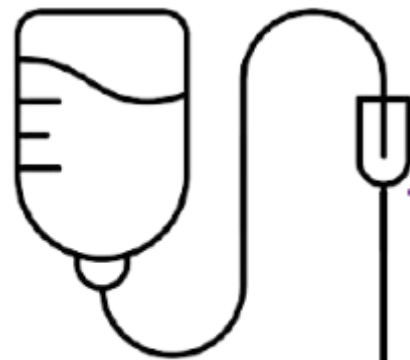




WELCOME TO

The NHS Oncology Conference 2022



2022

The NHS
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Conference

Check Out Our
Agenda Here...

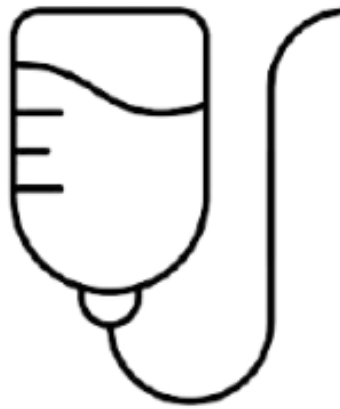


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Event Chair – Opening Address



Nathan Nagel

CEO
FRATREM GROUP
LTD

SPEAKING NOW



John Gale

Programme Manager for the Cancer Support Workforce
(ACCEnD) - Cheshire & Merseyside Cancer Alliance

I will be
discussing...

“Aspirant Cancer Career
and Education Development
Programme – Focusing on
the Cancer Support
Workforce - Workstream”

SPEAKING NOW



Denis Colligan

Macmillan Clinical Advisor, Northwest
Macmillan

I will be
discussing...

“Personalised Care and
Support for people living
with Cancer”

SPEAKING NOW



Karen Clayton

Macmillan Lung Cancer Lead Nurse Specialist
East Cheshire NHS Trust

I will be discussing...

“Raising the profile of
specialist nurses”

Raising the Profile of Clinical Nurse Specialists

Karen Clayton

Macmillan Lung Cancer Lead Clinical Nurse Specialist

East Cheshire NHS Trust

Vice Chair Lung Cancer Nursing UK

AIMS

- To define and explain why we need raise the profile of the CNS
- What is it a CNS does ?
- How been raising the profile
- Lung Cancer Nursing UK Framework

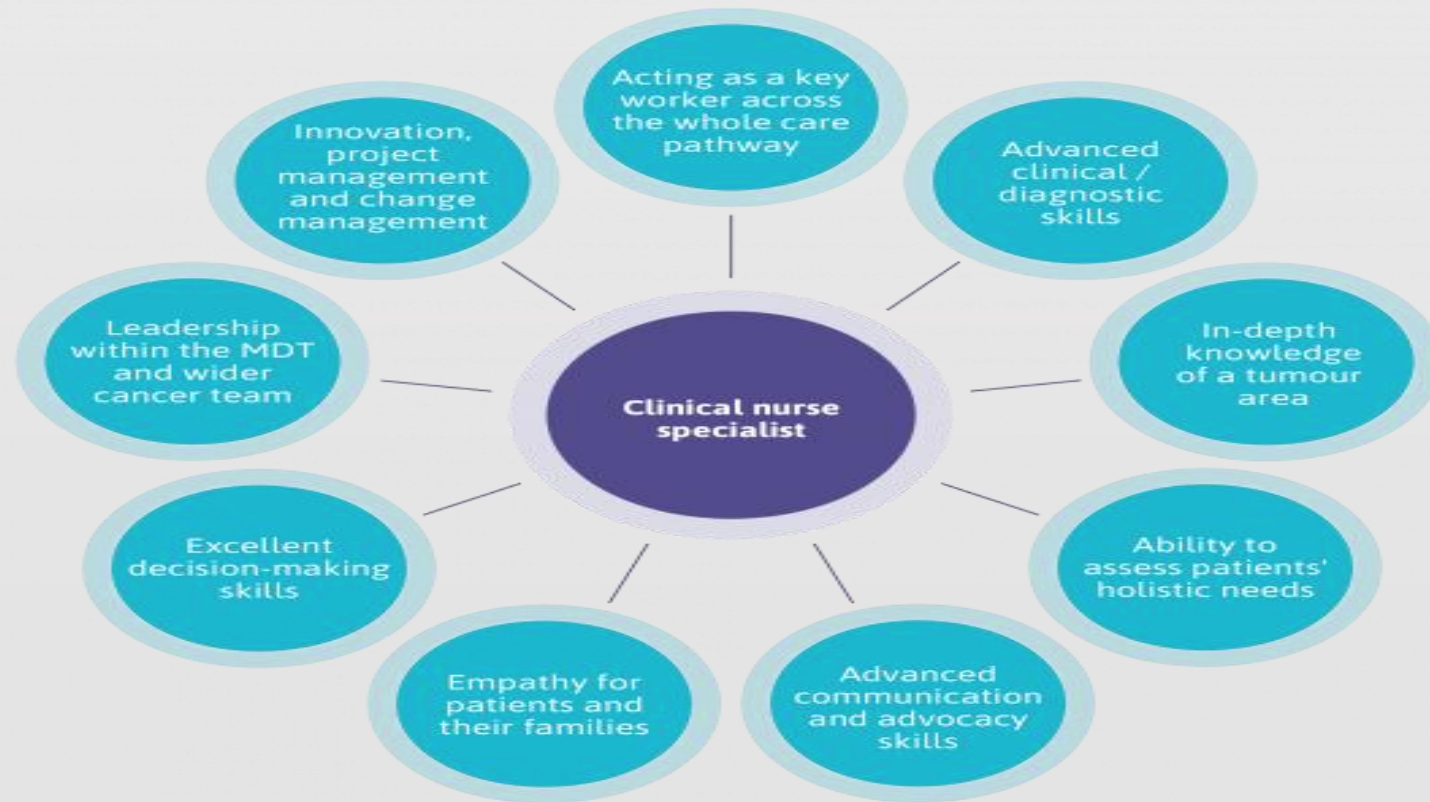
Definition

- The CNS role **provides and reinforces relevant information and appropriate liaison with other professionals and agencies to improve the cancer care process for patients.** CNSs improve quality and experience of care for patients, reinforce patient safety, demonstrate leadership and increase productivity and efficiency.

Why do we need to Raise the Profile of the Clinical Nurse Specialist

- The specialist cancer workforce currently needs an additional 2,500 specialist cancer nurses, an increase of 84%.
- By 2030, the gap between patient need and workforce capacity will have grown to 3,700 nurses, an increase of 123%
- Of nearly 7,000 people living with cancer showed that 63% of people recently diagnosed with cancer said they were not getting all the support they need from the NHS.
- Specialist cancer nurses reduce treatment costs, increase efficiency, drive innovation and provide valuable information for service re-design as well as enable multidisciplinary care and communication between different teams
- The specialist cancer nurse population is ageing, with 37% being over 50. This had increased from 33% in the 2014 census and raises concerns that the system is not adequately preparing for the future
- Ref: Addressing the Gap, Macmillan Cancer Support (2020)

What does a Clinical Nurse Specialist Do?



NATIONAL CANCER Clinical Nurse Specialist Day

15 March 2022 #NationalCancerCNSDay



NATIONAL CANCER Clinical Nurse Specialist Day

15 March 2022

#NationalCancerCNSDay



Greater
Manchester
Cancer



Join the discussion!

"The future of the cancer CNS role:
challenges & opportunities"

A TWITTER CHAT
hosted by UKONS

OUR GUESTS



Mary Taylor
Chair of the UKONS Council



David Turner
Head of Clinical Oncology,
Greater Manchester Cancer



Sarah Smith
Head of Clinical Oncology,
Yorkshire Cancer



Sarah Smith
Head of Clinical Oncology,
Yorkshire Cancer



Sarah Smith
Head of Clinical Oncology,
Yorkshire Cancer



Sarah Smith
Head of Clinical Oncology,
Yorkshire Cancer

NATIONAL
CANCER
Clinical Nurse
Specialist Day

15 March 2022

#NationalCancerCNSDay

UKONS

Twitter

Facebook

LinkedIn

Instagram

Mark your calendar!
15th of March, Tuesday
5-6 PM (UK) on Twitter

Follow and use the hashtags:

#NationalCancerCNSDay

#UKONSchat

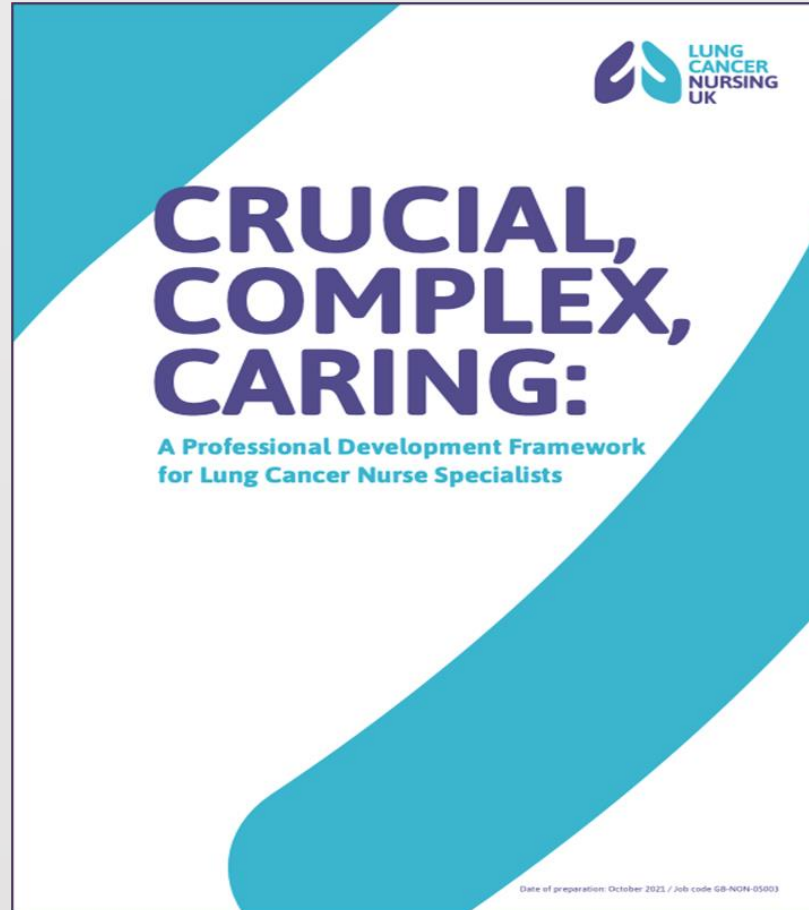
Twitter chat moderators:

→ Mary Taylor

→ Sarah Smith

→ Sarah Smith

Lung Cancer Nursing UK Framework



Who is the Framework for?

