

Annual Review 2019



*Together, we're finding
answers to cancer.*

Supported by



What we do

Since Cancer Trials Ireland was established in 1996, more than 15,000 patients have participated in over 350 of its trials. Almost all cancer treating specialists in Ireland are members of Cancer Trials Ireland.

The organisation's trials are carried out in 14 hospital-based Cancer Trials Units (CTUs) across the country, supported by a central team of clinical researchers, project managers, data managers and other experts. As well as managing its own in-house academic trials, Cancer Trials Ireland also works with global pharmaceutical companies and international collaborative research groups, which generates substantial inward investment and access to innovative treatments for cancer patients.

Cancer is a global health issue. The World Health Organisation reports that cancer is the second leading cause of death globally and is responsible for an

estimated 9.6 million deaths in 2018. Globally, about 1 in 6 deaths is due to cancer.

According to the 2019 Annual Report from the National Cancer Registry of Ireland (NCRI), cancer is the most common cause of death in Ireland, accounting for almost 31% of deaths in 2016. The approximate annual average of deaths from invasive cancer occurred from 2014-2016 and was 9,020. It is estimated that about 35,440 invasive cancers were diagnosed annually in 2017, 2018 and 2019 in Ireland.

Taking the ageing population into account, NCRI projections (2019) show cancer rates have stabilised or even declined in recent years. Nevertheless, projected population growth and ageing in Ireland will result in a substantial increase in the number of cancer cases in the coming decades, potentially doubling from current levels by 2045.

Vision & Mission

The Board rotates at the AGM every year as per the Constitution. The Board is chaired by Dr. Jonathan Westrup, appointed in 2014 and he is a strategy and governance expert. The Board meets 5 times per year and permanent agenda items include reports from Clinical Executive Committee and Audit Committee

The vision at Cancer Trials Ireland is focused on one primary purpose. To provide every patient with cancer access to high-quality and potentially life altering cancer trials and make Ireland a highly attractive location to open cancer trials. Our mission is to discover new diagnostics and treatments that will extend and enhance the lives of the millions of people who are diagnosed with cancer each year.

In order to achieve this vision, Cancer Trials Ireland must undertake translational and clinical cancer trials which investigate all disease areas and it must have in place the organisational capability to do so.

The 5 strategic pillars are the key to enable Cancer Trials Ireland to achieve this vision and mission:

1. Governance
2. Profile
3. Funding Model
4. Operational Capabilities
5. Clinical Capabilities

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2019 at a glance

In 2019, approximately 26% of the open trials are in-house academic trials (2018: 20%) funded by the grants received from the Health Research Board and the Irish Cancer Society. 45% (2018: 41%) of these open trials involved collaboration with cancer research groups and/or are Investigator Initiated Studies which are funded through pharmaceutical companies. The 29% balance of open trials are run by international pharmaceutical companies in Irish hospitals where staff at the General Central Office do limited work and receive little or no support. However, to capture a complete picture of cancer clinical trials in Ireland, we adopt these trials into our portfolio.

During 2019, the 11 hospital based cancer trials research units we fund directly (plus the 5 research units linked to these hospitals) were working on 295 cancer trials involving more than 6,000 patients. All the trials involved a highly cooperative effort between investigators, research teams in each hospital based research unit and the staff at our central office.

Of the 90 trials that were open and recruiting patients during 2019:

- 26% were **In-house** academic trials (which Cancer Trials Ireland initiates, manages, sponsors and monitors) and are generally funded by the grants received from the Health Research Board (HRB) and the Irish Cancer Society or pharmaceutical companies.
- 45% were **Collaborative** trials which involve working closely with other cancer research groups around the world.
- 29% were **Industry** trials which were initiated and managed by pharmaceutical companies and adopted into our trials portfolio.

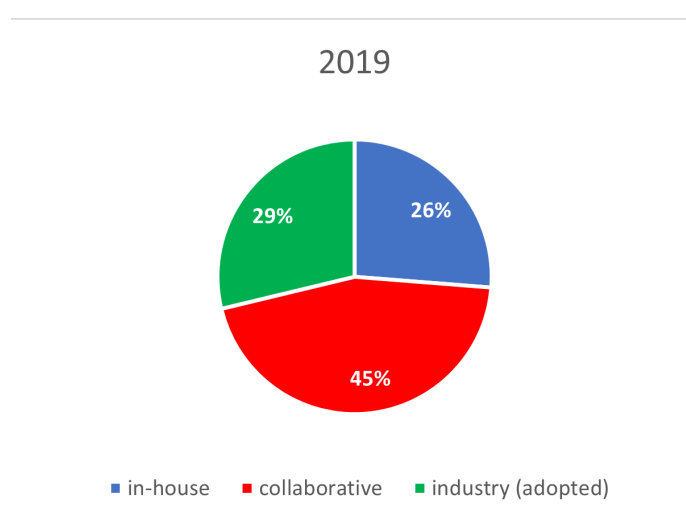


Fig 1: % of Open trials which were In-house, Collaborative and Industry trials.

There were 13 articles published in peer-reviewed journals and 8 oral and poster abstract conference presentations based on the findings of trials in which Members of Cancer Trials Ireland are, or have been, involved.

We were involved in 64 collaborations with pharmaceutical companies, collaborative groups and universities around the world.

Membership, which is open to Medical oncologists, Radiation oncologists, Surgical oncologists, Haematologists and Research Specialists was 505, with 33 new Members admitted during 2019. Membership includes seven affiliated universities, and 14 major affiliated hospital-based research units, which together treat more than 20,000 people with cancer annually in Ireland.

Chairman's message



Dr. Jonathan Westrup

I am delighted to introduce our Annual Review for 2019.

I would like to say a sincere word of thanks to all members of the Board who give their time and valuable expertise voluntarily and generously to advancing our fundamental purpose which is to provide people who have cancer with access to potentially life enhancing cancer trials, and make Ireland a highly attractive location to open cancer trials.

I would like to thank our CEO, leadership team, operations team and our central office staff, all of whom are committed to exceptional standards of care and professionalism.

I would like to thank our clinical leadership and their support teams that are very busy across the country planning, initiating and running high quality trials.

I would like to thank our funders and donors, the Irish community through the HRB and the Irish Cancer Society. I would also like to acknowledge the many other groups and organisations that we engage with and which support the development of Ireland's potential as a key European hub for cancer trials.

I would like to thank the many international collaborative groups and pharmaceutical companies with whom we work closely for their ongoing and valuable support.

Finally, I would like to express a particular thanks to people who have cancer and their families for making such an enormous community contribution by taking part in cancer trials and helping the collective effort to take us closer toward improved diagnostics and treatments that will save and enhance the lives of millions of others around the world during the decades ahead.

Our Board

The Board rotates at the AGM every year as per the Constitution. The Board is chaired by Dr. Jonathan Westrup, appointed in 2014 and he is a strategy and governance expert. The Board meets 5 times per year and permanent agenda items include reports from Clinical Executive Committee and Audit Committee, Governance, Strategy, Conflict of Interest Declarations and Finance. In 2019, the Board met 5 times. (2018: 5)

The members of the Board are qualified to hold their position and represent a range of skills; governance, patient advocate, clinical oncologists, radiation oncologists, industry representative, finance and National Cancer and Control Programme (NCCP) representative. In 2018 the Board appointed a new subgroup called the Patient Consultant's Committee (PCC) set up to integrate the patient voice and experience in the governance structure of the organization.

