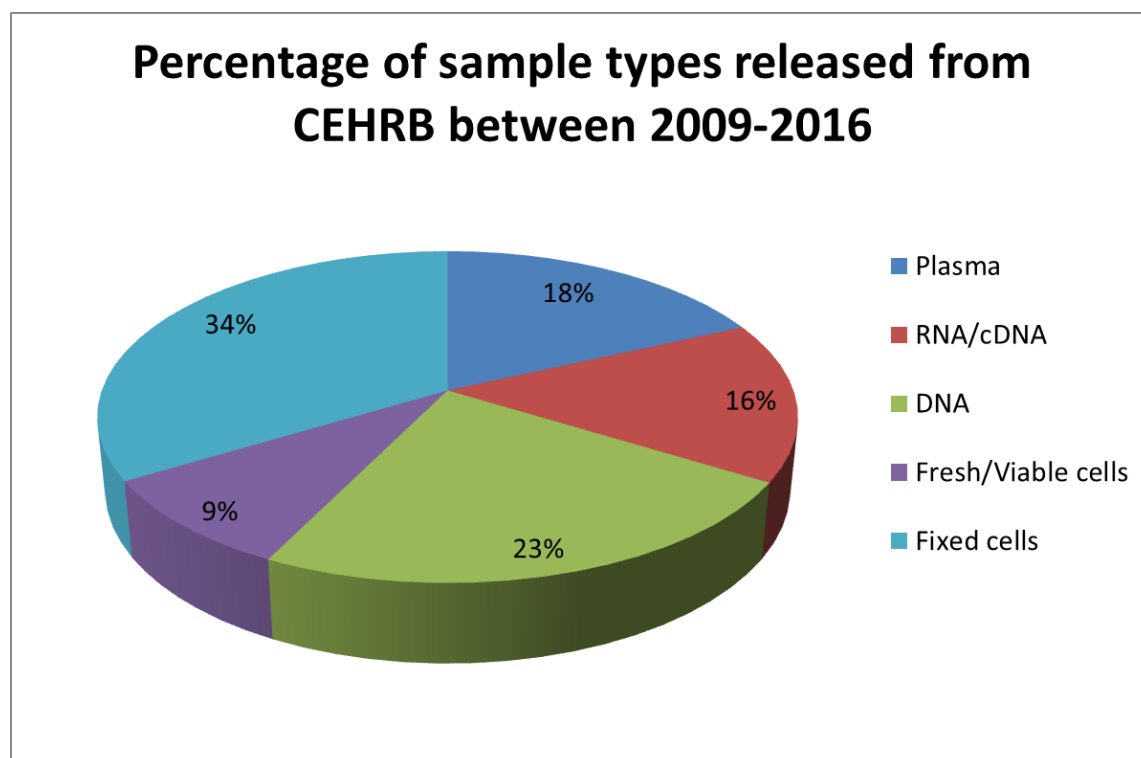
- Peripheral Blood
- Marrow
- Solid tumour

Material from peripheral blood and marrow

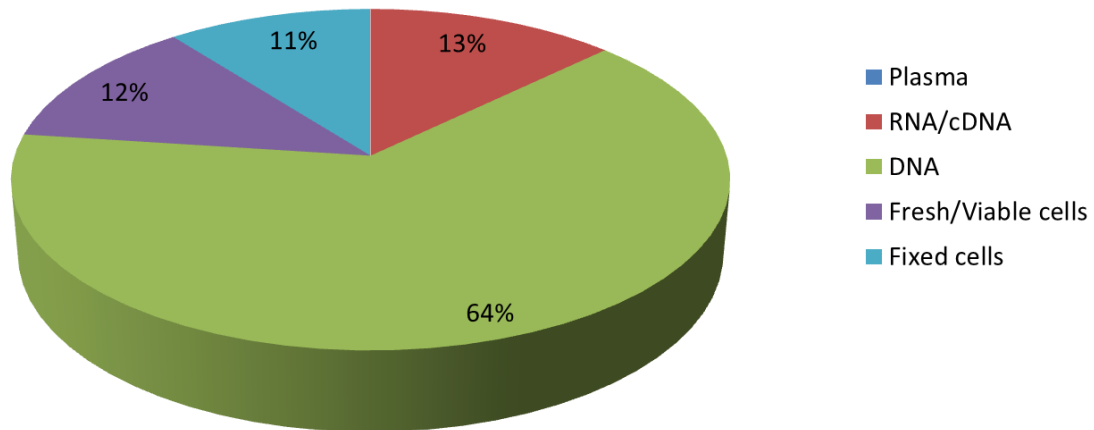
- Cytogenetic fixed cell suspensions
- DNA
- RNA/cDNA
- Fresh peripheral blood and marrow
- Plasma (on request)
- Other (on request)

