A Biobank Network to Integrate Cancer Research and Care

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UCC Insight Centre / BBMRI
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Spanish National Tumour Bank Network

RTICCC Tumor Bank Programme

Est 2000, run by CNIO in Madrid. Now part of Research Network of Cancer Centers (RTICCC) promoted by the Spanish Ministry of Health: 63 hospitals

All are using...

- the same technical protocols
- homogeneous ethical requirements
- a unique sample ID system
- a common Quality Control program
- common database
Standalone vs *Networked Biobanks

- Scope
- Consent
- Procedures
- Efficiency
- QA/QC
- Data and databases
- International standards
- Researcher access

*Spain, Wales, France, Italy, Netherlands, Ireland, Austria, Germany, Belgium, Canada, USA, China, Russia, Brazil, Ecuador, Mexico, Korea, Singapore, Japan, Australia, NZ*
Goals

- Promote Hospital Cancer Biobank Network
  - Collect, store, share donated samples
  - Approved academic, biopharma research
- Facilitate (inter)national collaborations, clinical trials
  - Precise treatments, better prognosis
- Equitable access and withdrawal via web portal
- Inform and have input of patient groups, public, others
- Government to contribute to sustainable funding as standard of care
Biobank Network Start-up

- UCH Galway
- Cork UH
- St James’ s
- Biobank scientists
- Identical Procedures, IT
- Operations manager
- Hospital staff
- Online database

Prove concept

Additional hospitals

Complete Network

Start-up funds

?HSE
What We Do

- Support pathology-based biobanks
  - SJH, Beaumont, CUH, GUH
  - Colorectal and breast cancer
  - Part-time staff
- Collaborate
  - BCNI, ICORG, Breast Predict
- Database with SuprTecBox
- -> Web portal for all
- Engage stakeholders

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Biobanking Stakeholders

- Biobank staff <-> hospital staff
- Patient groups, public, professional bodies, etc
- Academic researchers, biopharma
- International colleagues
  - ISBER, ESBB, MAWG, BBMRI
- Government and funding agencies
- EU
- (President Obama, Precision Med Initiative)
- al.
Le Gastronomique Golf Event

At Cícé Blossac, Rennes, France
Saturday June 9th - Tuesday June 12th 2007

In Aid of BIOBANK IRELAND TRUST
Network Plan

- Know the Market Need
  - Academics
  - Biopharma
- Know the Costs
  - Collect, process, store, distribute samples; facilities and infrastructure
- Strategic Collection
If I were the patient

• If I can help
• Altruistic but...
• Use, don’t stockpile my samples
• Don’t sell them
• I want research on my samples to make a difference for others
Strategic Sample Collection

- Collaborative cancer centre grants
- Active academic research areas
- One consent, patient info, fair SAP
- Willing cooperation of hospital staff
- SOPs, QC, ISBER BP
- Shared database, web portal
- Inventory turnover – samples are used
The SJH Biobank Community
Organic Development

- Histopathology-based biobank scientists for frozen, FFPE
- Each cancer centre collects 3-4 cancers
- CRC for blood samples
- IT personnel, project manager
- Existing biobanks
- -> 9 Irish cancer hospitals
Sustainability

Operational
- Enough personnel, no duplication of inst resources, share facilities, essential cooperation of hospital staff, training, re-evaluation, return of data

Societal

Financial
- Cost Recovery (partial) – charge for samples
- Cost Recovery – Added Value: CTMOP for IHC, TMAs, assays etc
- Other income
Challenges & Opportunities

- National Biobank Policy 2012
- Priorities
- Attitudes
- National Cancer Strategy 2016
- Industry R and D
- Resources
  - Determine what we can do
Hereditary/Acquired Attitude Problems
Cancer Biobank Network: Costs vs Benefits

- Cost: €7.5m over 5 years
  - Government, universities/hospitals, charities, industry
  - Cost recovery
- Selected Benefits
  - Quicker research; SOPs, IT, QC
  - Research infrastructure hardwired into cancer care
  - International collaborations
  - Ultimately better medicines, better care
  - Stimulate jobs, Industry R and D, Economy
  - An investment for public good
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