



DSSG DIGEST

Spring 2025



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Clinical Lead Message

As we look ahead to 2025, our primary focus is on the upcoming HRB Grant, which we anticipate will be due in early 2026. At the same time, 2026 will mark the final year of the current Cancer Strategy, making this an especially important moment for all of us involved in cancer research and trials. Today's stakeholder meeting is a key step in shaping the next Cancer Strategy, and I encourage each of you to engage fully in the discussions ahead.

At a global level, we are at a pivotal moment for clinical trials and research. Funding uncertainties in the USA are creating ripple effects that could impact our work, making it all the more critical that we remain proactive and adaptable. Despite these challenges, I remain optimistic about the future of our research efforts.

In that spirit, I want to extend a warm invitation to all of you to participate in our upcoming Cancer Retreat. I have reached out to the Group Leaders, who will share their experiences with the HRB Grant process, providing valuable insights as we prepare for the next cycle. Additionally, we will receive an important update from Prof. Donal Brennan on the Trials Oversight Committee. This Cancer Retreat will also feature breakout discussion groups, allowing us to exchange ideas, address challenges, and refine our strategies together. The draft agenda for the retreat will be published very soon.

Elsewhere, it was heartening to witness such high levels of engagement from junior doctors in the ISMO Bursary. This initiative, held as part of CTI's National Training Day in late January, showcased the enthusiasm and dedication of the next generation of researchers. Furthermore, I want to take a moment to reach out to newly and recently appointed consultants. I strongly encourage you to engage with your colleagues and to join us at the upcoming ASCO and ESMO conferences. These gatherings are invaluable opportunities to connect with peers and explore potential collaborations.



Clinical Lead: Prof. Seamus O'Reilly

Prof. Gerry Hanna, the CTI team, and I are already arranging meetings with industry representatives and collaborative groups, and we would be very keen to make you a part of these discussions.

In other news, I am pleased to report a positive development within the Breast DSSG, where we have successfully established a monthly recruitment meeting. The plan is to roll out similar monthly meetings across all DSSGs. This initiative represents an important step in streamlining and enhancing our recruitment efforts, ensuring that our trials continue to advance efficiently and effectively.

Finally, I want to express my deepest gratitude to our outgoing CEO, Eibhlin Mulroe, for her unwavering dedication over the past decade at the helm of Cancer Trials Ireland. Eibhlin has been a fierce and tireless advocate for cancer trials, both at home and abroad. Her voice, leadership, and passion have been instrumental in driving progress, and she will be sorely missed. As she moves on to her next role, we wish her the very best of luck. The process to appoint a new CEO is already underway, and I look forward to providing updates on this in due course.

Looking ahead, there is much work to be done, but I am confident in our collective ability to navigate these challenges and seize new opportunities. Our commitment to advancing cancer research remains steadfast, and I am excited about what we will accomplish together in the coming year.

CEO Message



CEO: Eibhlín Mulroe

I want to begin with the news that, as you may be aware, I will be leaving Cancer Trials Ireland in the coming few months to take up a new role.

The ten years that I have worked with you, as CEO of Cancer Trials Ireland, have been exhilarating and inspiring, and I am grateful to have had the opportunity to be your partner in pursuit of better options and outcomes for cancer patients on this island.

We have faced many challenges over the past decade. Some of those, like the pandemic and cyberattack, rose and fell away. Others have been stubbornly persistent. Our investigators still have to fight tooth and nail for protected research time, while the teams supporting them contend with uncertain career paths. As frustrating as these issues are – and there are many more I could name – I often fortified myself through the years by framing them as the shadow cast by one very bright beacon in cancer clinical trials:

Your passion.

More times than I can count, it was your passion that made the difference.

In Ireland, sometimes cancer clinical trials succeed not because of the system, but in spite of it. That is because people like you are willing to go the extra mile, work longer hours, fight through more and more bureaucracy, year on year, all for the benefit of your patients. It's incredibly humbling – and I'm going to miss it.

I have been privileged to sit around tables planning global trials with our CTI PIs alongside PIs from Australia, US, Germany, Austria, Canada, Denmark and many more. We have some amazing friendships with international global clinical trials groups and pharmaceutical companies especially ECOG, ANZUP, BIG, Geicam, EORTC, ENGOT and many more.

As a result, I have experienced times of great pride, from seeing our patients get better options because of those trials we spearheaded in Europe to seeing our amazing PIs acknowledged in high-impact journals in rooms filled with thousands of experts at ESMO and ASCO.

When I arrived in Cancer Trials Ireland, the organisation was known as ICORG, and its HRB funding had been cut by 20%. In the years that followed, we changed our name to Cancer Trials Ireland and steadied the organisation through an expanded team, more stable HRB funding, increased philanthropy, most notably, though not exclusively, in pancreatic – and by doubling the grant we receive from the Irish Cancer Society on a multi-year basis. These improvements in core funding have allowed the organisation to plan from a more stable footing, all the while guided by an enthusiastic and active Board.