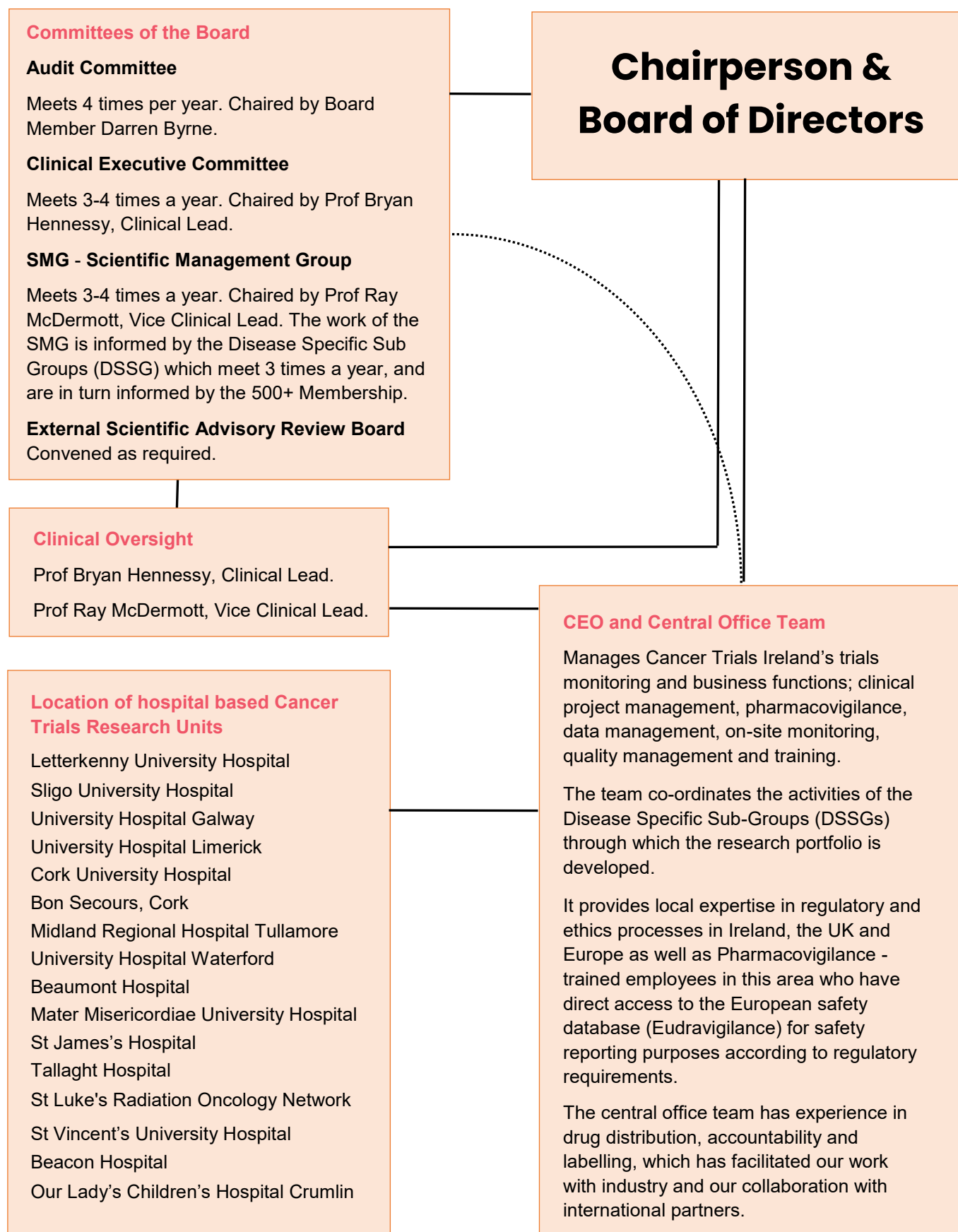
The Clinical Executive Committee (CEC), Scientific Management Group and Disease Specific Sub-Groups monitor progress on the ongoing clinical trials, make decisions on the adoption of new trials to the portfolio and the CEC reports to the Board of Directors through its Chair; Prof. Bryan Hennessy, Clinical Lead.

The Audit Committee is a subcommittee of the Board and was established in the summer of 2016 and met 4 times in 2019 (2018: 3) Darren Byrne is the chair of the Audit Committee and member of the Board of Directors.

- Dr. Jonathan Westrup (Chairman)
- Darren Byrne
- Dr. Linda Coate (Resigned 24th January 2019)
- Dr. Jerome Coffey
- Dr. Leisha Daly
- Berchmans Gannon
- Diane Hanly
- Prof. Bryan Hennessy
- Dr Paul Kelly (Resigned 15th March 2019)
- Prof. Ray McDermott
- Dr. Robert O'Connor
- Evelyn O'Rourke
- Prof John Crown (Appointed 7th November 2019)

Secretary: Robert Cosgrave

How we are organised



From our CEO



Eibhlín Mulroe

The simplicity of our purpose, to provide people who have cancer with access to potentially life enhancing cancer trials, belies the complexity of cancer trials. Each trial consists of many different and connected processes and procedures which must all dovetail together. Ensuring this occurs efficiently at all times involves a vast array of highly experienced and committed professionals all of whom are focused on the well being of people who have cancer.

This work has been achieved thanks to the commitment and support of Members across the country, coupled with the expertise of our highly committed team at central office and the teams in hospital-based research units across the country. We are all passionate in our collective pursuit of breakthrough findings.

The work of our central office team has been invaluable in the development of Ireland's capability to undertake cancer trials on par with the best in the world. While this work often occurs in the background and is unnoticed, it is work that is of pivotal importance. Our central office team not only enables each trial to successfully navigate the complex journey from idea, to approval, to opening, to patient recruitment, to data analysis, and results publication, it also provides important leadership at each stage. Similarly, the research teams across the country are pivotal to making sure that trials run smoothly and the experience of participants is the best it can be.

I would like to thank you all for your commitment, and the Board for its direction, advice and support.

From our Clinical Lead



Prof Bryan Hennessy

Over the past 20 years we have built a huge reservoir of scientific knowledge and expertise within our cancer trials research network.

As a result, our network is unique. It enables trial sponsors access Ireland's entire population through one point with the supports of highly qualified teams across the country. We are eager to work with colleagues at home and abroad who would like to access this network to take us closer to finding answers to cancer.

During 2019 we committed to initiating and supporting more investigator led studies, broaden our impact across more cancer types and grow the opportunities to work with international collaborative groups and pharmaceutical companies. These ambitions are consistent with many others working in the field.

We opened a number of exciting trials during the year. These include PEACE-3, ETOP Alert, PantHera, IMPASSION 030, DICE, COLOSSUS, IRONMAN, tBRCA study, NRG-GU005, ATHENA, PORTEC 4a, ENGOT -cx8 and SOLSTICE. Our Members and their teams have been published in top line publications such as The New England Journal of Medicine and have had abstracts and posters presented at prestigious international conferences such as ASCO and ASH.

I would like to take this opportunity to thank all consultants, doctors, nurses and staff in our research units around the country and all our central office staff in Dublin for their dedication and commitment to achieving the highest standards in cancer research. We appreciate the opportunity to work with the pharmaceutical industry and wish to develop further our relationship with it during the years ahead.

Finally I want to thank the international collaborative groups that we work with - we are working with these groups on some very exciting trials from across the world and leading the European leg of some trials. This reflects the high regard for our cancer trials teams across the country.