- Nurses aspiring to become a Lung Cancer Clinical Nurse Specialists
- Existing Lung Cancer Clinical Nurse Specialists
- Line managers
- Employers
- Policymakers

Conclusion

Raising the profile of Clinical Nurse Specialist is paramount

- Crucial to cancer patients' experience
- Manage Complex caseloads for which there needs to investment and an increase in numbers of CNS's
- Caring, all CNS's are passionate about delivering world class care - succession planning in the services is foremost for this to continue

Thank you for listening
Any Questions ?

Email: K.Clayton@nhs.net

Tel: 01625 661997

UP NEXT...

THOR
the future of medicine

SPEAKING NOW



James Carroll

Founder and CEO
THOR Photomedicine

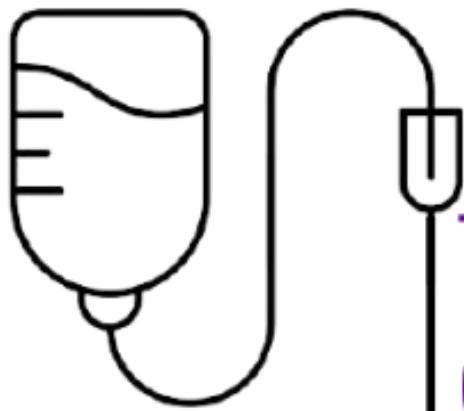
I will be
discussing...

“Photobiomodulation for
Oral Muscositis, results from
47 RCT’s, effect size, case
reports and treatment
demonstration”



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Q&A PANEL



John Gale

Programme Manager for the
Cancer Support Workforce
(ACCEnD)



Dennis Colligan

Macmillan Clinical Advisor,
Northwest
Macmillan



Karen Clayton

Macmillan Lung Cancer
Lead Nurse Specialist
East Cheshire NHS Trust



James Carroll

Founder and CEO
THOR Photomedicine

MORNING BREAK, NETWORKING & REFRESHMENTS

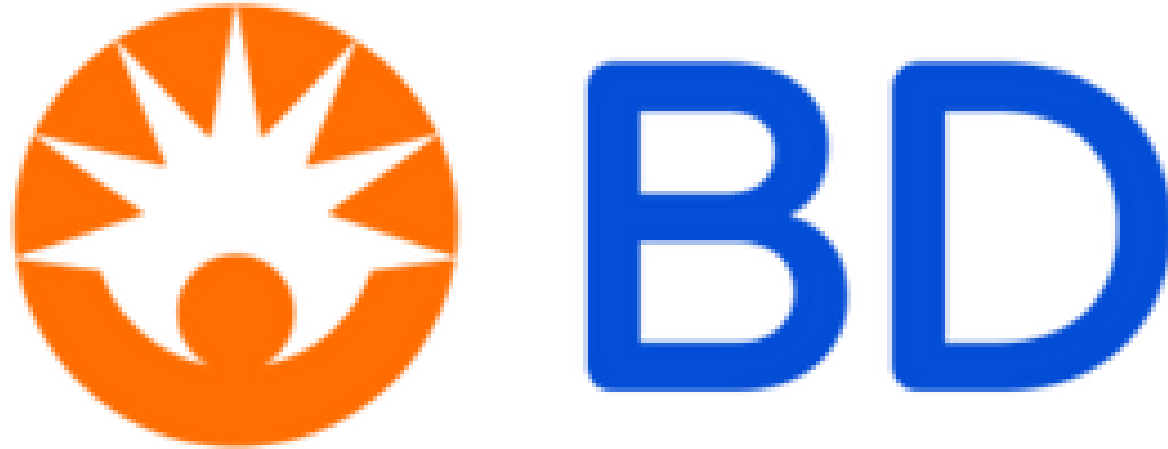
Chair Morning Reflection



Nathan Nagel

CEO
FRATREM GROUP
LTD

UP NEXT...



SPEAKING NOW



James Martin

Lead Pharmacist – Oncology & Q&A Services
The London Clinic

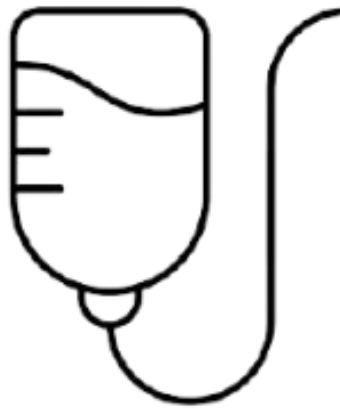
I will be discussing...

“Implementing BD Cato™
to Transform the aseptic
Services Unit”



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SPEAKING NOW



Sam Behjati

Group Leader
Wellcome Sanger Institute

I will be discussing...

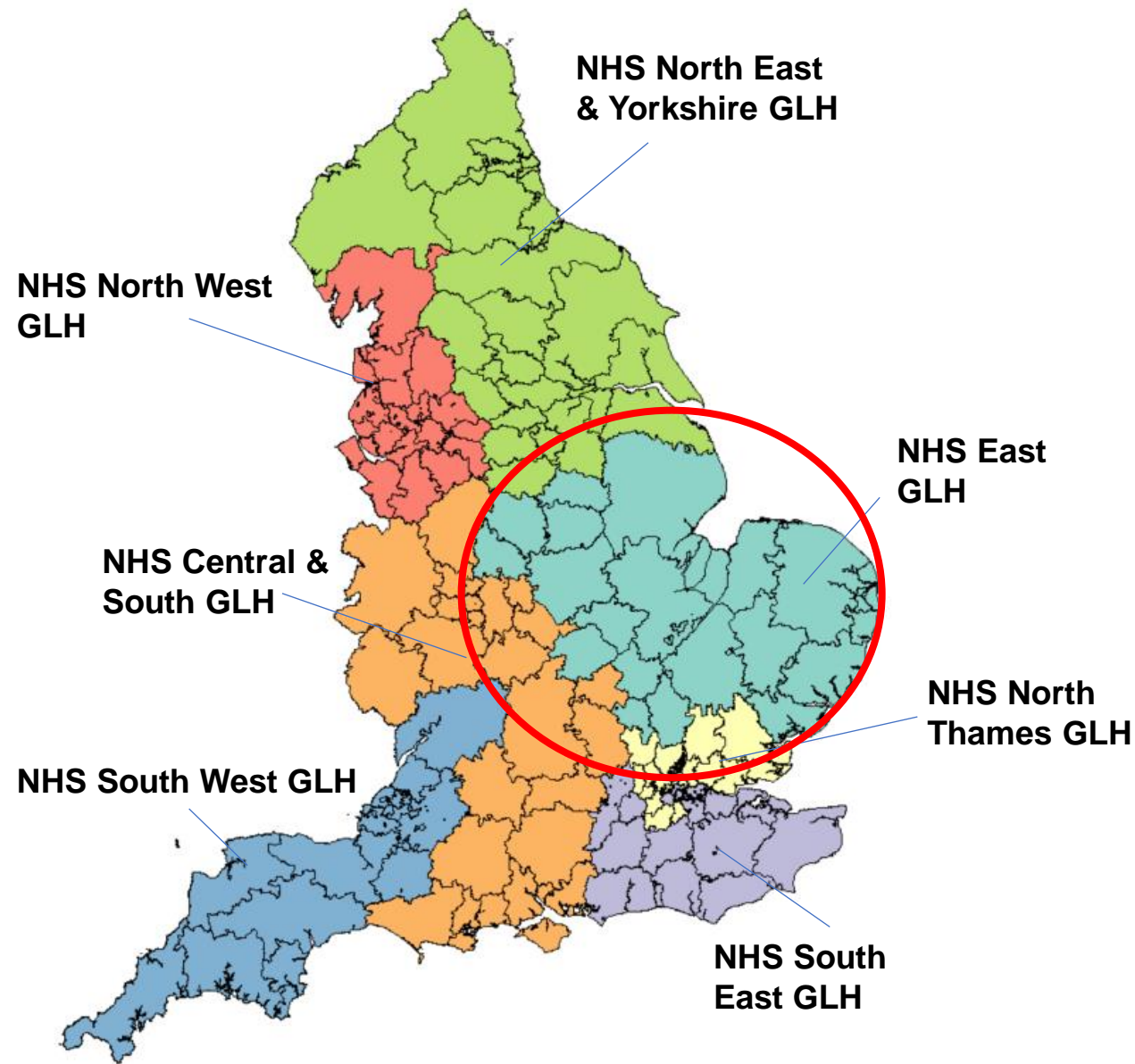
“Clinical utility of WGS
for Children with
Cancer”

Clinical utility of WGS for children with cancer

NHS Oncology Conference
Manchester, June 2022

Dr Sam Behjati
Group Leader & Wellcome Senior Research Fellow
Hon. Consultant Paediatric Oncologist

Genomic Laboratory Hubs (GLHs)



GLHs
NEY GLH
NW GLH
Central and South GLH
East GLH
North Thames GLH
South East GLH
South West GLH

Children's Cancer: Principal Treatment Centres (PTCs)