Regarding that Board, I wish to thank its past and present Chairs, Jonathan Westrup and Deirdre Somers, respectively. I also want to express my thanks to the many other Board Directors of Cancer Trials Ireland, who were, and are, so generous with their time and expertise. Each and every one provided invaluable advice and support.

A special word of thanks to the Clinical Leads that I have worked with over the last 10 years; Prof Ray McDermott, Prof Bryan Hennessy, Prof Linda Coate, Prof Gerry Hanna and our current leader, Prof Seamus O'Reilly. It has been an honour to support your efforts. I will continue to admire your determination and commitment to cancer patients.

A personal note of thanks to Lorraine Nolan and colleagues at the HPRA – they are an exceptional regulator in the EU landscape and have been an immense stakeholder for us throughout my time here. They have always been generous with advice which shaped us for the better.

I also want to thank our wonderful patient advocates, who sit on the Patient Consultants Committee. I came to CTI from a patient advocacy organisation that championed patient involvement, and we now have one of the leading patient committees in the country.

Finally, I want to thank all of the staff I have worked with since 2015. Our team in the central office has always been mission-driven, dedicated, and highly skilled, and it has been my honour to work with you all. Thank you all for your support over the last ten years, and I wish you everything you deserve for the next ten.

Thank you to Prof. Ray McDermott

On March 10th Cancer Trials Ireland held a special farewell event for Prof Ray McDermott, the outgoing Vice-Clinical Lead of Cancer Trials Ireland. Prof McDermott has held significant leadership roles in Cancer Trials Ireland since 2008, when he became principal investigator for ECOG in Ireland.

His commitment to CTI was further recognized in 2009 by his election to Vice Clinical Lead (2009–2012), followed by his progression to Clinical Lead, until 2016. In 2015 meanwhile, Prof McDermott was also the acting CEO of Cancer Trials Ireland, and then in 2016 he once more took up the role of Vice Clinical Lead until 2020 when he reassumed the Clinical Lead role once more, before finishing with one more year as Vice Clinical Lead in 2024.

Prof McDermott gave 16 straight years to Cancer Trials Ireland, during which time the organisation has changed enormously. Prof McDermott has been at the core of that evolution, driving and supporting change as the organisation transitioned from ICORG to CTI, all the while managing a busy clinic of patients – and a series of trials, some of which were practice-changing. His contribution to robust structures in clinic and central office, to patient accrual, to bringing in trials, and to finding funding for those trials is incalculable.



Breast Updates

STUDIES RECENTLY OPENED TO ACCRUAL

CAMBRIA-2 (CTRIAL-IE 23-06)

CAMBRIA-2 is an AstraZeneca sponsored phase III open-label randomised study to assess if camizestrant improves outcomes compared to standard adjuvant endocrine therapy for patients with ER+/HER2- early breast cancer with intermediate-high or high risk for disease recurrence who completed definitive locoregional therapy (with or without chemotherapy).

The planned duration of treatment in either arm of the study is 7 years. Eligible patients must have intermediate-high or high risk of recurrence as defined by specified clinical and biologic criteria. Concurrent use of abemaciclib is permitted in both arms. The primary endpoint of the study is Invasive breast cancer-free survival (IBCFS) and main secondary endpoints include Invasive disease-free survival (IDFS), Distant relapse-free survival (DRFS), Overall survival (OS), Safety and Clinical Outcome Assessments (COAs).

The global study accrual target is 5500 patients, with the aim of recruiting 56 patients across the Irish sites. 2 patients have been randomised in Ireland to date. Four of planned seven Irish sites have been activated: St Vincent's University Hospital (PI Prof. Michaela Higgins), Mater Misericordiae University Hospital (PI: Dr. Geraldine Coyne O'Sullivan), Mater Private Hospital (PI: Prof. Catherine Kelly) and Beaumont Hospital (PI: Prof. Patrick Morris). The remaining sites hoped to be activated by end of March/April: Cork University Hospital (PI: Prof. Seamus O'Reilly), University Hospital Waterford (PI: Dr Miriam O'Connor) and University Hospital Galway (PI: Prof. Maccon Keane).

ASCENT-05 (CTRIAL-IE 24-36)

ASCENT-05 study is a Gilead Sciences sponsored international, randomised, open-label, phase III trial of sacituzumab govitecan-hziy and pembrolizumab versus treatment of physician's choice (TPC) in patients with triple negative breast cancer (TNBC) who have received neoadjuvant chemotherapy with or without checkpoint inhibitor (CPI) therapy, with a finding of residual invasive disease in the breast or axillary lymph nodes after surgery.

This study will test sacituzumab govitecan in combination with pembrolizumab or pembrolizumab with or without capecitabine for patients with high-risk early triple negative breast cancer (TNBC) without mutations in the BRCA1 or BRCA2 gene. The main objective of this study is to compare invasive disease-free survival (iDFS) between sacituzumab govitecan (SG) and pembrolizumab versus treatment of physician's choice (TPC).