Achievements & Performance 2019

- In 2019, Cancer Trials Ireland facilitated a HRB-appointed International Review Committee (IRC) to review the scientific performance of Cancer Trials Ireland and to make recommendations that could validate/inform the design of a new funding model. In parallel, BDO were commissioned by the HRB to conduct a review of Cancer Trials Ireland governance, management and financial processes to enable the HRB team to plan for the future cancer trials call. As a result, the HRB committed to an extension of the current grant cycle (2016 - 2018) to the end of 2021 and will fund a new grant call from January 2022 for 5 years.
- Cancer Trials Ireland ran the 4th successful externally funded Just Ask Your Doctor public information campaign communicating with the public and members on radio and media interviews on the value of cancer trials.
- Cancer Trials Ireland advocacy activities in 2019 included making representations to the Department of Health, NCCP and the Minister for Health's office;
- In 2019, for the second year running, a group of volunteers came together to offer their support to Cancer Trials Ireland and held a lunch to raise awareness and funds to help Cancer Trials Ireland's important work. Some of the volunteers are related to Directors of the company and others are people with an interest in our mission to do more clinical trials for people with cancer. Patients who took part in some of our trials were represented by friends and family and were the biggest supporters at the event. The success of the event is an incredible testament to the work of the team at Cancer Trials Ireland.
- Cancer Trials Ireland facilitated regular Stakeholder Engagement and Patient Advocate Advisory Group (PAAG) meetings in 2019
- Pat Smullen and Horseracing Ireland approached Cancer Trials Ireland in the summer of 2019 to help raise funding for Cancer Trials Ireland and, in particular, pancreatic cancer trials. The horseracing community came together at the Longines Champions Weekend event in September 2019. The public and friends of Horse Racing Ireland attending the events over the weekend raised over €2.5million.
- The increased revenue raised has enabled the organisation to build capacity and establish new trial options in pancreatic cancer



Pictured at the presentation of prizes at the Longines Champions Weekend are (L-R): Ms Eibhlín Mulroe (CEO, Cancer Trials Ireland); AP McCoy, winning jockey; Karen & John Lavery (owners)



Performance metrics

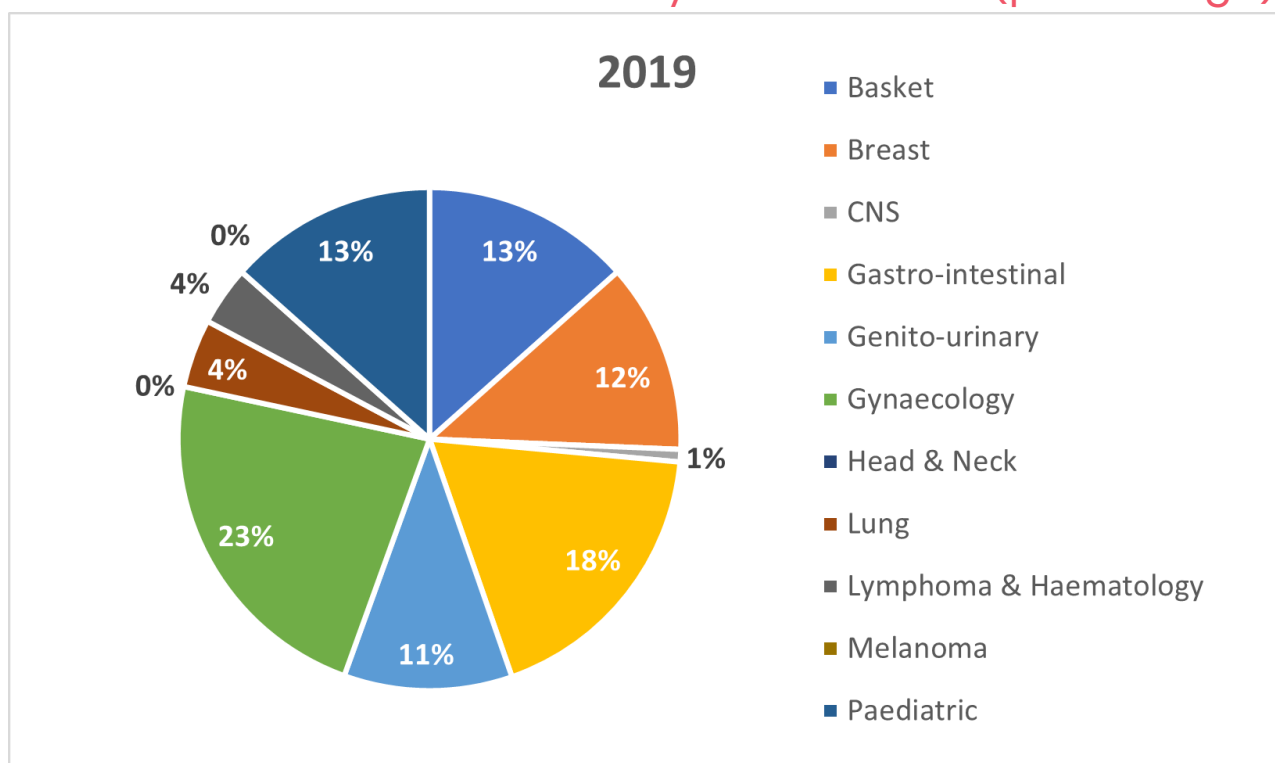
- **In line with best practice among similar international collaborative research groups, we use a series of recognised metrics to measure our performance.**
- **Our performance against these metrics is outlined on pages 9 to 24.**

No	Performance Metric	Explanation
1	Accrual	Refers to the number of patients recruited to a trial.
2	Trials portfolio	The number and type of trials in our portfolio.
3	Cancer trials research unit monitoring	Monitoring activity of cancer trials research units includes a broad range of activities conducted from trial commencement until close-out.
4	Audits	The numbers of days spent preparing for and conducting audits and follow-up activity as well as active participation in external sponsor audits and regulatory inspections.
5	Training	The number of training courses conducted and attended.
6	Plans for future period	How Cancer Trials Ireland will adapt to funding changes.
7	Participation	Attendances at scientific meetings, International Meetings, and trials introduced and developed by local Principal Investigators (PIs).
8	Membership	The number of Members of Cancer Trials Ireland.
9	Publications	The number of publications in peer-reviewed journals and abstracts accepted at top level international.

Accruals

- This metric records the number of patients recruited, or accrued, to all type of trials by disease area.

By disease area (percentage)



By disease area (accrual numbers)

Disease Area	2019
Basket	67
Breast	61
CNS	4
Gastro-intestinal	91
Genito-urinary	54
Gynaecology	114
Head & Neck	0
Lung	22
Lymphoma & Haematology	19
Melanoma	0
Paediatric	67
Total	499

Patients were also accrued to a breast cancer biobank.	2019
Biobanking (breast)	520

Trials portfolio

This metric records the number and type of trials open and in development during 2019. In-house trials and Collaborative trials (which involve research organisations in other countries) were an important area of focus during 2019. Both In-house trials (which are funded by either HRB, Irish Cancer Society and other supports and/or directly by pharmaceutical companies) and Collaborative trials, are fully supported by our central office clinical, professional, operations and administrative teams. The third type of trials included in our portfolio are Industry trials. While these trials are carried out in the various cancer trials research units, central office staff are minimally involved.

Table 1

Disease Area	2017	2018	2019
Basket	6	6	5
Breast	68	54	57
CNS	5	5	5
Gastro-intestinal	33	43	40
Genito-urinary	44	44	46
Gynaecology	8	13	16
Head & Neck	8	9	11
Lung	45	36	34
Lymphoma & Haematology	31	27	31
Melanoma	11	10	12
Paediatric	29	40	38
Total No of active trials*	288	287	295

Table 1 shows the total number of trials active in a particular disease group. 'Active' means trials in development, open, in treatment, in follow-up.

Table 2

Disease Area	2017	2018	2019
Basket	3	4	4
Breast**	21	14	13
CNS	2	1	2
Gastro-intestinal	14	8	10
Genito-urinary	18	16	12
Gynaecology	7	5	7
Head & Neck	3	4	0
Lung	15	13	10
Lymphoma & Haematology	12	7	6
Melanoma	5	3	0
Paediatric	20	26	26
Total No of recruiting trials	120	101	90

Table 2 shows the total number of trials open to accrual only.

Collaborations with international research groups

A large part of the 2019 portfolio of studies in development, open and in follow up studies originate from successful collaborations with international groups.