- 1 **Aberdeen**
Royal Aberdeen Children's Hospital
- 2 **Edinburgh**
Royal Hospital for Sick Children
- 3 **Glasgow**
Royal Hospital for Sick Children
- 4 **Newcastle-upon-Tyne**
Royal Victoria Hospital
- 5 **Leeds**
Leeds General Infirmary
- 6 **Sheffield**
Sheffield Children's Hospital
- 7 **Nottingham/Leicester**
East Midlands Integrated Service
at Queens Medical Centre and
Leicester Royal Infirmary
- 8 **Cambridge**
Addenbrooke's Hospital
- 9/10 **London**
Great Ormond Street
Children's Hospital and University College
London Hospital
- 11 **Sutton**
Royal Marsden Hospital
- 12 **Southampton**
Southampton General Hospital
- 13 **Bristol**
Bristol Hospital for Sick Children
- 14 **Cardiff**
Children's Hospital of Wales
- 15 **Oxford**
John Radcliffe Hospital
- 16 **Birmingham**
Birmingham Children's Hospital
- 17 **Liverpool**
Alder Hey Children's Hospital
- 18 **Manchester**
Royal Manchester Children's Hospital
- 19 **Dublin**
Our Lady's Children's Hospital, Crumlin
- 20 **Belfast**
Royal Belfast Hospital for Sick Children



Cambridge

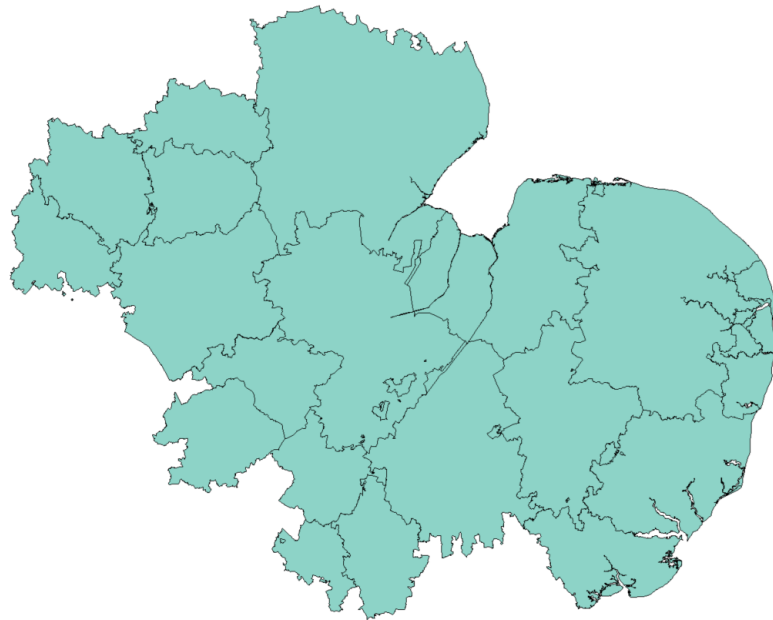


Nottingham



Leicester

East GLH



East Mids and East of England	
Trust Name	Trust Code
East and North Hertfordshire NHS Trust	RWH
University Hospitals of Derby and Burton NHS Foundation Trust	RTG
United Lincolnshire Hospitals NHS Trust	RWD
Sherwood Forest Hospitals NHS Foundation Trust	RK5
Nottingham University Hospitals NHS Trust	RX1
University Hospitals of Leicester NHS Trust	RWE
Kettering General Hospital NHS Foundation Trust	RNQ
Northampton General Hospital NHS Trust	RNS
Papworth Hospital NHS Foundation Trust	RGM
North West Anglia NHS Foundation Trust	RGN
Cambridge University Hospitals NHS Foundation Trust	RGT
Bedford Hospital NHS Trust	RC1
Luton and Dunstable University Hospital NHS Foundation Trust	RC9
East Suffolk and North Essex NHS Foundation Trust	RDE
West Suffolk NHS Foundation Trust	RGR
The Queen Elizabeth Hospital, King's Lynn, NHS Foundation Trust	RCX
James Paget University Hospitals NHS Foundation Trust	RGP
Norfolk and Norwich University Hospitals NHS Foundation Trust	RM1
Derbyshire Healthcare NHS Foundation Trust	RXM
Derbyshire Community Health Services NHS Foundation Trust	RY8
Lincolnshire Partnership NHS Foundation Trust	RP7
Lincolnshire Community Health Services NHS Trust	RY5
Nottinghamshire Healthcare NHS Foundation Trust	RHA
Leicestershire Partnership NHS Trust	RT5
Northamptonshire Healthcare NHS Foundation Trust	RP1
Cambridgeshire and Peterborough NHS Foundation Trust	RT1
Cambridgeshire Community Services NHS Trust	RYV
Norfolk and Suffolk NHS Foundation Trust	RMY
Norfolk Community Health And Care NHS Trust	RY3
North Essex Partnership University NHS Foundation Trust	R1L

100,000 Genomes Project: Paediatric Cancer WGS

- Aspirational, novel, unique programme
 - Did not evolve from within a clinical-academic institution
 - Uses WGS as 'entry-point': singular most informative 'agnostic' assay
 - Centrally-derived data, interpreted via Genomic Laboratory Hubs (GLHs)
- 2016-2018: 100,000 Genomes Project - pilot programme
- **East GLH:** clear clinical value above standard-of-care (SOC) assays
- Novel observations inform diagnosis, prognosis, and treatment
- 2021: NHS England commissioned WGS for children diagnosed with cancer
- Now >100 genomes in East GLH – early review demonstrates ongoing value

Paediatric Cancer WGS – Pilot Cohort

British Journal of Cancer

www.nature.com/bjc

ARTICLE OPEN

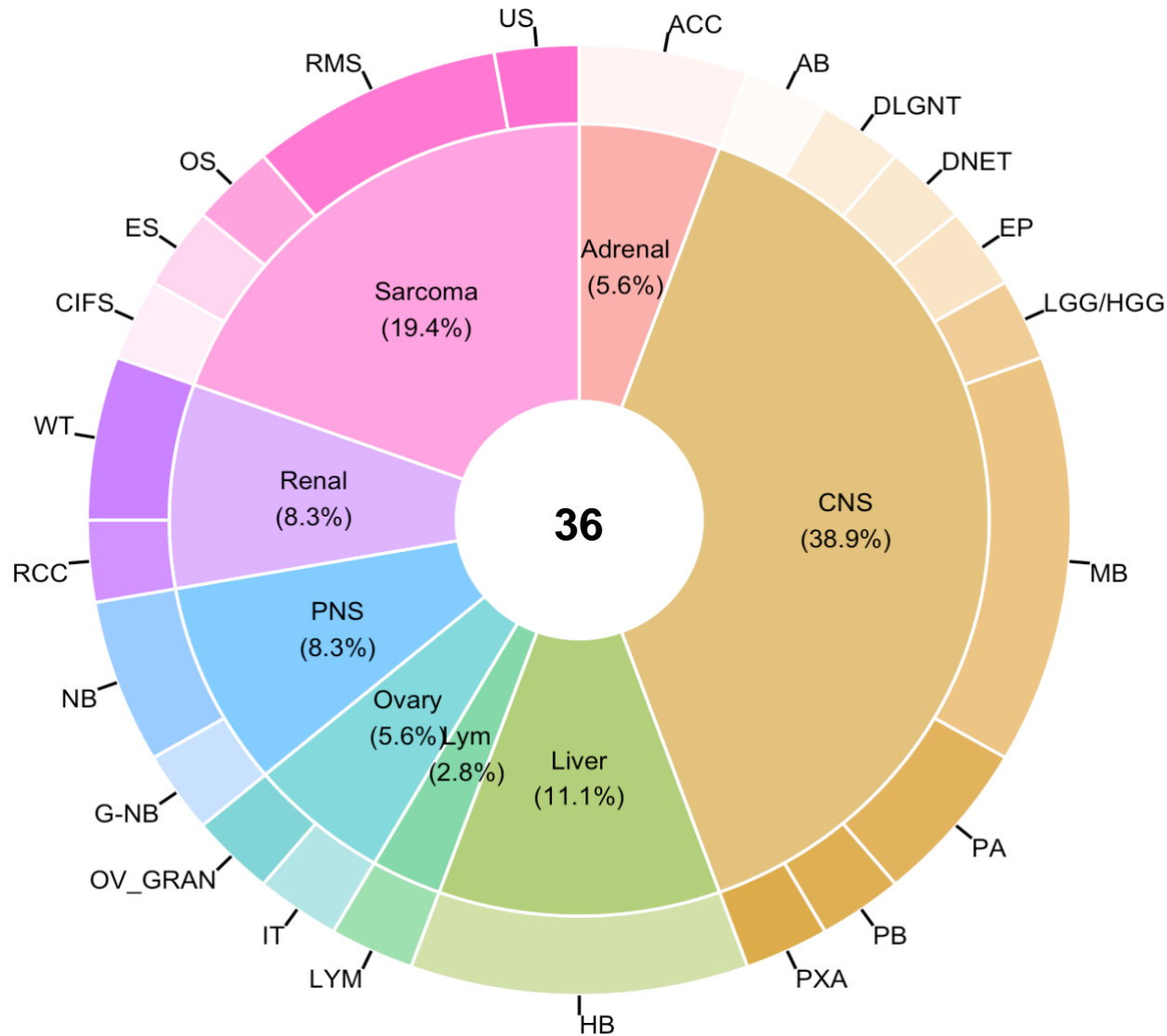


Genetics and Genomics

The NHS England 100,000 Genomes Project: feasibility and utility of centralised genome sequencing for children with cancer

Jamie Trotman¹, Ruth Armstrong², Helen Firth^{2,3}, Claire Trayers⁴, James Watkins^{1,4}, Kieren Allinson⁵, Thomas S. Jacques^{6,7}, James C. Nicholson⁸, G. A. Amos Burke⁸, Genomics England Research Consortium*, Sam Behjati^{3,8}, Matthew J. Murray^{8,9}, Catherine E. Hook^{4,9} and Patrick Tarpey¹