The global study accrual target is 1514 patients, with the aim of recruiting 25 patients across the Irish sites. The overall study duration will be approximately 8 years, including the recruitment period of 3.5 years and the treatment period of 6 months.

The first Irish site - St James's Hospital (PI: Dr Niamh Coleman), was activated on 28-Jan-2025, and is actively screening patients for the study. The study will shortly open at another four sites across Ireland: Beaumont Hospital (PI: Prof Patrick Morris), University Hospital Limerick (PI: Dr Grzegorz Korpany), Mater Misericordiae University Hospital (PI: Dr Shahid Iqbal) and Cork University Hospital (PI: Prof Seamus O'Reilly).

Breast Updates

STUDIES RECENTLY OPENED TO ACCRUAL

MK-2870-012 (CTRIAL-IE 24-58)

MK-2870-012 study is Merck Sharp & Dohme sponsored randomized, open-label study comparing the efficacy and safety of adjuvant sacituzumab tirumotecan (MK-2870) in combination with pembrolizumab compared to treatment of physician's choice (TPC) in participants with triple-negative breast cancer (TNBC) who received neoadjuvant therapy and did not achieve a pathological complete response (pCR) at surgery. The primary objective is to compare sacituzumab tirumotecan plus pembrolizumab to TPC (pembrolizumab or pembrolizumab plus capecitabine) with respect to invasive disease-free survival (iDFS) per investigator assessment. It is hypothesized that sacituzumab tirumotecan plus pembrolizumab is superior to TPC with respect to iDFS per investigator assessment.

This study is open in St. Vincent's University Hospital (PI Prof. Janice Walshe), University Hospital Galway (PI: Prof. Maccon Keane), and Bon Secours Hospital Cork (PI: Dr Conleth Murphy). This study aims to recruit 1530 patients globally to the trial. 7 patients are expected to be recruited to this study in Ireland.

DESTINY-Breast15 (CTRIAL-IE 24-98)

DESTINY-Breast15 study is Daiichi Sankyo sponsored phase 3b, interventional, open-label study to evaluate the safety and efficacy of trastuzumab deruxtecan (T-DXd) in participants with human epidermal growth factor receptor 2 (HER2)-low or HER2 immunohistochemistry (IHC) 0 (who are both hormone receptor [HR]-negative and HR-positive) unresectable and/or metastatic breast cancer.

The global study accrual target is 250 patients, with the aim of recruiting 14 patients across the Irish sites. The first patient in Ireland has been already recruited at Beaumont Hospital (PI: Prof. Patrick Morris).

St Vincent's University Hospital (PI Prof. Janice Walshe) and St James's Hospital (PI: Dr. Ciara O'Hanlon-Brown) are also open to accrual. The remaining sites to be activated soon: Cork University Hospital (PI: Prof. Roisin Connolly), Mater Misericordiae University Hospital (PI: Dr. Shahid Iqbal) and University Hospital Galway (PI: Prof. Maccon Keane).

MK-2870-010 (CTRIAL-IE 24-113)

MK-2870-010 is Merck Sharp & Dohme sponsored open-label, randomized phase 3 study to compare sacituzumab tirumotecan as a single agent, and in combination with pembrolizumab, versus Treatment of Physician's Choice (TPC) in participants with hormone receptor positive/human epidermal growth factor receptor-2 negative (HR+/HER2-) unresectable locally advanced, or metastatic, breast cancer.

The primary hypotheses are that sacituzumab tirumotecan as a single agent and sacituzumab tirumotecan plus pembrolizumab are superior to TPC with respect to progression-free survival (PFS) per Response Evaluation Criteria in Solid Tumors version 1.1 (RECIST 1.1) by blinded independent central review (BICR) in all participants.

The global study accrual target is 1200 patients, with the aim of recruiting 18 patients across the Irish sites. The first patient in Ireland has been already recruited at Mater Misericordiae University Hospital (PI: Dr. Darren Cowzer). St Vincent's University Hospital (PI Prof. Michaela Higgins) and Bon Secours Hospital Cork (PI: Dr Conleth Murphy) are also open to accrual.

Breast Updates

OPEN STUDIES

TREAT ctDNA (CTRIAL-IE 23-03)

CTRIAL-IE 23-03 TREAT ctDNA study is a collaborative group EORTC sponsored international, randomised, open-label, superiority, phase III trial of elacestrant versus standard adjuvant endocrine therapy in patients with ER+/HER2- breast cancer and ctDNA relapse.

The main objective of this study is to evaluate whether elacestrant can delay the occurrence of distant metastasis or death when compared to standard endocrine therapy in ER+/HER2- patients with ctDNA relapse. ctDNA may be a useful biomarker after curative treatment to identify individuals at high risk of relapse, allowing for effective therapies to be introduced at a time when disease burden is still minimal.

Elacestrant, a new oral selective estrogen receptor degrader, has shown significant clinical benefits in patients with ER+/HER- advanced or metastatic breast cancer following progression on a CDK4/6-inhibitor and could be used at the time of ctDNA relapse to delay the occurrence of distant metastasis.