- **ABCSG** - Austrian Breast and Colorectal Cancer Study Group
- **AIEOP** (Italy) – Associazione Italiana di Ematologia e Oncologia
- **ANZUP** - The Australian and New Zealand Urogenital and Prostate (ANZUP) Cancer Trials Group
- **BC Cancer** - British Columbia cancer
- **BIG** - Breast International Group
- **Bristol Royal Hospital**
- **CRUK** - Cancer Research UK
- **CCRI** (Austria) – St Anna Children's Cancer research Institute

(collaborations continued)

- **Children's Cancer Research Institute Vienna** (Austria)
- **COG** – Children's Oncology Group
- **DCOG** – Dutch Childhood Oncology Group
- **Dutch Collaborative Group**
- **EBMT** – European Society for Blood and Marrow Transplantation
- **ECOG - ACRIN - ECOG** (Eastern Cooperative Oncology) and ACRIN (American College of Radiology Imaging Network) Research Group
- **EMN** – European Myeloma Network
- **ENGOT** - The European Network for Gynaecological Oncological Trial groups
- **EORTC** - European Organisation for Research and Treatment of Cancer
- **Erasmus Medical Centre**
- **ETOP** - European Thoracic Oncology Platform
- **European Rhabdoid Registry**
- **Fundacion Para la Investigacion Hospital Universitario La Fe**
- **GBG** - German Breast Group
- **GCIG** – Gynaecologic Cancer intergroup
- **GEICAM** - Grupo Español de Investigación en Cáncer de Mama
- **GERCOR** - Groupe Coopérateur Multidisciplinaire en Oncologie
- **Gustave Roussy Cancer**
- **HOVON** - Hemato-Oncologie voor Volwassenen Nederland
- **IBCSG** - International Breast Cancer Study Group
- **ITCC** - Innovative Therapies for Children with Cancer
- **LLR** – Leukemia & Lymphoma Research
- **Michelangelo** - Fondazione Michelangelo
- **Movember**
- **NCRN** - National Cancer Research Network UK (incorporating Cancer Research UK (CRUK), Clinical Trials Research Unit (CTRU) & Medical Research Council (MRC))
- **NRG Oncology** – incorporating National Surgical Adjuvant Breast and Bowel Project (NSABP); the Radiation Therapy Oncology Group (RTOG); the Gynecologic Oncology Group (GOG).PrECOG—Sister Foundation of ECOG
- **PCCTC** - The prostate Cancer Clinical Trials Consortium
- **Royal Marsden NHS Foundation Trust**
- **Scandinavian Prostate Cancer Group**
- **SIOPE** - European Society for Paediatric Oncology
- **SWOG** - Southwest Oncology Group
- **TRIO** - Translational Research in Oncology

(collaborations continued)

- **TROG** - Trans-Tasman Radiation Oncology Group
- **UNICANCER** (France)
- **UCL** - University College London

Specific collaborations during 2019

ANZUP – The Australian New Zealand Urogenital and Prostate Cancer Trials Group

We started an important new collaboration with ANZUP in 2015. We are the EU sponsor on two large international phase III prostate trials (ENZAMET and ENZARAD). Both trials were open to accrual in research units in Ireland, the UK and selected sites in Europe through our partnership with the EORTC. The ENZAMET study is now in follow up, while accrual to ENZARAD was still open in 2019. In addition, discussion for another large prostate cancer trial, DASL, have started and we hope to be able to open this study early 2021.

NRG Oncology

The NSABP (National Surgical Adjuvant Breast and Bowel Project), RTOG (Radiation Therapy Oncology Group) and GOG (Gynaecologic Oncology Group) merged to form NRG Oncology in 2014. As we were an active member of NSABP we retained our membership in the new group.

In 2019 we had the NSABP B-51 trial, a randomized phase III radiotherapy trial in breast cancer and the NRG – GU005, a radiotherapy trial in prostate cancer open for accrual.

GEICAM

GEICAM is a Spanish non-profit organisation which specialises in Breast Cancer clinical trials and Cancer Trials Ireland was able to open their FLIPPER trial for hormone receptor-positive metastatic breast cancer for Irish patients.

BIG

Since 2016 Cancer Trials Ireland has a successful collaboration with the Breast International Group and was able to bring several studies into Ireland. In 2019, we were able to secure our participation in the EXPERT BIG trial, a phase 3 randomized radiotherapy trial for breast cancer, which we hope to be able to open in 2020.

ETOP

ETOP specialises in European lung cancer research collaboration and we had already several trials available for Irish patients. In 2019, the ETOP ALERT study, a single arm phase 2 study for advanced non-small lung cancer was open for accrual in Ireland.

NCRN

In 2019 we collaborated with MRC on the ICON8B study, a continuation of the ICON8 study for high-risk stage II-III ovarian cancer.

In addition, we opened the large phase 3, double-blind, placebo-controlled ADD-Aspirin trial, a basket study assessing the effects of aspirin on disease recurrence and survival after primary therapy in non-metastatic tumours including breast, colorectal, gastro-oesophageal, and prostate cancer

Michelangelo

Fondazione Michelangelo is a non-profit Italian oncology research group; leading the NeoTRIPaPDL1 study, of a PDL1-directed antibody in triple negative breast cancer in the neoadjuvant setting in combination with nav-paclitaxel and carboplatin. The study closed to accrual during the year and is now in the follow up phase.

Industry collaborations

Since the inception of ICORG, now Cancer Trials Ireland, we have established clinical research partnerships with many global pharmaceutical and biotechnology companies. In 2019 the study portfolio included studies from AbbVie, ArQule Pharma, Astellas, Astra Zeneca, Bayer, Boehringer Ingelheim, Bristol Myers Squibb, Dacchi, Glaxo Smith Kline, Incyte, LOXO, Merck/Serono, MSD, Nordiv, Novartis, Puma Biotechnology, Radius Pharma, Regeneron, Roche and Puma. The breadth of studies includes early phase I/II clinical trials of novel anti-cancer agents through to large registration trials for more established treatments.

Cancer trials research unit monitoring

Monitoring of clinical trials is a requirement of ICH GCP and national regulations. Monitoring activity is carried out on a study by study basis both in the individual cancer research unit and remotely. Each study undergoes a risk analysis, prior to the study being open to patients, which determines the level of monitoring activity and rationale for the chosen monitoring strategy. The risk-based monitoring plan contains detailed information on how the study will be monitored from the time of study initiation to study closure. It can include the possibility of remote monitoring and close out which, with the support of the hospital, allows for the clinical trial to be monitored without the need to have staff visit the hospital.

The monitoring level can be a combination of on-site and centralised monitoring activities as appropriate to the risk inherent to the type of study and other identified risks. Triggers for decreased or more frequent targeted on-site monitoring visits can be identified in the monitoring plan. The monitoring level can also be determined on a site-by-site basis depending on the previous or unknown experience of the investigational site.

BELOW: The site team at Mullingar Regional Hospital, Mullingar



BELOW: The site team at the Mater Hospital, Dublin



Audits

Number of days spent preparing for and conducting audits and follow-up activity as well as active participation in external sponsor and third party audits and regulatory inspections both at our central office and at cancer trials research units around the country.

Audit Type	Preparation (days)	Audit (days)	Follow-up (days)
Regulatory Authority (HPRA) Inspection of Cancer Trials Ireland Central office	77	10.75	21.75
Regulatory Authority (HPRA) Inspection of Cancer Trials Ireland research units	8.5	0	0.5
External Sponsor audit of Cancer Trials Ireland (central office)	7.5	3.25	1.25
3rd party audit of Cancer Trials Ireland (central office)	18.5	7.75	9.5
Cancer Trials Ireland internal audit	28	42.25	4.5
Cancer Trials Ireland audit of 3rd party	1.5	4.5	5.25
Total	141	68.5	42.75

Staff training (internal)

Training courses conducted by the central office training team along with attendance by central office staff and investigators/ investigational staff at research units.