Paediatric Cancer WGS – Pilot Cohort

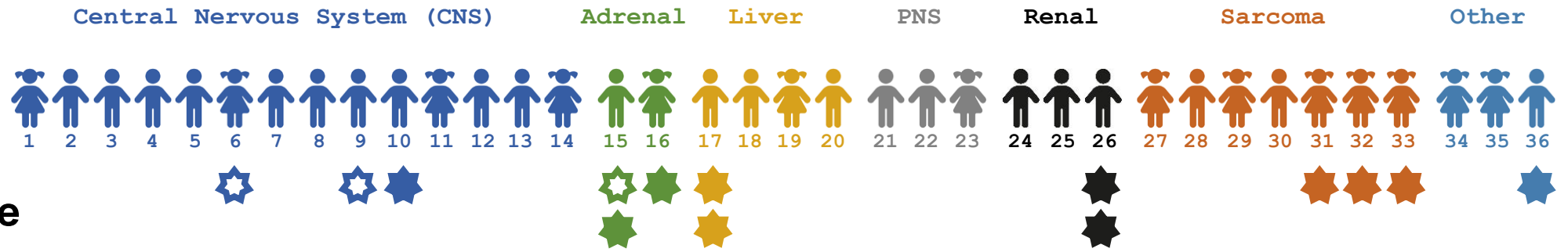


- 36 participants recruited in East GLH
- CNS (brain) and sarcoma malignancy most common (~60% of cohort)
- 23 different cancer types
- One-sixth of total paediatric cohort

Paediatric Cancer WGS – Pilot Cohort



Paediatric Cancer WGS – Pilot Cohort



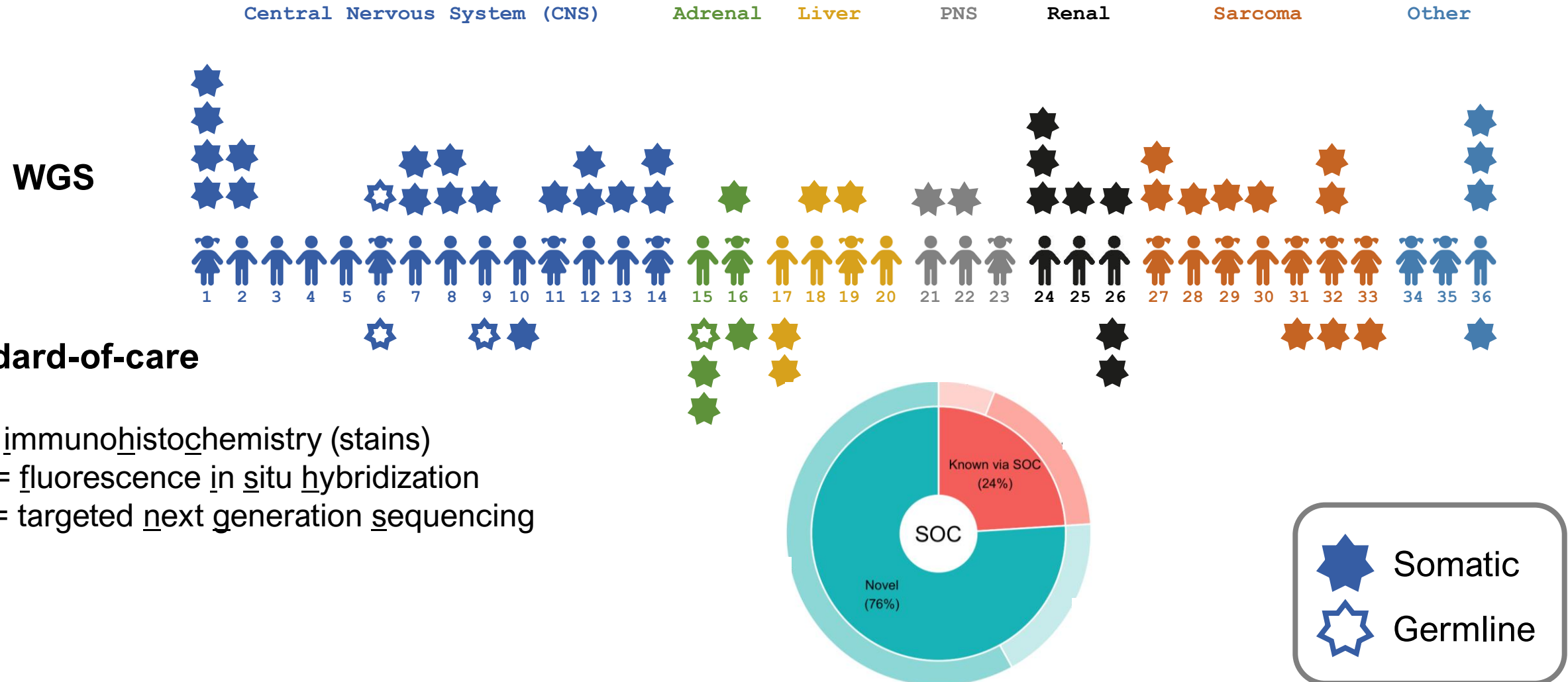
Standard-of-care

IHC = immunohistochemistry (stains)
FISH = fluorescence in situ hybridization
NGS = targeted next generation sequencing

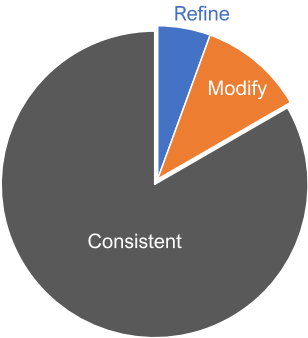
 Somatic

 Germline

Paediatric Cancer WGS – Pilot Cohort

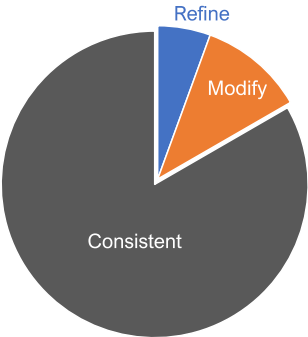
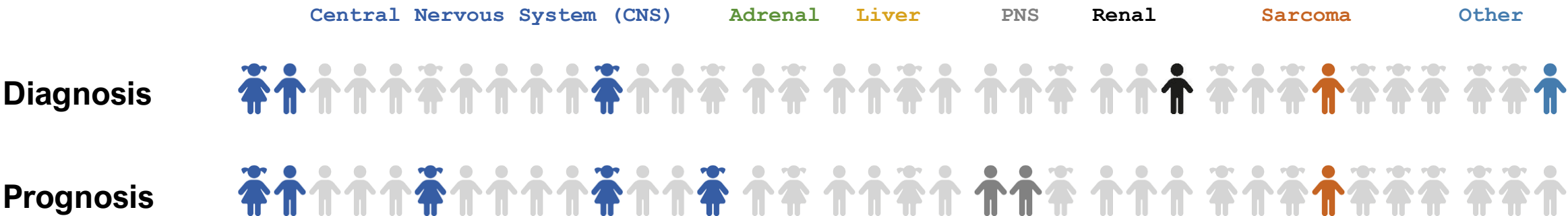


Paediatric Cancer WGS – Pilot Cohort

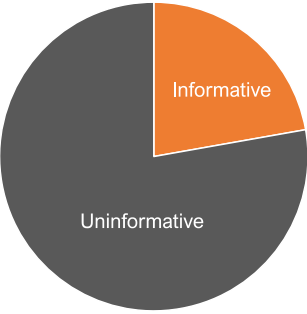


Diagnosis

Paediatric Cancer WGS – Pilot Cohort

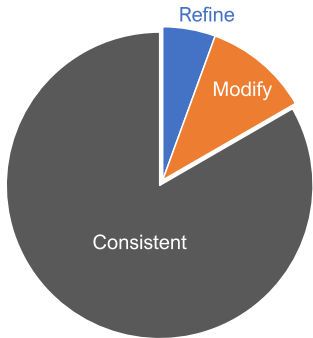
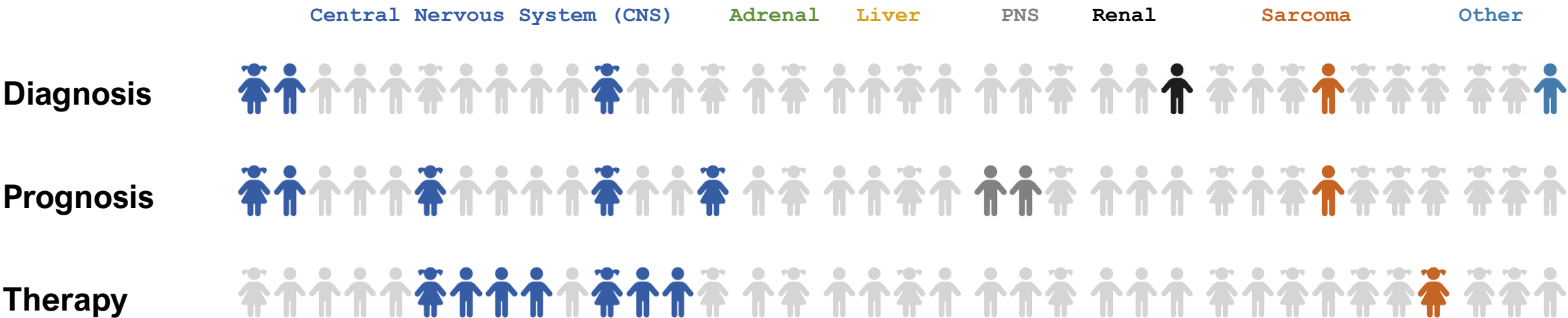