The global study accrual target is 220 patients, with the aim of recruiting 12-15 patients across the Irish sites. The overall study duration will be approximately 8.7 years, including the recruitment period of 5.7 years and the treatment period of 2 years.

The first Irish site - St James's Hospital (PI: Dr Ciara O'Hanlon Brown), was activated on 12-Sep-2024, and the first patient was registered for the study on 05-Nov-2024. The study will shortly open at another four sites across Ireland: Beacon (Principal Investigator (PI): Dr Lisa Prior), Mater Private Hospital (PI: Prof Catherine Kelly), Mater Misericordiae University Hospital (PI: Dr Geraldine O'Sullivan Coyne) and University Hospital Waterford (PI: Dr Miriam O'Connor).

PREcoopERA (CTRIAL-IE 23-13)

PREcoopERA is a randomized (2:2:1), multicenter, open-label, three-arm (A, B, C), Window-of-Opportunity (WOO) trial to evaluate the activity and safety of giredestrant (A) versus giredestrant plus triptorelin (B) versus anastrozole plus triptorelin (C).

The trial primary objectives are: (i) to determine if 4 weeks of giredestrant plus triptorelin provides greater anti-proliferative activity than anastrozole plus triptorelin among premenopausal patients with ER-positive/HER2-negative operable invasive breast cancer; (ii) to determine if 4 weeks of giredestrant without triptorelin provides anti-proliferative activity that is similar (non-inferior) to giredestrant plus triptorelin among premenopausal patients with ER-positive/HER2-negative operable invasive breast cancer.

The global study accrual target is 220 patients, with the aim of recruiting 15 patients across the Irish sites. The overall study duration will be approximately 2.3 years, including a recruitment period of 1.7 years and 2 months of additional follow-up time after the last patient is enrolled.

The first Irish site, St James's Hospital (PI: Dr Ciara O'Hanlon Brown), was activated on 22 October 2024 and is actively screening patients for the study. The study will shortly open at two other sites: Cork University Hospital (PI: Prof. Roisin Connolly) and University Hospital Galway (PI: Prof. Maccon Keane).

Breast Updates

OPEN STUDIES Continued:

EMBER-4 (CTRIAL-IE 24-07)

EMBER-4 is a randomized, open-label, phase 3 study of adjuvant imlunestrant vs standard adjuvant endocrine therapy in patients who have previously received 2 to 5 years of adjuvant endocrine therapy for ER+, HER2- early breast cancer with an increased risk of recurrence. The main purpose of this study is to measure how well imlunestrant works compared to standard hormone therapy in participants with early breast cancer that is estrogen receptor positive (ER+) and human epidermal receptor 2 negative (HER2-). Participants must have already taken endocrine therapy for two to five years and must have a higher-than-average risk for their cancer to return. Study participation could last up to 10 years.

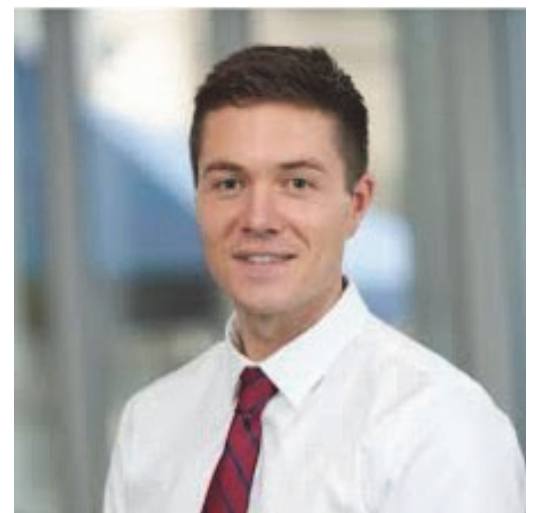
The global study accrual target is 6000 patients, with the aim of recruiting 244 patients across the sites in Ireland. The study has been open to accrual globally since April 2023, and accrual in Ireland started in January 2024. Current accrual in Ireland is 43 patients across nine Irish sites (St Vincent's University Hospital (PI Prof. Janice Walshe), St James's Hospital (PI: Dr Ciara O'Hanlon Brown), University Hospital Galway (PI: Prof. Maccon Keane), Cork University Hospital (PI: Prof. Seamus O'Reilly), Bon Secours Hospital Cork (PI: Dr. Deirdre O Mahony), Beaumont Hospital (PI: Prof. Patrick Morris), Beacon Hospital (Prof. Jennifer Westrup), University Hospital Waterford (PI: Dr Miriam O'Connor) and Sligo University Hospital (PI: Dr. Michael Martin). The study is planned to complete accrual in February 2025.



Dr Ciara O'Hanlon-Brown, St James's Hospital



Prof Janice Walshe, St Vincent's University Hospital



Dr Darren Cowzer, The Mater Hospital

Lung Updates

Lung Portfolio: Spotlight on two new trials

We have an expanding portfolio of trials available for lung cancer patients in Ireland, including the V940-002 personalised adjuvant cancer vaccine trial which opened in Tallaght University Hospital in July 2024 and the Lung Health Check Pilot run by Beaumont Hospital and the RCSI which will open in Q2 this year.