Type of training	Number of sessions	Number of attendees (Central office staff)	Number of attendees (Research Unit staff)
Quality and Training Overview	8	22	-
Ethics and Regulatory Overview	3	6	-
Disease specific training	1	25	-
RECIST 1.1 training	4	21	15
RECIST Data Validation training	1	6	-
Chief/ Co-Chief Investigator Training	4	-	6
SOP training	2	45	-
Data Protection Training	1	37	-
Pharmacovigilance Training	4	59	-
Full day introductory GCP training (Sponsor/ Investigator & Site Staff	1	7	10
GCP Basic Training for Radiologists	1	-	6
GCP Basic/Refresher Training (Sponsor staff)	3	34	-
GCP Basic/Refresher Training (Investigational research unit)	1	-	23
MedDRA Coding	1	4	-
EMA Guideline on the content, management and archiving of the clinical trial master file	1	6	-
Cancer Trials Ireland Staff workshop (Mission/Vision/ Culture of the Organisation, Performance Management, Audit/Inspection Compliance	1	43	-
Patient Experience of Clinical Trials	1	23	-
Close Out Visit Training	1	9	-

Staff training (external)

Significant external training courses attended by staff.

Date	Course	Attendees
02-May-2019	Leading Ireland's Future Together (LIFT) Facilitator Training (Themes: Listening, Positive Attitude, Respect)	All Staff
23-May-2019	Research Quality Association (RQA): Ireland Regional Forum	Quality and Training Manager
05-Sep-2019	Improving Writing for Patients Webinar, TOPRA (The Organisation for Professionals in Regulatory Affairs)	Ethics and Regulatory Coordinator
11-Sep-2019	MHRA GCP symposium (non-commercial)	Quality and Training Manager
25-Sep-2019	Achieve an Efficient Clinical Research Operation- Complion Webinar	Compliance and Quality Coordinator
17-Oct-2019	Key Messages from Brexit and Data Protection Conference – Brexit Institute	Quality Assurance Auditor
05-Nov-2019	Research Quality Association (RQA): Manageable Risk	Quality and Training Manager
06-08 Nov 2019	3 rd EU QA Conference, Technology & Innovation in quality: A Brave New World?	Quality Assurance Auditor
25-Nov-2019	Dept. of Health: GDPR and Health Research Regulations	Quality and Training Manager
27-Nov-2019	Design Thinking – Unlock your Growth Potential – Lecture and Masterclass – Ryan Academy	Head of Research and Business Development

Pharmacovigilance

Pharmacovigilance activity	Number
SAEs received and processed by Cancer Trials Ireland * from MOM reviewed studies	194
Collaborative SAEs received (non inhouse studies) SAEs received through Cancer Therapy Evaluation Program's Adverse Expedited Reporting System (CTEP AERS) (includes follow-ups) / Med-Watch studies	37
SUSARs Entered onto Eudravigilance Database by Cancer Trials Ireland	94
PhV SOPs updated	0
Annual Development Safety Update Reports (produced in-house) distributed to relevant Ethics Committees and Competent Authorities by Cancer Trials Ireland	12
Annual Development Safety Update Reports (received from another sponsor) distributed to relevant Ethics Committees and Competent Authorities by Cancer Trials Ireland	10
Safety and clinical database reconciliations	31

Participation in conferences & meetings

Date	Meeting	Location
Feb 14-16	ASCO-GU Cancers Symposium	San Francisco
Feb-19	Trinity Translational Medicine Institute- Precision Medicine Cancer Symposium	Trinity Centre for Health Sciences, St James's Hospital
March 20-23	Intern Breast Cancer Conf, St Gallen	Vienna
March 23-24	IBCSG Annual Meeting	Barcelona
March 23-24	IBCSG Trial Management Workshop	Barcelona
April 3	Edge CTMS Conference	Birmingham
April 5	HOVON Conference	Schipol
April 4-5	John Fitzpatrick GU Cancer Conference	Aviva Stadium
April 10	Patient Voice in Cancer Research	UCD
April 26-30	ESTRO	Milan, Italy
May 08-11	Radiation Oncology Annual Update Meeting 2019	Naas
May 17-18	Irish SRS & SBRT Symposium	Dublin
May 24	BCNI Symposium	Cork
May 31 - June 4	ASCO	Chicago
Sept 3	BREAST-PREDICT Precision Oncology: From Discovery to Implementation (Research Symposium)	Dublin
Sept 6	Breakthrough Cancer Research Meeting	Cork
Sep 24-25	11th Trinity College Dublin International Cancer Conference	St James Hospital/Trinity
Sep 27 - Oct 1	ESMO	Barcelona, Spain
Sept 29	SJH: Research update on Oesophageal Cancer	St James Hospital
Oct 4	HOVON Conference	Amsterdam
Oct 5	IIRRT (Irish Institute of Radiography and Radiation Therapy) Conference attendance	Dublin
Oct 14	Uncovering the Value of Real-World Data for Blood Cancer	Dublin
Oct 17	ENGOT conference	Madrid
Oct 19	CCRT Conference	Dublin
Oct 30-Nov 1	GCIG Conference	Madrid
Nov 5	RQA seminar: Manageable Risk	
Nov 6-8	EU QA Conference	Dublin
Nov 7-9	Gathering around cancer	Croke Park, Dublin
Nov 8-9	ETOP Annual meeting	Amsterdam
Nov 13	Irish Health Research Forum Meeting <i>Working Across Health Services & Academia – Challenges and Solutions for Health Research</i> HRB-CRCI	Dublin
Nov 14	IRNN 12th Annual Conference	Cork
Nov 25	GDPR/ HRR Symposium	
Nov 26	Precision Oncology	UCD
Dec 6	TMRN: 5th Annual Trial Methodology Symposium	Dublin
Dec 6	Irish Melanoma Forum	Ireland

Plans for future period

Cancer Trials Ireland is hopefully well placed to succeed in the HRB call to be the Cancer Trials Network (2022-26). Given our track record of delivering clinical trial services and supports we plan to be successful in the bid. As the Cancer Clinical Trials Network we will continue to sponsor, oversee and support services to HRB hospital sites.

Cancer Trials Ireland has strengthened relationships with external organisations. including the HRB, Irish Cancer Society, National Cancer Control Programme (NCCP), Department of Health, the Clinical Research Facility Galway (CRFG), international collaborative groups, pharmaceutical companies, and other stakeholders such as the wider cancer research community, cancer patients and the public where possible.

The organisation will continue to act as an advocate for cancer trials and highlight its contribution not only in terms of fighting the battle against cancer but also its economic contribution.

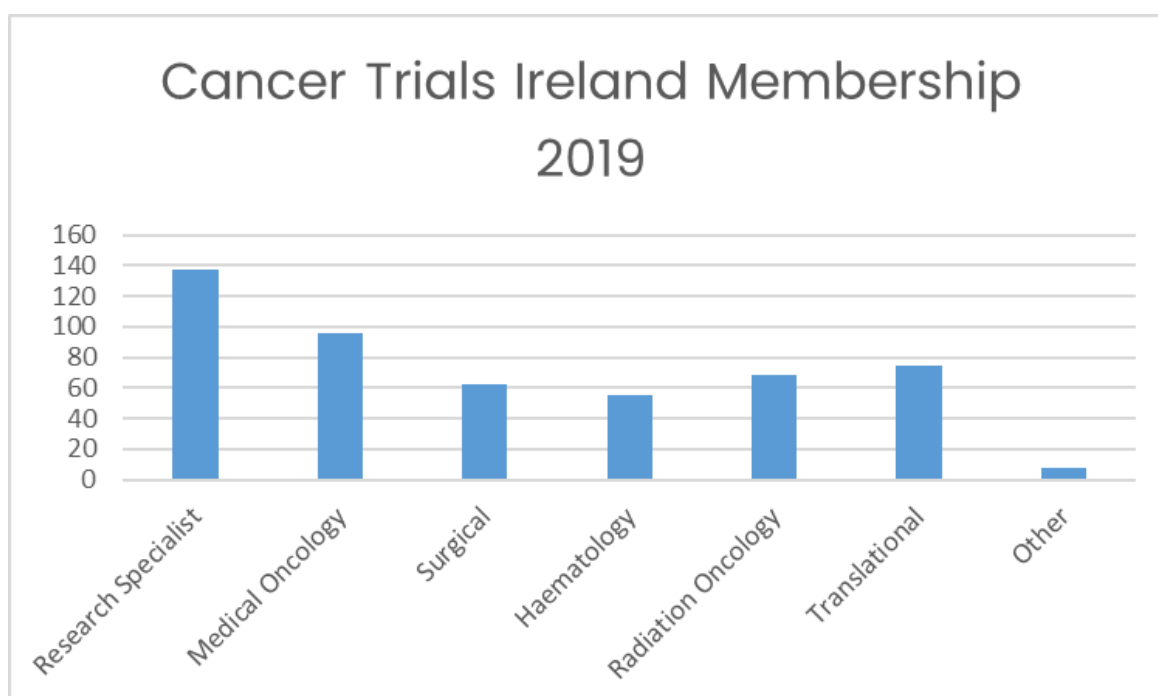
Membership

This metric records the number of registered Members of Cancer Trials Ireland.