Diagnosis

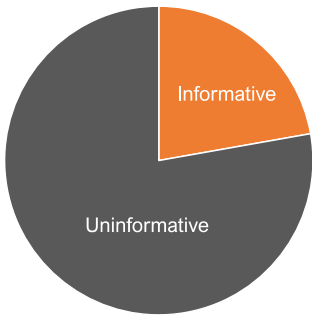


Prognosis

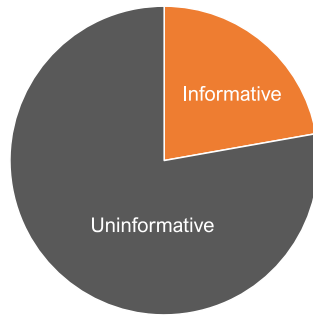
Paediatric Cancer WGS – Pilot Cohort



Diagnosis



Prognosis

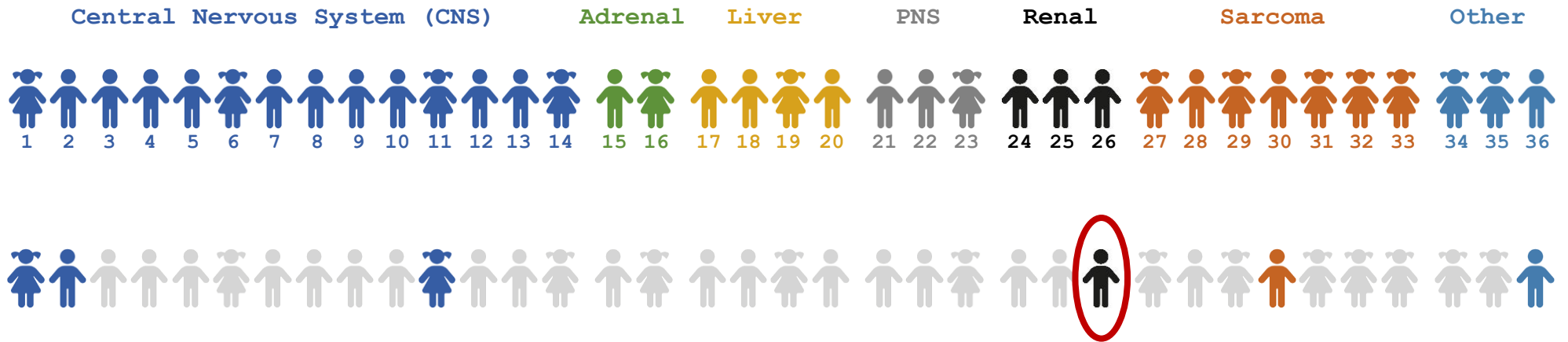


Therapy

Paediatric Cancer WGS – Utility



Paediatric Cancer WGS – Utility



Paediatric Cancer WGS – Utility



- Presented aged 10y with kidney tumour
- Accurate diagnosis difficult
- Pathology consistent with the more aggressive ‘adult-type’ renal cell carcinoma (RCC), not the ‘childhood-type’ Wilms tumour (WT)
- Clinical issue - treatment informed by diagnosis

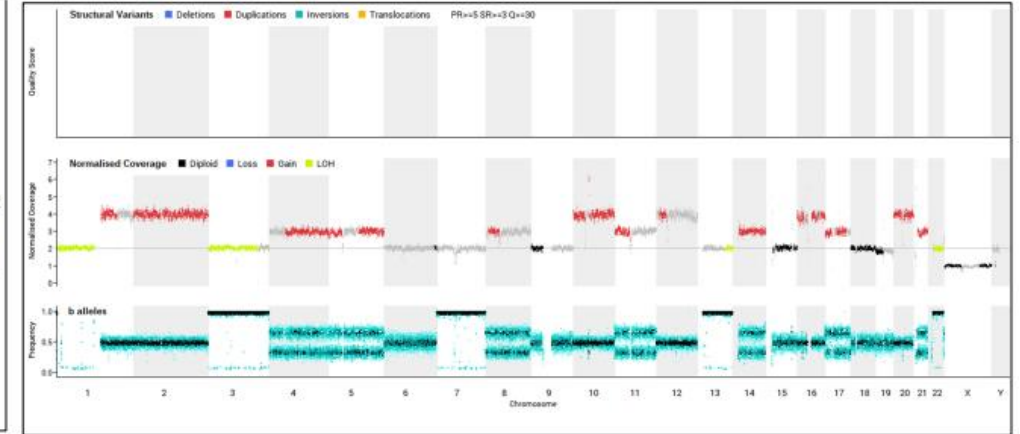
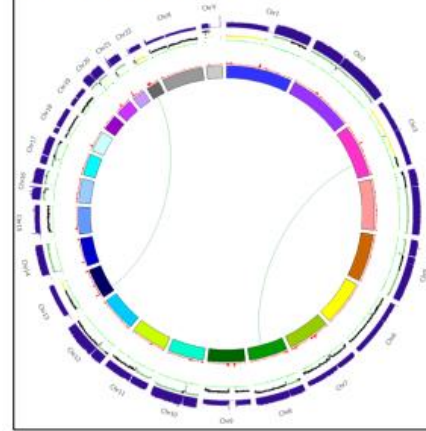
Diagnosis



Paediatric Cancer WGS – Utility



P2994 | Renal cell carcinoma (RCC)



Renal cell carcinoma (RCC)

- No classic markers i.e., no chromosome 3p loss, no concurrent 5q gain

Wilms tumour (WT)

- KRAS
- CTNNB1
- 11p LOH (chromosome 11p loss of heterozygosity)

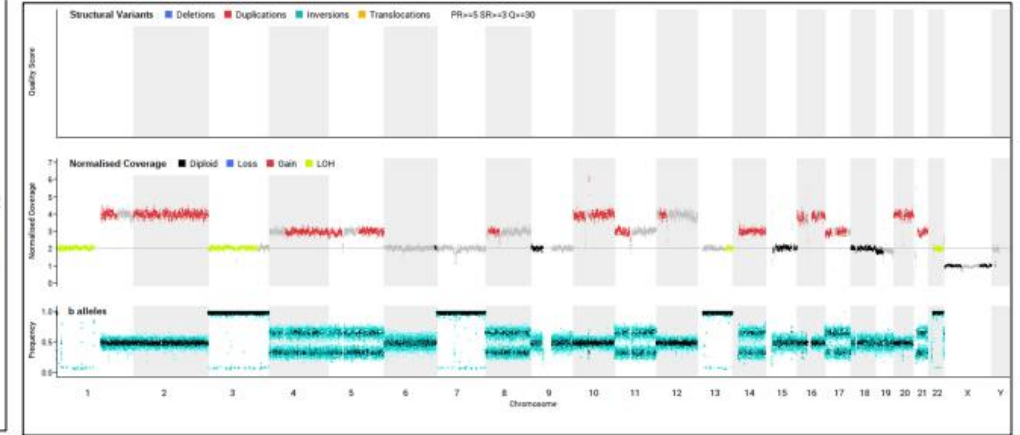
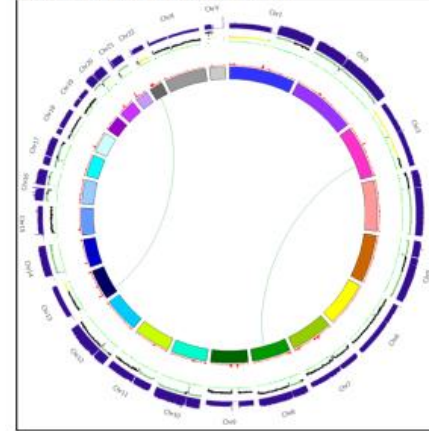
Diagnosis



Paediatric Cancer WGS – Utility



P2994 | Renal cell carcinoma (RCC)



Wilms tumour (WT) treatment

- Surgery, chemotherapy, radiotherapy
- Complete response with conventional therapy
- Remains well in clinical follow-up