V940-002

A Phase 3, Randomized, Double-blind, Placebo- and Active-Comparator-Controlled Clinical study of Adjuvant V940 (mRNA-4157) Plus Pembrolizumab Versus Adjuvant Placebo Plus Pembrolizumab in Participants With Resected Stage II, IIIA, IIIB (N2) Non-small Cell Lung Cancer.

This trial (also known as INTerpath-002) is investigating the use of V940, a novel investigational messenger RNA based individualised neoantigen therapy (INT) that is designed and produced based on the unique mutational signature of the DNA sequence of the patient's tumour.

Participants will be randomised to receive either V940 plus Pembrolizumab, or placebo plus Pembrolizumab with a primary outcome measure of disease-free survival. Secondary endpoints are overall survival, distant metastases free survival, lung cancer specific survival, safety and quality of life.

The trial opened in Tallaght University Hospital in July 2024 and one participant has been randomised with several more in the screening process.

Lung Health Check

The Lung Health Check is a clinical trial that aims to find people at higher risk of lung problems and offers them tests to check their lung health.

Beaumont Hospital and RCSI will run Ireland's first-ever mobile lung health check pilot, with funding from the Irish Cancer Society and support by the EU4Health SOLACE consortium. This clinical trial will target select high-risk individuals, particularly current or former smokers, in North Dublin and the North East region, inviting them for a check for early detection of conditions including lung cancer, before symptoms appear.

The outcome of Lung Health Check will help inform the evaluation by the National Screening Advisory Committee (NSAC) of the case for a future national lung cancer screening programme in Ireland.



The Launch of the Lung Health Check

Lung Updates

Accrual Complete – ADEPPT

A multicentre, single-arm phase II trial of adagrasib in patients with KRASG12C-mutant NSCLC, including the elderly (≥ 70 years) or patients with poor performance status

This important trial focuses on providing access and information on novel therapies, in populations commonly excluded from clinical trials. Elderly patients with NSCLC and PS2 are often excluded from clinical trials but constitute $>40\%$ of the population with lung cancer. Currently, there are no approved targeted therapy for patients with KRAS G12C-mutant NSCLC available in Ireland.

Ireland was the third highest recruiting country in Europe, with three sites accruing patients, Beaumont Hospital, University Hospital Limerick and University Hospital Waterford.

This study is led by Chief Investigator and Overall ETOP-IBCSG Trial Chair Prof. Jarushka Naidoo. The trial is sponsored by ETOP IBCSG Partners Foundation with Cancer Trials Ireland coordinating the trial in Ireland.



Prof Jarushka Naidoo, Beaumont Hospital

GU Updates

Upcoming GU Trial: 24-32 De-Escalate

The aim of the De-Escalate Trial is to evaluate whether treating patients with metastatic prostate cancer with intermittent rather than continuous hormone therapy, will reduce side effects and improve quality of life, without having a negative impact on survival rates.

The current standard of care for these patients, as well as other treatments, includes taking continuous hormone therapy (ADT) for the rest of their lives. Patients will be included in De-Escalate who have been on ADT for 6-12 months and who's PSA (Prostate Specific Antigen) is now at a very low level. Participants will be randomised to either Intermittent or Continuous ADT. Participants in the Intermittent group will stay off ADT with close monitoring until there is a significant rise in their PSA.

They will then restart treatment until their PSA falls to a very low level again, and they can repeat this pattern as long as is considered appropriate by the patient and their treating physician. The aim is that they will receive as much hormone therapy as is necessary to keep their PSA at a low level, but no more.

The trial is expected to open in Q2 2025 at Tallaght University Hospital, St Vincent's University Hospital, Mater (Public & Private Hospitals), St James's Hospital, Beacon Hospital, University Hospital Limerick and Cork University Hospital.

De-Escalate is sponsored by EORTC and coordinated in Ireland by Cancer Trials Ireland. It is partially funded by an EU grant with support in Ireland from the Friends of Cancer Trials Ireland.

Gynae Updates

OPEN STUDIES

OVHIPEC-2 (CTRIAL 20-07)

Led by Prof. Donal Brennan, sponsored by The Netherlands Cancer Institute, this study is investigating primary cytoreductive surgery with or without hyperthermic intraperitoneal chemotherapy (HIPEC) for FIGO stage III epithelial ovarian cancer. This study is now open in Mater Misericordiae University Hospital. This study aims to recruit 538 patients globally to the trial. 10 Irish patients per year are expected to be recruited to this trial. Currently, we have an incredible 12 patients randomised already to this trial, which is due to end recruitment later this year (Dec 2025).