Cancer Trials Ireland total membership on 31st December 2019 was 505. (33 new members joined during 2019).

During 2019 there were 234 Stakeholder members (this number is broken down between Patient Advocates and Industry) .

Type	No.
Research Specialist	137
Medical Oncology	96
Surgical	62
Haematology	55
Radiation Oncology	69
Translational	75
Other	8



Publications

This metric records the publications in peer-reviewed journals and abstracts accepted at top level international meetings based on the findings of trials the Members of Cancer Trials are, or have been, involved in.

Disease Sub Group	Peer Reviewed Journal Articles 2019	Abstracts: Poster/Oral Presentations 2019*
Basket	0	0
Breast	3	5
Gastrointestinal	0	0
Genitourinary	2	3
Gynaecological	2	0
Head and Neck	1	0
Lung	3	0
Lymphoma and Haematological	2	0
Melanoma	0	0
Total	13	8

*Compiled from approval for/notification of abstracts received by Cancer Trials Ireland from Investigators. Potentially additional abstracts have been presented.

Peer reviewed journal publications

*Compiled from approval for/notification of abstracts received by Cancer Trials Ireland from Investigators. Potentially additional abstracts have been presented.

Breast

Cancer Trials Ireland Study Number: short name. 08-10: TC-Avastin:

Gullo, G., A. J Eustace, A. Canonici, D. M Collins, M. J. Kennedy, L. Grogan, O. Breathnach, J. McCaffrey, M. Keane, M. J. Martin, R. Gupta, G. Leonard, M. O'Connor, P. M. Calvert, P. Donnellan, J. Walshe, E. McDermott, K. Scott, A. Hernando, I. Parker, D. W Murray, A. C O'Farrell, A. Maratha, P. Dicker, M. Rafferty, V. Murphy, N. O'Donovan, W. M Gallagher, B. Ky, D. Tryfonopoulos, B. Moulton, A. T Byrne and J. Crown (2019). "Pilot study of bevacizumab in combination with docetaxel and cyclophosphamide as adjuvant treatment for patients with early stage HER-2 negative breast cancer, including analysis of candidate circulating markers of cardiac toxicity: ICORG 08-10 trial." Ther Adv Med Oncol 11: 1758835919864236.

Cancer Trials Ireland Study Number: short name. 06-32: NSABP 42

Mamounas, E. P., H. Bandos, B. C. Lembersky, J. H. Jeong, C. E. Geyer, P. Rastogi, L. Fehrenbacher, M. L. Graham, S. K. Chia, A. M. Brufsky, J. M. Walshe, G. S. Soori, S. R. Dakhil, T. E. Seay, J. L. Wade, E. C. McCarron, S. Paik, S. M. Swain, D. L. Wickerham and N. Wolmark (2019). "Use of letrozole after aromatase inhibitor-based therapy in postmenopausal breast cancer (NRG Oncology/NSABP B-42): a randomised, double-blind, placebo-controlled, phase 3 trial." Lancet Oncol 20(1): 88-99.

Cancer Trials Ireland Study Number: short name. 01-04: BCIRG 005

Press, M. F., J. A. Seoane, C. Curtis, E. Quinaux, R. Guzman, G. Sauter, W. Eiermann, J. R. Mackey, N. Robert, T. Pienkowski, J. Crown, M. Martin, V. Valero, V. Bee, Y. Ma, I. Villalobos and D. J. Slamon (2019). "Assessment of ERBB2/HER2 Status in HER2-Equivocal Breast Cancers by FISH and 2013/2014 ASCO-CAP Guidelines." JAMA Oncol 5(3): 366-375.

Genitourinary

Cancer Trials Ireland Study Number: short name. 08-17: IMRT Prostate

Medipally, D. K. R., T. N. Q. Nguyen, J. Bryant, V. Untereiner, G. D. Sockalingum, D. Cullen, E. Noone, S. Bradshaw, M. Finn, M. Dunne, A. M. Shannon, J. Armstrong, F. M. Lyng and A. D. Meade (2019). "Monitoring Radiotherapeutic Response in Prostate Cancer Patients Using High Throughput FTIR Spectroscopy of Liquid Biopsies." *Cancers (Basel)* 11(7).

Cancer Trials Ireland Study Number: short name. 14-06: ANZUP ENZAMET Study

Davis, I. D., A. J. Martin, M. R. Stockler, S. Begbie, K. N. Chi, S. Chowdhury, X. Coskinas, M. Frydenberg, W. E. Hague, L. G. Horvath, A. M. Joshua, N. J. Lawrence, G. Marx, J. McCaffrey, R. McDermott, M. McJannett, S. A. North, F. Parnis, W. Parulekar, D. W. Pook, M. N. Reaume, S. K. Sandhu, A. Tan, T. H. Tan, A. Thomson, E. Tu, F. Vera-Badillo, S. G. Williams, S. Yip, A. Y. Zhang, R. R. Zielinski, C. J. Sweeney and E. T. I. a. t. A. a. N. Z. U. a. P. C. T. Group (2019). "Enzalutamide with Standard First-Line Therapy in Metastatic Prostate Cancer." *N Engl J Med* 381(2): 121-131.

Gynaecological

Cancer Trials Ireland Study Number: short name. 11-29: ICON 8B

Clamp, A. R., E. C. James, I. A. McNeish, A. Dean, J. W. Kim, D. M. O'Donnell, J. Hook, C. Coyle, S. Blagden, J. D. Brenton, R. Naik, T. Perren, S. Sundar, A. D. Cook, G. S. Gopalakrishnan, H. Gabra, R. Lord, G. Dark, H. M. Earl, M. Hall, S. Banerjee, R. M. Glasspool, R. Jones, S. Williams, A. M. Swart, S. Stenning, M. Parmar, R. Kaplan and J. A. Ledermann (2019). "Weekly dose-dense chemotherapy in first-line epithelial ovarian, fallopian tube, or primary peritoneal carcinoma treatment (ICON8): primary progression free survival analysis results from a GCIG phase 3 randomised controlled trial." *Lancet* 394(10214): 2084-2095.

Cancer Trials Ireland Study Number: short name. 09-03: AGO-OVAR 16 (GSK: VEG110655)

Vergote, I., A. du Bois, A. Floquet, J. Rau, J. W. Kim, J. M. Del Campo, M. Friedlander, S. Pignata, K. Fujiwara, N. Colombo, M. R. Mirza, B. J. Monk, I. Tsibulak, P. M. Calvert, T. J. Herzog, L. C. Hanker, J. Meunier, J. Y. Lee, A. Bologna, M. J. Carrasco-Alfonso and P. Harter (2019). "Overall survival results of AGO-OVAR16: A phase 3 study of maintenance pazopanib versus placebo in women who have not progressed after first-line chemotherapy for advanced ovarian cancer." *Gynecol Oncol* 155(2): 186-191.