Diagnosis



Paediatric Cancer WGS – Utility



Paediatric Cancer WGS – Utility



Prognosis



Paediatric Cancer WGS – Utility




Received: 29 July 2020 | Revised: 5 December 2020 | Accepted: 27 January 2021

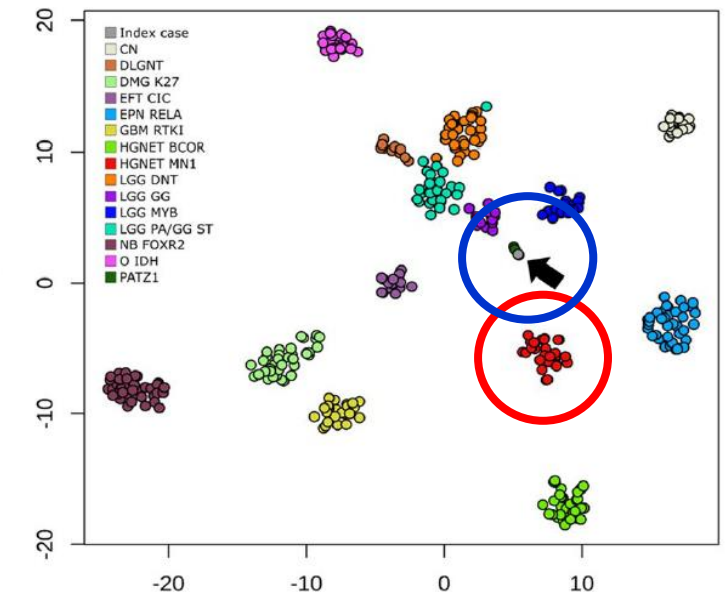
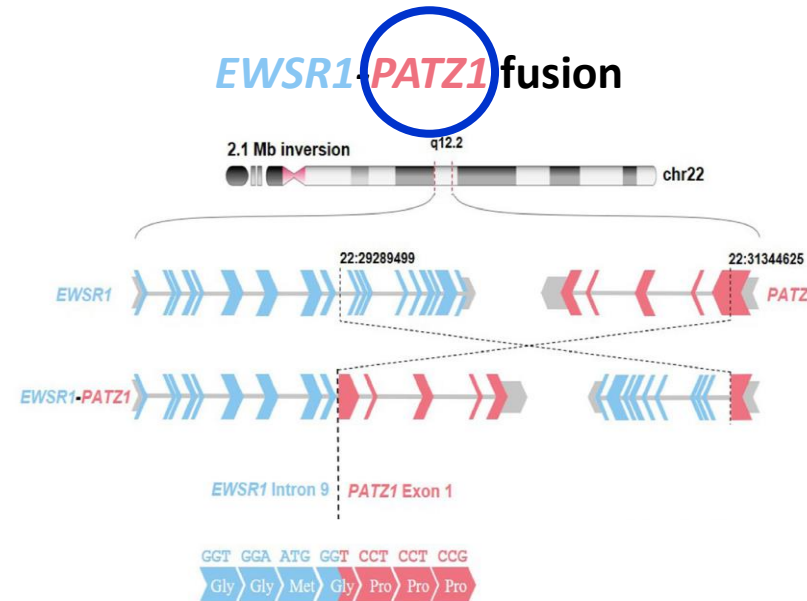
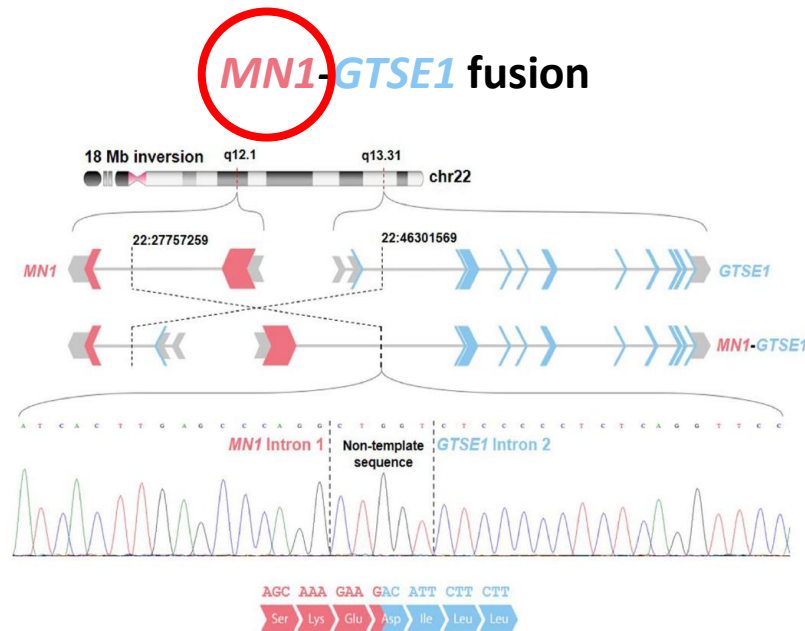
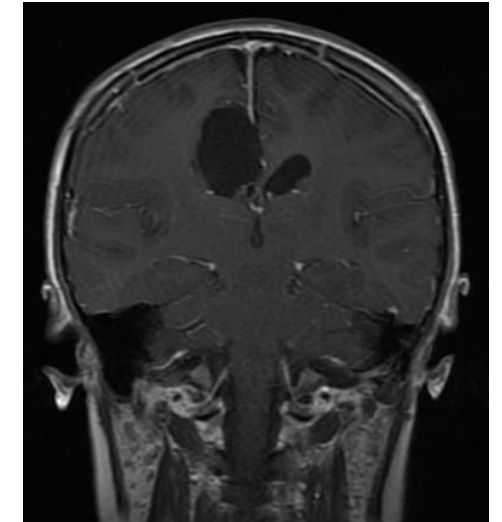
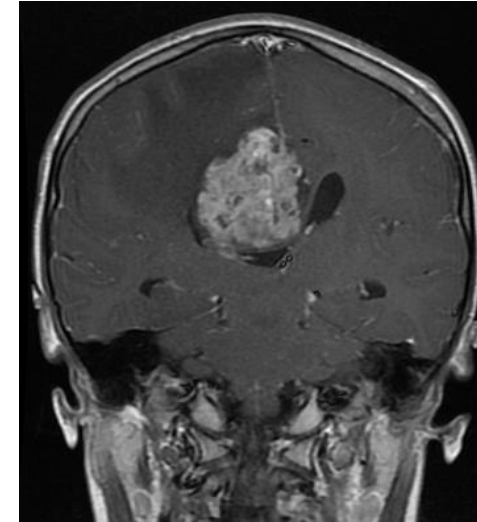
DOI: 10.1111/nan.12701

SCIENTIFIC CORRESPONDENCE

Neuropathology and
Applied Neurobiology WILEY
JOURNAL OF THE BRITISH NEUROPATHOLOGICAL SOCIETY

A rare case of paediatric astroblastoma with concomitant *MN1-GTSE1* and *EWSR1-PATZ1* gene fusions altering management

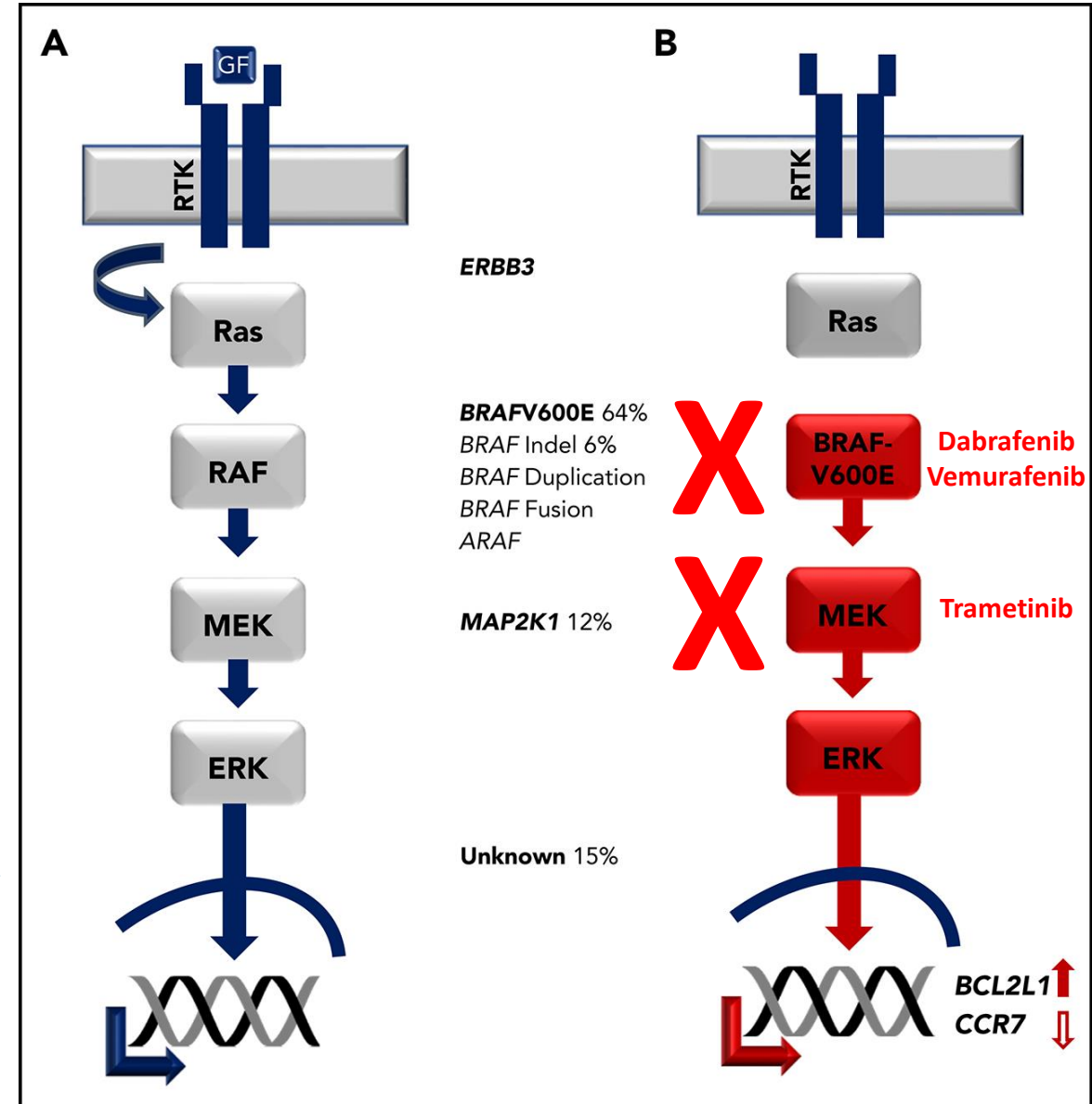
Karan R. Chadda¹ | Katherine Holland² | Daniel Scoffings³ | Andrew Dean⁴ |
Jessica C. Pickles⁵  | Sam Behjati^{1,6} | Thomas S. Jacques^{5,7}  | Jamie Trotman⁸ |
Patrick Tarpey⁸ | Kieren Allinson⁴ | Matthew J. Murray^{1,9}  |
Genomics England Research Consortium



Paediatric Cancer WGS – Utility

Langerhans cell histiocytosis (LCH)

- Immune system contains cells called histiocytes
- LCH - inflammatory lesions of abnormal histiocytes
- Spectrum of disease – e.g. bone, skin, gut, bone marrow
- Activation of MAPKinase RAS-RAF-MEK-ERK signaling
- BRAF V600E variant (SOC testing) in ~60% LCH cases
- Drug inhibitors of this signaling pathway available
- Two patients with LCH demonstrate treatment opportunity
 - 4-year-old female – BRAF V600E positive (+ve)
 - 4-month-old female – BRAF V600E negative (-ve)