22-05 HELP-ER

Led by Dr. Sharon O'Toole, HELP-ER is a translational study brought to Ireland through our links with ENGOT, in which blood samples and FFPE samples are collected from patients with First Relapsed Ovarian Cancer. This prospective study aims to Improve the AGO Score for resectability by adding HE4 serum concentration levels and CA125. This study is open in the Beacon hospital who have 3 patients enrolled in the study and 2 patients in screening.

22-18 GLORIOSA

Led by Prof. Patrick Morris, is A Randomized Phase 3 Trial Of Mirvetuximab (Mirv) + Bevacizumab (Bev) Maintenance In patients with Folate Receptor alpha high platinum-sensitive ovarian cancer. A total of 418 patients will be enrolled in this study, which is now open in University Hospital Waterford, Cork University Hospital, St. James's Hospital and Beaumont Hospital, with 6 patients now in screening. Sligo University Hospital and University Hospital Galway will be opening soon.

21-29 NRG GY019

Led by Prof Karen Cadoo and sponsored by NRG in the US, this study is a Randomized Phase III, Two Arm Trial of Chemotherapy with Letrozole Versus Letrozole alone in Patients with Stage II-IV, Primary Low-Grade Serous Carcinoma of the Ovary or Peritoneum. 450 participants are expected to be recruited globally by 2026, with 20 of those patients coming from St. James's Hospital and Cork University Hospital. This study aims to investigate which of the two treatment regimens is better for patients. Two patients are now randomised to this study in St. James's Hospital.

23-04 MK-2870-005 ENGOT-En23

Led by Dr. Dearbhaile Collins, this is A Phase 3, Randomised, Active-controlled, Open-label, Multicentre Study to Compare the Efficacy and Safety of MK-2870 Monotherapy Versus Treatment of Physician's Choice in Participants With Endometrial Cancer Who Have Received Prior Platinum-Based Chemotherapy and Immunotherapy. A total of 710 patients will be enrolled in this study in Cork University Hospital, St. James's Hospital and Mater Hospital, in which 2 patients have been randomised in Ireland to date.

22-08 XPORT

Led by Dr. Dearbhaile Collins, XPORT is A Phase 3, Randomized, Placebo-Controlled, Double-Blind Trial of Selinexor in Maintenance Therapy After Systemic Therapy for Patients With p53 Wildtype, Advanced or Recurrent Endometrial Carcinoma. Brought to Ireland through ENGOT, this study is sponsored by Karyopharm Therapeutics and aims to evaluate efficacy and safety for maintenance administration of Selinexor in patients with p53 wt advanced or recurrent EC. A total of 220 patients with p53 wt advanced or recurrent EC will be enrolled in this study, which is now open in Cork University Hospital, St. James's Hospital, University Hospital Waterford and University Hospital Galway. St. Vincent's University Hospital are aiming to open in April under Dr. Lynda McSorley. 1 patient is currently randomised to this study, with a further 2 in screening.

Gynae Updates

OPEN STUDIES CONT...

24-10 ENGOT-cx20

Led by Dr. Dearbhaile Collins, this is A Phase 3 Randomized, Active-controlled, Open-label, Multicenter Study to Compare the Efficacy and Safety of MK-2870 Monotherapy Versus Treatment of Physician's Choice as Second-Line or Third-Line Treatment for Participants with Recurrent or Metastatic Cervical Cancer. This study is now open in Cork University Hospital, St. James's Hospital and Mater Hospital. 2 patients have been screened so far for this study.

STUDIES IN DEVELOPMENT

24-68 ENGOT-ov83_NOGGO_TORL

Lead by Prof. Donal Brennan, this study is a phase 2 evaluating the efficacy and safety of TORL-1-23 in Women with advanced platinum-resistant epithelial ovarian cancer (including primary peritoneal and fallopian tube cancers) expressing Claudin 6 (CLDN6). This study is aiming to open from May 2025 in Mater University Hospital, St. James's Hospital, Cork University Hospital and Galway University Hospital.

24-71 STRIVE

STRIVE, STRatification of Vulvar squamous cell carcinoma by HPV and p53 status to guide Excision is a Phase II randomized control trial; 2:1 randomization for HPV-I VSCC and prospective cohort trial for HPV-A VSCC, is a newly adopted study into the CTI portfolio, which is Cancer Trials Ireland's first study in Vulvar cancer. This study will aim to open in 2025 in collaboration with CCTG. Mater University Hospital, St. James's Hospital and St. Vincent's University Hospital have all expressed interest.

STUDIES IN DEVELOPMENT CONT...

24-70 Expression IX

Led by Dr. Sharon O'Toole, Expression IX is a study looking at Longterm survival in patients with any gynecological cancer by a survey. It is assumed to enrol 150-200 patients per country in total 1500 patients. We are hoping to open this very soon in SLRON, Sligo University Hospital, Tullamore, Mater University Hospital, St. James's Hospital & St. Vincent's University Hospital. We encourage all sites to open this study, so please contact the gynae DSSG team if your site is interested.