Head and Neck

Cancer Trials Ireland Study Number: short name. 12-39: De-ESCALaTE HPV

Mehanna, H., M. Robinson, A. Hartley, A. Kong, B. Foran, T. Fulton-Lieuw, M. Dalby, P. Mistry, M. Sen, L. O'Toole, H. Al Booz, K. Dyker, R. Moleron, S. Whitaker, S. Brennan, A. Cook, M. Griffin, E. Aynsley, M. Rolles, E. De Winton, A. Chan, D. Srinivasan, I. Nixon, J. Grumett, C. R. Leemans, J. Buter, J. Henderson, K. Harrington, C. McConkey, A. Gray, J. Dunn and D.-E. H. T. Group (2019). "Radiotherapy plus cisplatin or cetuximab in low-risk human papillomavirus-positive oropharyngeal cancer (De-ESCALaTE HPV): an open-label randomised controlled phase 3 trial." *Lancet* 393(10166): 51-60.

Lung

Cancer Trials Ireland Study Number: short name. 06-35: PET-CT Lung

Lee, K. A., G. Rangaswamy, N. A. Lavan, M. Dunne, C. D. Collins, C. Small and P. Thirion (2019). "ICORG 06-35: a prospective evaluation of PET-CT scan in patients with non-operable or non-resectable non-small cell lung cancer treated by radical 3-dimensional conformal radiation therapy: a phase II study." *Ir J Med Sci* 188(4): 1155-1161.

Cancer Trials Ireland Study Number: short name. 14-13: MK3475-024 / KEYNOTE-024

Reck, M., D. Rodríguez-Abreu, A. G. Robinson, R. Hui, T. Csőszi, A. Fülöp, M. Gottfried, N. Peled, A. Tafreshi, S. Cuffe, M. O'Brien, S. Rao, K. Hotta, K. Vandormael, A. Riccio, J. Yang, M. C. Pietanza and J. R. Brahmer (2019). "Updated Analysis of KEYNOTE-024: Pembrolizumab Versus Platinum-Based Chemotherapy for Advanced Non-Small-Cell Lung Cancer With PD-L1 Tumor Proportion Score of 50% or Greater." *J Clin Oncol* 37(7): 537-546.

Peer reviewed journal publications

Cancer Trials Ireland Study Number: short name. 15-05: UPCI 10-028 / Oligo recurrent Stereotactic

Sutera, P., D. A. Clump, R. Kalash, D. D'Ambrosio, A. Mihai, H. Wang, D. P. Petro, S. A. Burton and D. E. Heron (2019). "Initial Results of a Multicenter Phase 2 Trial of Stereotactic Ablative Radiation Therapy for Oligometastatic Cancer." *Int J Radiat Oncol Biol Phys* 103(1): 116-122.

Lymphoma and Haematology

Cancer Trials Ireland Study Number: short name. 15-10: OPTIMISM

Richardson, P. G., A. Oriol, M. Beksac, A. M. Liberati, M. Galli, F. Schjesvold, J. Lindsay, K. Weisel, D. White, T. Facon, J. San Miguel, K. Sunami, P. O'Gorman, P. Sonneveld, P. Robak, S. Semochkin, S. Schey, X. Yu, T. Doerr, A. Bensmaine, T. Biyukov, T. Peluso, M. Zaki, K. Anderson, M. Dimopoulos and O. t. investigators (2019). "Pomalidomide, bortezomib, and dexamethasone for patients with relapsed or refractory multiple myeloma previously treated with lenalidomide (OPTIMISM): a randomised, open-label, phase 3 trial." *Lancet Oncol* 20(6): 781-794.

Cancer Trials Ireland Study Number: short name. 16-02: CyBorD-DARA

O'Dwyer, M., R. Henderson, S. D. Naicker, M. R. Cahill, P. Murphy, V. Mykytiv, J. Quinn, C. McEllistim, J. Krawczyk, J. Walsh, E. Lenihan, T. Kenny, A. Hernando, G. Hirakata, I. Parker, E. Kinsella, G. Gannon, A. Natoni, K. Lynch and A. E. Ryan (2019). "CyBorD-DARA is potent initial induction for MM and enhances ADCP: initial results of the 16-BCNI-001/CTRIAL-IE 16-02 study." *Blood Adv* 3(12): 1815-1825.

Abstracts: Oral and Poster Presentations

Breast

Cancer Trials Ireland number: short name. 15-49: NeoTRIP

Gianni, L., C-S. Huang, D. Egle, B. Bermejo, C. Zamagni, M. Thill, A. Anton, S. Zambelli, G. Bianchini, S. Russo, E. Ciruelos, R. Greil, V. Semiglazov, M. Colleoni, C. Kelly, G. Mariani, L. Del Mastro, I. Maffei, P. Valagussa and G. Viale. (2019). "Pathologic complete response (pCR) to neoadjuvant treatment with or without atezolizumab in triple negative, early high-risk and locally advanced breast cancer. NeoTRIPaPDL1 Michelangelo randomized study." Oral Presentation- SABCS (abstr: GS3-04)

Cancer Trials Ireland number: short name. 11-03: SOLE

Jerusalem, G., S. Farah, J. Chirgwin, S. Aebi, P. Karlsson, P. Neven, E. Hitre, M-P. Graas, E. Simoncini, C. Kamby, A. Thompson, S. Loibl, J. Gavilá, K. Kuroi, C. Marth, B. Müller, S. O'Reilly, A. Gombos, T. Ruhstaller, H. Burstein, M. Rabaglio, B. Ruepp, G. Viale, R. D. Gelber, A. S. Coates, A. Di Leo, A. Goldhirsch, M. Regan and M. Colleoni. SOLE Investigators and International Breast Cancer Study Group, Bern, Switzerland (2019). "SOLE (study of letrozole extension), a phase 3 randomized clinical trial of continuous vs intermittent letrozole in postmenopausal women who have received 4-6 years of adjuvant endocrine therapy for lymph node-positive, early breast cancer (BC): Final analysis and sole estrogen substudy (SOLE-EST)." Poster Presentation- SABCS (abstr: P5-12-01).

Cancer Trials Ireland number: short name. 15-02: PanHER

Keegan, N.M., S. Furney, J. Walshe, G. Gullo, M. J. Kennedy, K. Bulger, J. McCaffrey, C.M Kelly, K. Egan, J. Kerr, M. Given, P. O'Donovan, A. Hernando, A. Teiserskiene, I. Parker, E. Kay, A Farrelly, A Carr, G Calzaferri, R McDermott, MM Keane, L Grogan, OS Breathnach, PG Morris, S. Toomey, B.T. Hennessy (2019). "A phase Ib trial of copanlisib in combination with trastuzumab in pretreated recurrent or metastatic HER2-positive breast cancer "PanHER." Poster Presentation- SABCS (abstr: P1-19-24).

Cancer Trials Ireland number: short name. 06-32: NSABP B42

Mamounas, E. P., H. Bandos, B. C. Lembersky, J-H. Jeong, C. E. Jr Geyer, P. Rastogi, L. Fehrenbacher, M. L.

Graham, S. K. Chia, A. M. Brufsky, J. M. Walshe, G. S. Soori, S. R. Dakhil, T. E. Seay, J. L. III. Wade, E. C. McCarron, S. Paik, S. M. Swain, D. L. Wickerham and N. Wolmark (2019). "Ten-year results from NRG Oncology/ NSABP B-42: A randomized, doubleblinded, placebo-controlled clinical trial of extended adjuvant endocrine therapy with letrozole (L) in postmenopausal women with hormone-receptor+ breast cancer (BC) who have completed previous adjuvant therapy with an aromatase inhibitor (AI)." Oral Presentation- SABCS (abstr: GS4-01).

Cancer Trials Ireland number: short name. 12-30: TailorX Tissue Bank

O'Connor, D., C. M. Kelly, J. Crown, N. Russell, S. Barron, T. Loughman, S. Lynch, A. O'Grady, K. M. Sheehan, J. Fay, A. Saha, P. Dynodt, B. Fender, C-J. A. Wang, D. O'Leary, A. P. Bracken, A. Rahman, C. A. Gonzalez, N. Al Attar, W. M. Gallagher (2019). "Additional prognostic value of OncoMasTR multigene prognostic signature to clinicopathological information in patients with HR-positive, HER2-negative, lymph node-negative breast cancer from the TAILORx Tissue Bank, Ireland." Poster Presentation-ASCO General Meeting (J Clin Oncol 37, 2019 (suppl; abstr 535)).