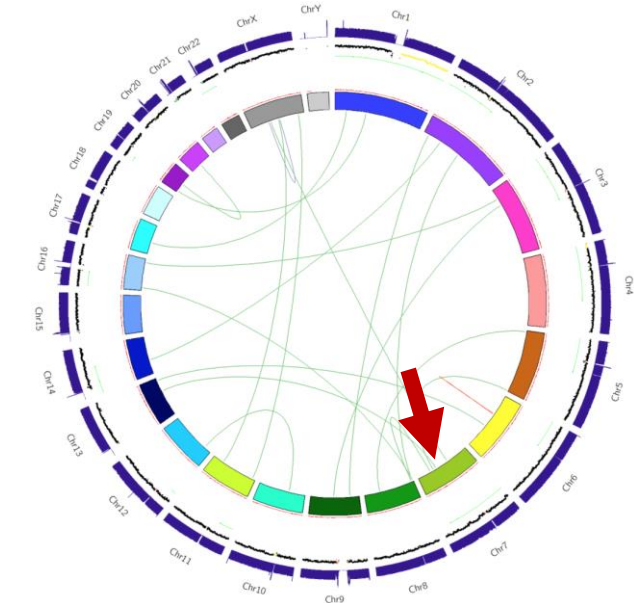
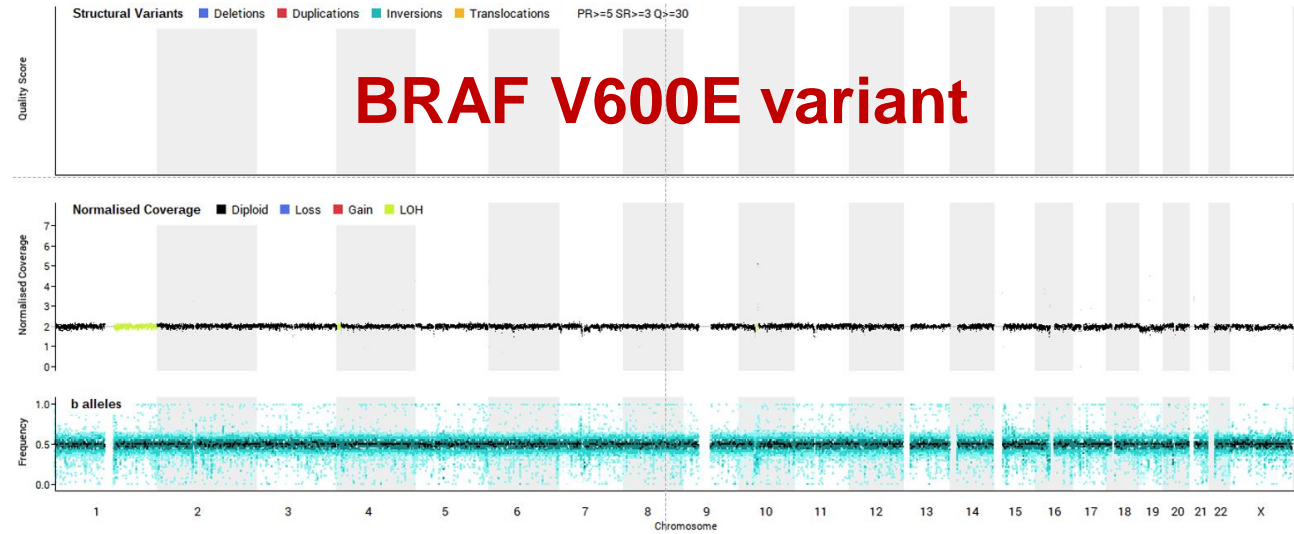


WGS21_78

4 years; female

LCH: single system (bone)

BRAF V600E +ve

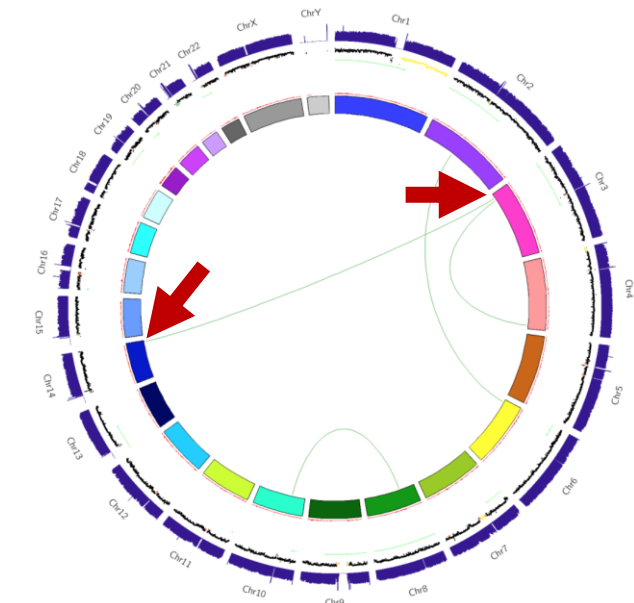
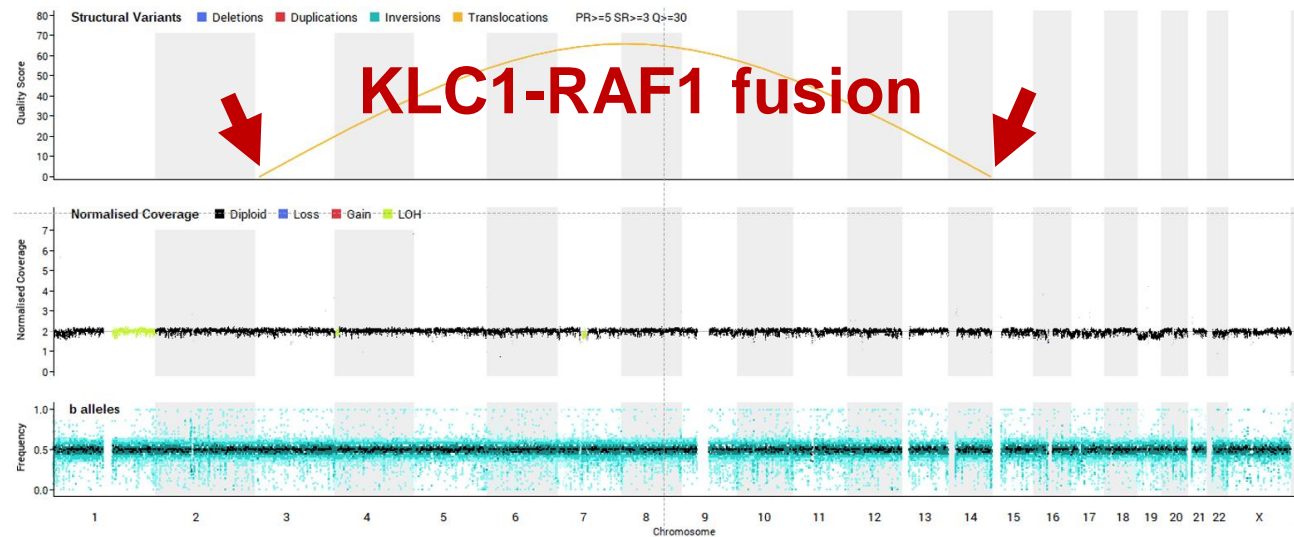


WGS22_9

4 months; female

LCH: single system (skin)

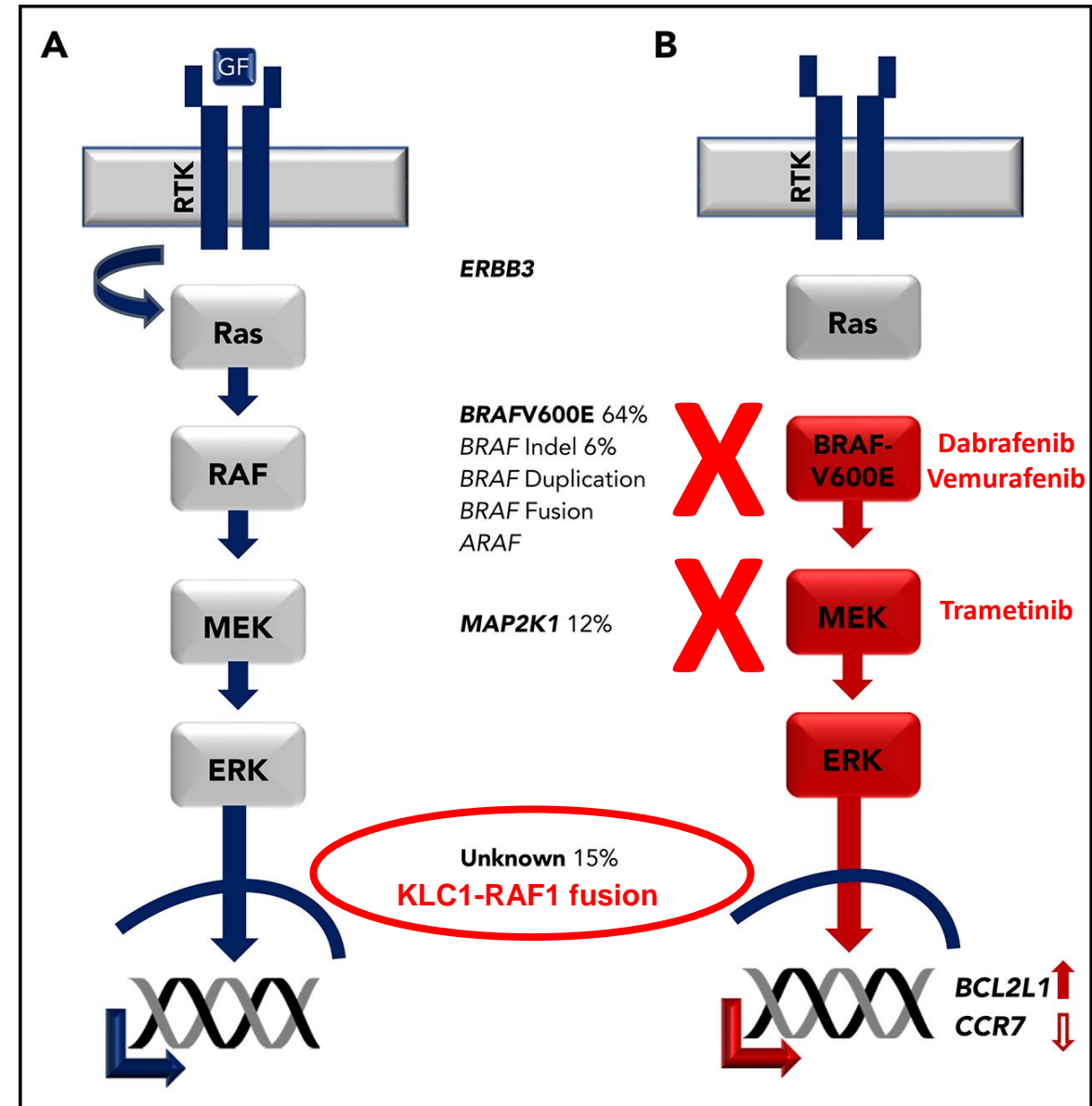
BRAF V600E -ve



100K Paediatric Cancer WGS – Utility

Langerhans cell histiocytosis (LCH)