23-15 ReFrame_STRO-002

Led by Prof. Karen Cadoo, this is a Phase 2/3 Open label Study Evaluating the Efficacy and Safety of Luveltamab Tazevibulin (STRO-002) versus Investigator's Choice of Chemotherapy in Women with Relapsed Platinum-resistant Epithelial Ovarian Cancer (including Fallopian Tube or Primary Peritoneal Cancers) Expressing Folate Receptor alpha (FOLR1). 600 patients are expected globally, with first patient in planned in May 2024. Sites selected in Ireland include Cork University Hospital, Galway University Hospital, Mater University Hospital, St. James's Hospital and University Hospital Waterford. St. Vincent's University Hospital will also now open this study at their site. Since the last DSSG Digest, the study has received approvals to open in Ireland, and SIV preparations are ongoing, with sites hoping to open for April 2025.

RAMP 301

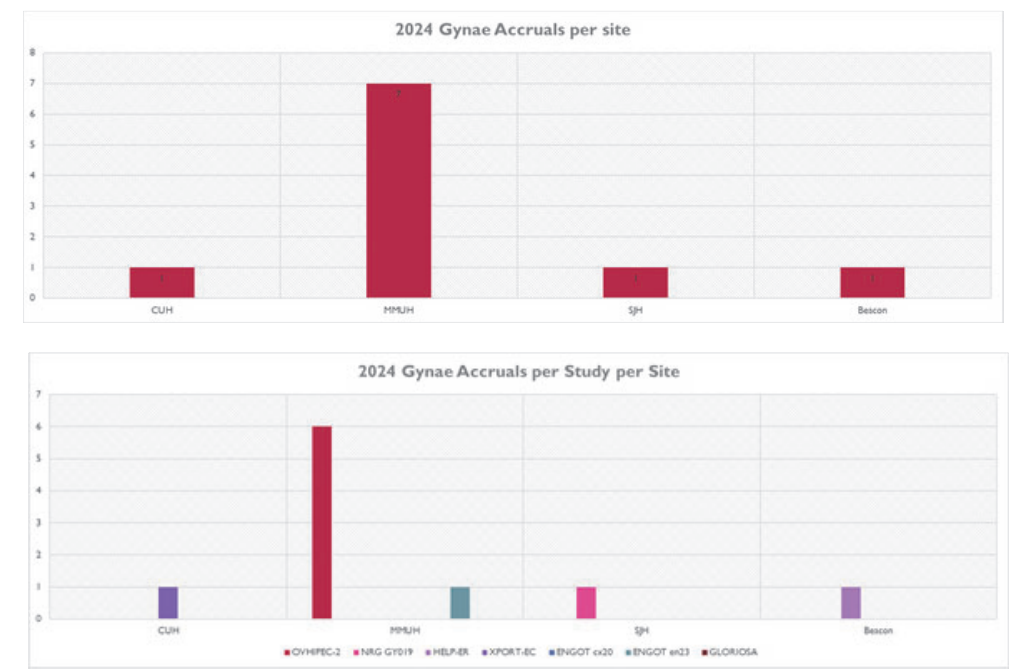
Opening in St. James's Hospital only, and led by Prof Karen Cadoo, RAMP-301 is A Phase 3, Randomized, Open-Label Study of Combination Therapy with Avutometinib plus Defactinib Versus Investigator's Choice of Treatment in Patients with Recurrent Low-Grade Serous Ovarian Cancer (LGSOC). This study aims to open as soon as possible in St. James's Hospital (May 2025) as recruitment will close in Q1 2026.

Gynae Updates

STUDIES IN EARLY DEVELOPMENT:

The following studies are also in early stages of development, and will aim to open throughout 2025: 24-43 EVOPAR ovarian 01, 24-41 ENGOT-ov84, 24-42 ENGOT-ov85, LASH, Trofuse-033.

ACCRUAL PROGRESS BY SITE IN GYNAE STUDIES:



Prof Donal Brennan, The Mater Hospital



Prof Karen Cadoo, St James's Hospital



Dr Sharon O'Toole, St James's Hospital

Radiotherapy Updates

OPEN STUDIES

NRG HN009 (CTRIAL-IE 22-04) aims to determine whether RT with cisplatin weekly is superior, in terms of acute toxicity and overall survival, to RT with cisplatin every 3 weeks for patients with locoregionally advanced squamous cell carcinoma of the head and neck. Irish National Lead Investigator (NLI) is Prof Sinead Brennan. The study is open since January 2025 at UHG (1 patient enrolled) and is pending at SLRON.

TAORMINA (CTRIAL-IE 22-16) aims to assess the efficacy and safety of SABR and systemic therapy (investigational arm) compared with systemic therapy alone (standard treatment) in patients with oligometastatic breast cancer. In addition, the study aims to evaluate potential biomarkers of response and early progression by use of tumour tissue and blood. Co-NLIs: Prof Frances Duane, Prof Seamus O'Reilly (SLRON, UHG, CUH, Bons/UPMC, SJH, Beaumont Hospital, SVUH, MPH, MMUH). The study has recently been activated in SLRON, and several other sites are working closely with the sponsor SABO (Swedish Association of Breast Oncologists) in order to open in the coming weeks and commence patient recruitment as soon as possible.