Material from Solid tumours (by request only)

- Fresh tissue
- FFPE slides



Percentage of sample types released from CEHRB between April 2015-March 2016



1.4 Hospitals involved in seeking patient consent

There are 10 hospitals that have a part funded Research Nurse who is involved in seeking patient consent specifically for CEHRB

- Royal Stoke University Hospital, Staffordshire
- County Hospital, Stafford
- Queen Elizabeth Hospital, Birmingham
- Russell's Hall Hospital, Dudley
- Heartlands Hospital, Birmingham
- University Hospital Coventry
- Worcestershire Royal Hospital, Worcester
- Alexandra Hospital, Redditch
- Sandwell General Hospital, West Bromwich
- New Cross Hospital, Wolverhampton

We have also received patient consent from the following hospitals:

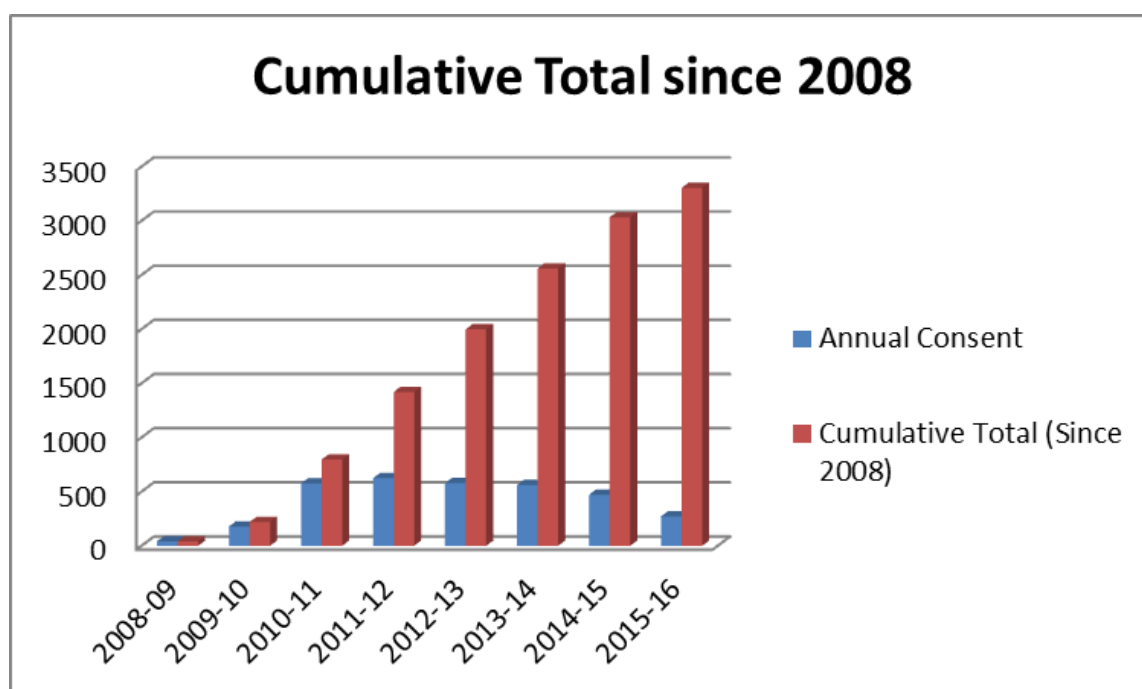
- BMI The Priory Hospital, Birmingham
- Nuffield Health Wolverhampton Hospital
- Mosely Hall Hospital, Birmingham
- Spire Little Aston Hospital, Sutton Coldfield
- Hereford County Hospital
- Princess Royal Hospital, Telford
- Kidderminster Hospital

1.5 Consented patient figures

The following patient consent data are based on consent data received from 11 sites:

Hospital List	
ALBR	Alexandra Hospital
CHCB	Centre for Clinical Haematology, Queen Elizabeth Hospital
EBEB	Heartlands Hospital
KGKI	Kidderminster General Hospital
NXWV	New Cross Wolverhampton
RUDU	Russell's Hall, Dudley
SDMS	Stafford District General
SDSA	Sandwell Health Care NHS Trust
UHNS	University Hospital North Staffordshire
WGCO	Walsgrave Hospital Coventry
WRWO	Worcester Royal

1.5.1 Cumulative patient consent since April 2008



- The total number of patients consented during 2015-2016 is **299**. The number of patients consenting has decreased since 2011 (by 57%), 42% within the last year. This reduction is likely to reflect the limited resources for consenting patients.