Genitourinary

Cancer Trials Ireland number: short name. 15-21: ExPeCT

Brady, L., B. Hayes, G. Sheill, A-M. Baird, E.M. Guinan, B. Stanfill, T. Vlajnic, O. Casey, J. P. Greene, E. Allott, J. M. Hussey, F. Cahill, M. Van Hemelrijck, N. Peat, S. M. Rudman, L. Mucci, O. Sheils, J. O'Leary, R. McDermott, S. P. Finn (2019). "The effect of a structured exercise intervention on CTCs and platelet cloaking in patients with metastatic prostate cancer." Poster Presentation –ASCO GU (J Clin Oncol 37, 2019 (no. 7_suppl 243-243)).

Cancer Trials Ireland number: short name. 15-21: ExPeCT

Sheill, G., L. Brady, E. M. Guinan, J. M. Hussey, B. Hayes, A-M. Baird, B. Stanfill, O. Casey, V. Murphy, S. M. Rudman, N. Peat, O. Sheils, F. Cahill, M. Van Hemelrijck, J. McCaffrey, D. M. O'Donnell, L. Mucci, W. Grogan, R. McDermott, S. P. Finn, The ExPeCT Research Group (2019). "A randomized trial of exercise on quality of life in men with metastatic prostate cancer: The ExPeCT Trial." Poster Presentation –ASCO Supportive Care in Oncology Symposium (J Clin Oncol 37, 2019 (no. 31_suppl 97-97)).

Cancer Trials Ireland number: short name. 14-06: ENZAMET STUDY

Sweeney, C., A. J. Martin, R. R. Zielinski, A. Thomson, T. H. Tan, S. K. Sandhu, M. N. Reaume, D. W. Pook, F. Parnis, S. A. North, R. McDermott, J. McCaffrey, G. M. Marx, N. J. Lawrence, L. Horvath, M. Frydenberg, S. Chowdhury, K. N. Chi, M. R. Stockler, I. D. Davis (2019). "Overall survival (OS) results of a phase III randomized trial of standard-of-care therapy with or without enzalutamide for metastatic hormone-sensitive prostate cancer (mHSPC): ENZAMET (ANZUP 1304), an ANZUP-led international cooperative group trial." Oral Presentation-ASCO General Meeting (J Clin Oncol 37, 2019 (suppl; abstr LBA2)).

Communications

Increasing awareness of Cancer Trials Ireland

A number of activities are undertaken during the year to increase the awareness of cancer trials and showcase the work that is being done across the country. These opportunities will continue to be pursued during the coming years. They include the following:

- **Mainstream media relations:** We are placing stories in local and national media on the opening of trials (e.g. Add- Aspirin) and announcing trial results (e.g. TailorX). Features are also placed in national newspapers such as The Irish Independent.
- **Specialist media relations:** Details of trials are featured regularly in specialist medical press such as the Medical Independent, Cancer Professional and UPDATE Oncology and Haematology Journal.
- **Online:** Regular updates on topical news and cancer trials listing are provided on our website (www.cancertrials.ie) and regular posting on our Twitter account, with the numbers of followers continuing to grow steadily.
- **DSSG Digest:** The DSSG Digest newsletter lists the latest news and up to date listing of open cancer trials. It is widely distributed within the community (including the media) both electronically and in hard copy.
- **Annual Review:** The publication of the organisation's Annual Review is another opportunity used to profile the organisation's successes and progress.
- **International Clinical Trials Day:** This is the organisation's annual set piece publicity event which results in a boost to the organisation's profile, the work of its members and contribution of patients. In 2019, we will collaborate with other key HRB-funded stakeholders in celebrating International Clinical Trials Day to maximise the reach of our message to "Just Ask".
- **Conferences:** Attendances at conferences are used regularly to raise the profile of the organisation's work



Implementing public and patient involvement (PPI)

- A number of the Disease Specific Sub-Groups (DSSGs) have patient consultants in attendance at closed meetings.
- The Patient Consultant's Committee (PCC) was set up as a sub-group of the Board in 2018. The Chair of the PCC now sits on the Board of Cancer Trials Ireland.
- Through the work of our Communications Office, we will promote our trials on our website and talk about individual trials in the media where relevant.
- We have some evidence that public campaigns have added to the success in recruiting patients to our studies and that patients are notably asking their cancer specialist about trials.

Fundraising: Pat Smullen & the Champions Weekend

In September 2019, thousands of people donated money to Cancer Trials Ireland as part of the Longines Irish Champions Weekend. We can attribute the success of this incredible weekend to the popularity of one jockey – Pat Smullen.

Pat was diagnosed with pancreatic cancer in March 2018. Soon after his diagnosis he and his wife decided they would do what they could to support clinical trials for pancreatic cancer, and that triggered a humbling degree of support the likes of which Cancer Trials Ireland has never before experienced.

The scale and range of donations - from coins collected in buckets, to text message donations, right up to a one-off donation of €500,000 from Sheikh Hamdan bin Rashid al Maktoum. We had everything in between too, including the support of sports stars Shane Lowry, and Ronan O’Gara, all of which contributed to a game-changing amount of funding for pancreatic trials. In 2018 Cancer Trials Ireland was unable to fund two trials in pancreatic cancer, so it was exciting to see this situation so dramatically reversed.

Cancer Trials Ireland wishes to thank all staff for their support, Horse Racing Ireland for their own efforts, and finally, once again, Pat Smullen himself. We are committed to showing the positive impact of this support as soon as we can.



Pat Smullen with AP McCoy (winning jockey)



Pat Smullen with participating jockeys

Friends of Cancer Trials Ireland & other fundraising

Cancer Trials Ireland is also now the beneficiary of ongoing fundraising from new sources. In November 2019, the second Friends of Cancer Trials Ireland fundraising lunch took place in the Intercontinental Hotel in Dublin. Once again Pat Smullen took centre stage with a live interview with Evelyn O’Rourke and Ray McDermott. The lunch raised more than €120,000, which will be divided evenly between ovarian and prostate cancer research.

Other fundraising

Cancer Trials Ireland is the fortunate recipient of ongoing, ad hoc fundraising by groups and individuals who have been touched by cancer. In 2019, many of these donations were inspired by Pat Smullen’s efforts, with the horse racing community, and its members continuing to donate well after the Champions Weekend. In some cases this was the donation of racing prize money, or marathons / charity runs completed, or even via the lease of a horse.



Statement of income & retained earnings for the financial year ended 31 December 2019

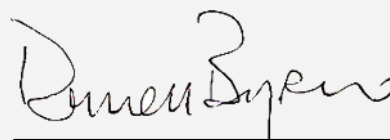
	2019 €	2018 €
Income	3,690,403	3,543,126
Expenditure	(3,559,021)	(3,442,452)
Surplus on ordinary activities before interest	131,382	100,674
Interest receivable and similar income	3,928	4,198
SURPLUS FOR THE FINANCIAL YEAR	135,310	104,872
RETAINED EARNINGS AT THE BEGINNING OF THE FINANCIAL YEAR	398,604	293,732
RETAINED EARNINGS AT THE END OF THE FINANCIAL YEAR	533,914	398,604

Balance Sheet as at 31 December 2019

	2019 €	2018 €
Fixed Assets		
Tangible assets	25,379	14,183
Current Assets		
Debtors	2,906,087	1,463,076
Cash and cash equivalents	4,130,470	2,870,645
	7,036,557	4,333,721
Creditors: Amounts falling due within one year	(6,528,022)	(3,949,300)
Net Current Assets	508,535	384,421
Net Assets	533,914	398,604
Reserves		
Retained earnings	533,914	398,604
	533,914	398,604



Berchmans Gannon
Director



Darren Byrne
Director



*Together, we're finding
answers to cancer.*