- Immune system contains cells called histiocytes
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Paediatric Cancer WGS – Patient & Parent Perspective



“The test gave us a confirmed diagnosis for Aubrey after other tests had narrowed it down to one of two potential types of cancer. The result meant that the clinicians could be more confident as to the best treatment to use.”

Aubrey's mother Anna

BBC Breakfast News, 24th April 2022

Summary

- WGS is invaluable for children with cancer, allowing 'precision' medicine
- Molecular Tumour Boards (GTABs) critical for analysis and interpretation
- Major additional value over standard-of-care (SOC) assays
- Non-expected germline / inherited findings also identified in small proportion
- Extrapolation of 100,000 Genomes Project into routine service in East GLH
- Need to ensure the widest, most equitable access for all children with cancer

What are we doing now?

- In Cambridge we offer WGS to **every** child
- Uptake increasing across centres
- Globally the NHS WGS programme for childhood cancer is the most advanced molecular profiling effort

Acknowledgements

Pathology

Dr Liz Hook

Dr Claire Trayers

Dr Kieren Allison

Dr James Watkins

Prof Nicholas Coleman

Dr Dominic O'Donovan

Paediatric Haematology and Oncology

Dr Aditi Vedi

Dr Gemma Barnard

Dr Shivani Bailey

Dr Charlotte Burns

Dr Anne Kelly

Dr Emmy Dickens

Dr Michael Gattens

Dr Amos Burke

Dr James Nicholson

Prof Matthew Murray

East GLH

Mr Jamie Trotman

Dr Patrick Tarpey – Lead Scientist

Clinical Genetics

Dr Ruth Armstrong

Dr Helen Firth

GOSH

Prof Thomas Jacques

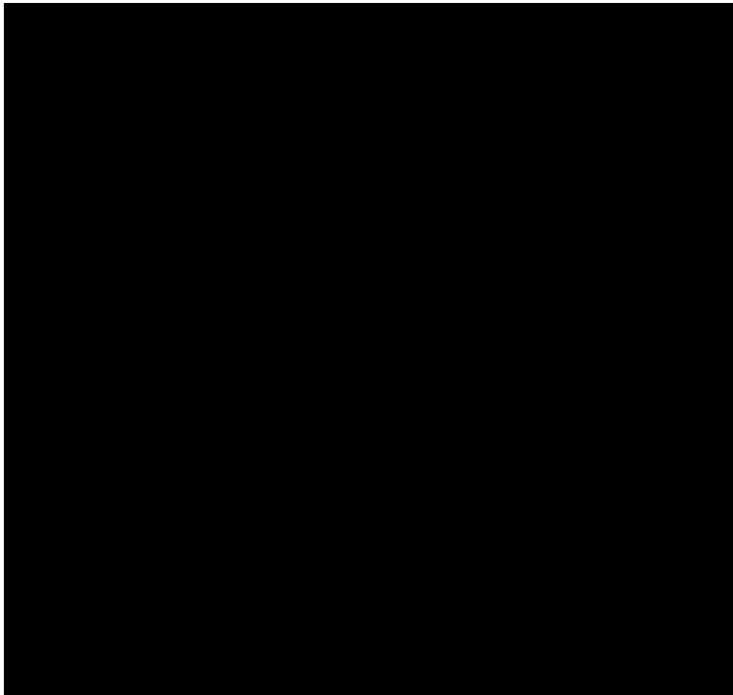
Patients and their Parents / Families



UP NEXT...



SPEAKING NOW



I will be
discussing...

“Clinical utility of WGS
for Children with
Cancer”

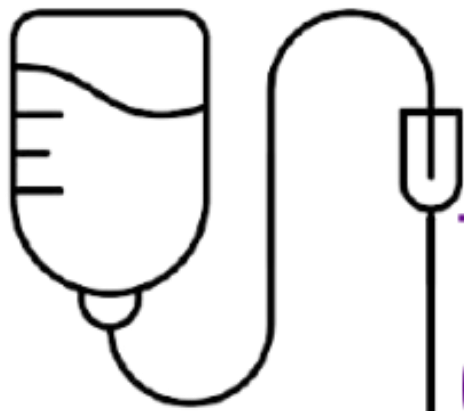
Sam Behjati

Group Leader
Wellcome Sanger Institute



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UP NEXT...



Pascoe
since 1895

SPEAKING NOW



Hüseyin Sahinbas

MD
Pascoe Healthcare

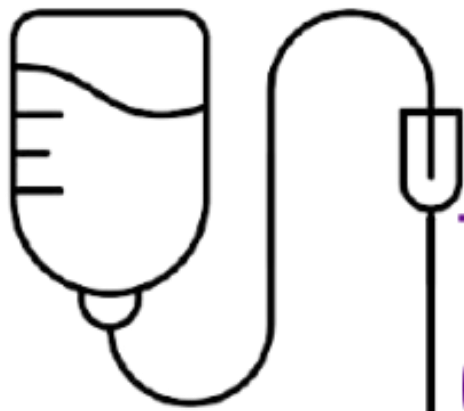
I will be discussing...

“Case Study of HDVC in
Cancer Treatment and
Clinical Outcomes”



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Q&A PANEL



James Martin

Lead Pharmacist -
Oncology & QA Services
The London Clinic



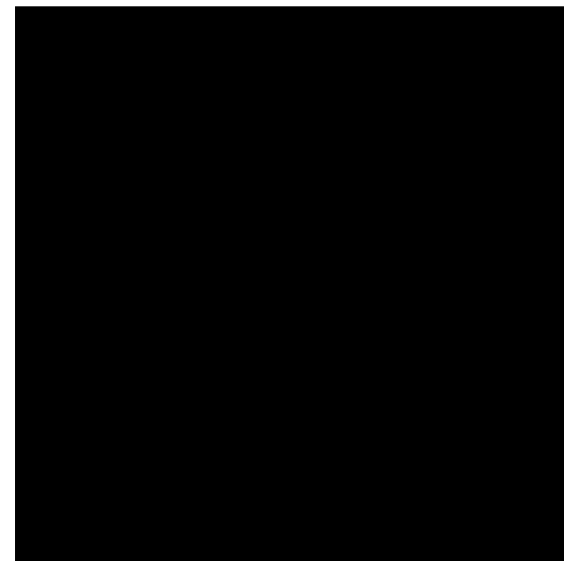
Sam Behjati

Group Leader
Wellcome Sanger Institute



Hüseyin Sahinbas

MD
Pascoe Healthcare



Name

Title



The NHS Oncology Conference 2022



NETWORKING & LUNCH

Chairs Afternoon Address



Nathan Nagel

CEO
FRATREM GROUP
LTD

SPEAKING NOW



Professor Tara Rampal

Director Kent & Medway Prehab Consultant Anaesthetist
Princess Royal University Hospital

I will be
discussing...
“Tele Prehabilitation in
Cancer – Innovation in
Supported Self
Management”

SPEAKING NOW



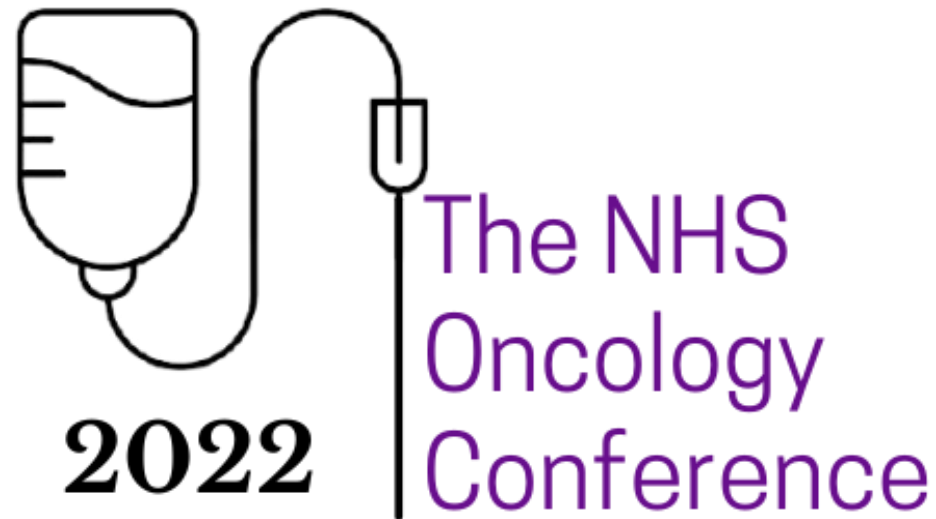
Professor Andrew Wardley

CEO & Medical Director
Outreach Research & Innovation Group Ltd

I will be
discussing...
“Challenges of Cancer
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THANKS FOR ATTENDING



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