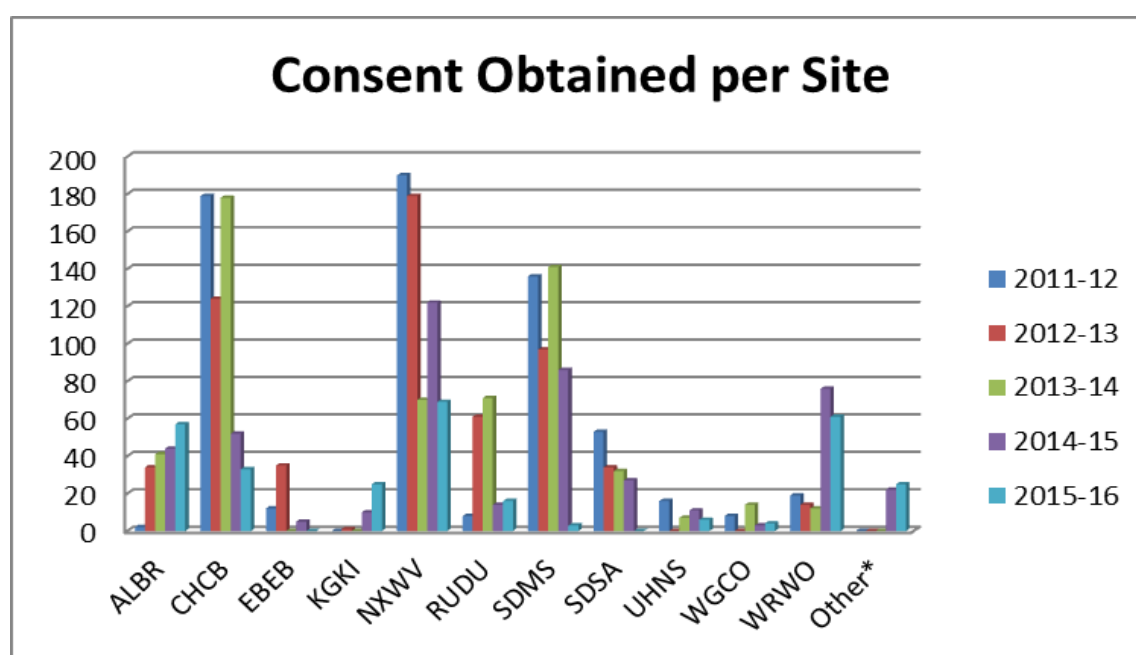
1.5.2 Patients consented from Individual Hospitals

Patient consent has predominantly been secured from Alexandra, Newcross, and Worcester Royal hospitals during 2015-2016.

Number of patients consented per site:

	2008-11	2011-12	2012-13	2013-14	2014-15	2015-16	Total between 2008-16
ALBR		2	34	41	44	57	178
CHCB		179	124	178	52	33	566
EBEB		12	35	0	5	0	52
KGKI		0	1	0	10	25	36
NXWV		190	179	70	122	69	630
RUDU		8	61	71	14	16	170
SDMS		136	97	141	86	3	463
SDSA		53	34	32	27	0	146
UHNS		16	0	7	11	6	40
WGCO		8	0	14	3	4	29
WRWO		19	14	12	76	61	182
Other*		0	0	0	22	25	47
Grand Total	796	623	579	566	472	299	3335

*Other includes consents from centres



PART 2: Projects and Publications

- The total number of samples sent out to ethically approved projects for April 2015 – March 2016 is 218 (compared to 572 in 2014-15). Details are provided below.
 - 10 projects have received samples from CEHRB during this period.
 - 3 new projects and 7 existing projects.
 - 4 new projects were approved
 - 5 sample requests were rejected due to limited resources, unable to provide material or data requested.
- Since Sept 2009 CEHRB has provided 2840 samples to 60 projects. Some of these projects continue to receive samples.

2.1 Existing projects that have received samples from CEHRB between April 2015 and March 2016

Project No.	Principal Investigator	Laboratory Address	Sponsor	Samples Sent	
				Type	Number
3	Dr Tatjana Stankovic	CRUK Institute for Cancer Studies	Kay Kendall Leukaemia Fund	Marrow	4
31	Prof Peter Cockerill and Constanze Bonifer	IBR Medical School, University of Birmingham	Leukaemia and Lymphoma Research	Marrow	8
34	Dom McMullan	WMRGL	Cytocell	Fixed Cells	21
41	Prof Jon Frampton	Institute for Biomedical Research, College of Medical and Dental Sciences, Birmingham University	Not Stated	Marrow	3
43	Dr Nicholas Davies	Birmingham-ICS	Leukaemia and Lymphoma Research	Blood	8
				Marrow	4
51	Prof David Grimwade	Grimwade-Guy	Leukaemia and Lymphoma Research	DNA	14
				RNA	3
				Fixed Cells	6
52	Dr Paul Ferguson	The Weatherall Institute of Molecular Medicine, University of Oxford, John Radcliffe Hospital	Not stated	DNA	75

2.2 Newly approved projects that have received samples from CEHRB Between April 2015 and March 2016

Project No.	Principal Investigator	Lab. Address	Sponsor	Samples Sent	
				Type	Number
57	Hicham	Trans-Hit Biomarkers Inc. Canada	Confidential	RNA	24
58	Lynda Bennett	Baylor Institute for Immunology Research, Texas	Baylor Foundation Discretionary Funds	DNA	26
59	Prof Nicholas Cross	Wessex Regional Genetics Laboratory	Not stated	DNA	25

2.3 List of publications/presentations that have used samples from CEHRB

- Since 2009 there have been 18 publications and at least 12* oral presentations that have used samples received from CEHRB (* data on oral presentations collated since 2010).
- There was 1 publication and 3 oral presentations/meeting abstracts during the 2015-2016 period; detailed below. We are aware of a further 3 that have been submitted

Publications (2015/2016)

1. Chronic FLT3-ITD signaling in Acute Myeloid Leukemia is connected to a specific chromatin signature. *Cauchy P, James SR, Zacarias-Cabeza J, Ptasinska A, Imperato MR, Assi SA, Piper J, Canestraro M, Hoogenkamp M, Raghavan M, Loke C, Akiki S, Clokie SJ, Richards SJ, Westhead DR, Griffiths MJ, Ott S, Bonifer C and Cockerill PN.* Cell Reports, 2015 (12): 821-836

Oral presentations and meeting abstracts (2015/2016)

1. Clinical and Genetic Landscapes of IGH-CRLF2 and P2RY8-CRLF2 Acute Lymphoblastic Leukaemia. *Lisa J Russell, Lisa Jones, Amir Enshaei, Stefano Tonin, Sarra L Ryan, Jeyanthi Eswaran, Sirintra Nakjang, Elli Papaemmanuil, Jose M C Tubio, Adele K Fielding, Ajay Vora, Peter J Campbell, Anthony V Moorman, Christine J Harrison.* (Poster: ASH 2015)
2. A disease-linked ULBP6 polymorphism modulates NKG2D-mediated cytotoxicity by creating an ultra-stable NKG2D receptor/ligand interaction. *Jianmin Zuo, Carrie Willcox, Fiyaz Mohammed, Martin Davey, Benjamin E. Willcox and Paul Moss.* (ULBP Poster)
3. Genetic Variation at HBS1L-MYB and GFI1B-GTF3C5 Influences whether JAK2 V617F Mutated MPN Present with ET or PV. *Nicholas Cross*, Joannah Score, Andrew Chase, Joanna Baxter, Joanne Ewing, Louise Wallis, Joe Chacko, Paola Guglielmelli, Dolores Colomer, Beatriz Bellosillo, Blanca Navarro, Montse Gomez, Juan Carlos Hernández-Boluda, Carlos Besses, Francisco Cervantes, Steffen Koschmieder, Andreas Reiter, Anthony Green, Claire Harrison, Alessandro Vannucchi, William Tapper.* (EHA abstract 2016)

PART 3: Targets

3.1. Promotion of the Biobank

- Due to very limited resources the biobank has not undertaken any promotional work this year
- The biobank is present on the following biobank registries;
<http://www.orpha.net>

3.2. Sustainability of CEHRB

The biobank has yet to become sustainable. Funding is still to be sought.

3.3. Review of targets and other achievements for 2015-2016


No targets were achieved due to very limited staff resources. However, 10 projects were supported by CEHRB this year.

Targets Not Achieved

- Ensure continued improvement in patient recruitment by liaising with RRN.
- Secure additional funding
- Approve and supply samples to at least 5 projects
 - Only 3 new projects approved
- Seek to establish further collaboration with global Biobank networks to increase income and research portfolio.

3.4. New targets for 2016-2017

- Secure additional funding is the main priority
 - Seek to establish further collaboration with global Biobank networks to increase income and research portfolio.
 - Seek and submit grants for biobank funding
- Approve and supply samples to at least 3 projects
- Ensure continued patient consent by liaising with RRN.



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