NRG GU012 SAMURAI (CTRIAL-IE 22-17) aims to determine whether the addition of SABR to the primary tumour in combination with standard of care immunotherapy improves outcomes compared to immunotherapy alone in Renal Cell Carcinoma (RCC) patients. Irish National Lead Investigator (NLI) is Prof Alina Mihai. Study opened in Ireland in Jul 2024 at Beacon site. Study set up ongoing at SLRON, MPH and UHG.

Spine SABR (CTRIAL-IE 20-03) 'Dose-escalated SABR (stereotactic ablative radiotherapy) for Solid Tumour Spine Metastases'. The aim of this Investigator-initiated trial (IIT) is to determine the maximum RT dose that can be delivered safely to spinal metastases, without increasing the amount of treatment-induced side effects. This study is open in SLRON (Prof Clare Faul / CI), Beacon (Dr Siobhra O'Sullivan/Prof Alina Mihai), and Bons UPMC (Dr Paul Kelly). Accrual re-opened in December following the 6 month dose-limiting toxicity analysis. This study has Irish Cancer Society funding, and is the first CTI radiotherapy IIT to employ an electronic CRF (RAVE).

DP-IMRT Pancreas (CTRIAL-IE 17-12) 'A non-randomised Phase I/II study of dose-escalated hypofractionated Dose-Painted Intensity Modulated Radiotherapy (DP-IMRT) in resectable/borderline resectable pancreatic adenocarcinoma'. The aim of this IIT is to improve outcomes in pancreatic ductal adenocarcinoma by delivering higher RT doses targeted directly at the centre of the tumour. The study opened in SLRON and SVUH in Jan-2024, and the CI is Dr Gerard McVey and Co-CI is Dr Maeve Keys. This study is partly funded by HRB, Pat Smullen fund and Irish Cancer Society. The Translational sub study aims to identify plasma biomarkers for predicting response and patient prognosis (Prof Martin Clynes, National Institute for Cellular Biotechnology, DCU). Accrual re-opened in February following a protocol amendment. The study is in set-up at CUH and Beacon.

PACE NODES (CTRIAL-IE 23-01): The aim is to determine whether 5 fraction prostate and pelvic node SBRT has superior biochemical/clinical-failure free rate than 5 fraction prostate SBRT, in patients with high risk localised prostate cancer. The study is open in SLRON, Bons UPMC and MWROC at UHL. Dr Paul Kelly (Bons UPMC) is the Irish NLI. The study is coordinated internationally by Institute of Cancer Research, UK.

Radiotherapy Updates

OPEN STUDIES continued:

E2RADIatE (CTRIAL-IE 21-28) OligoCare/Re-Care Cohorts: The aim is to collect real-world data on cancer patients treated with radiotherapy, to support radiotherapy research and to provide evidence of the role of radiation oncology in a multidisciplinary approach. This study is open in SLRON, Beacon and UHG. Prof Frances Duane (SLRON) is the Irish NLI. The study is coordinated internationally by EORTC.

SABR COMET-3 (CTRIAL-IE 19-21) 'Phase III Randomized Controlled Trial and Economic Evaluation of Stereotactic Ablative Radiotherapy for Comprehensive Treatment of Oligometastatic (1-3 metastases) cancer'. This 'basket' study assesses the impact of SABR plus standard of care treatment, compared to standard of care treatment only, on overall survival, oncologic outcomes, and quality of life in patients with one controlled primary tumour and 1-3 metastatic lesions. The study is coordinated internationally by BC Cancer, Canada. In Ireland the study is open in SLRON (NLI for Cancer Trials Ireland sites: Prof John Armstrong), BonS UPMC, and Beacon Hospital. The study is due to close summer 2025.

SOURCE Lung – 'Stereotactic Ablative Radiation Therapy Of UltRaCentral LUNG tumours' (CTRIAL-IE 18-33) is an IIT which is open at SLRON and Beacon Hospital, and is planned to open in Belfast City Hospital. This study aims to assess the safety/impact on side effects of delivering the same overall dose of radiotherapy, in fewer fractions, to patients with high-risk centrally located NSCLC tumours and single pulmonary oligometastatic lesions (whose disease is inoperable), through SABR. Prof Armstrong (SLRON) is the Study CI. Two translational sub-studies are associated with this research study, and they involve Raman spectroscopic analysis (Focas Research Institute, TU Dublin) and Proteomic analysis (Conway Institute, UCD).

EXPERT BIG (CTRIAL-IE 19-03): The aim is to determine if omission of RT is not inferior to RT in terms of local recurrence-free interval after breast conserving surgery in patients with stage I, luminal A early breast cancer who are planned to receive adjuvant endocrine therapy. The study is open in SLRON, UHG and CUH. Prof Sinead Brennan (SLRON) is the Irish NLI. The study is coordinated internationally by BIG and BCT.

Studies pending / in development:

SIMPLIFY SABR COMET (CTRIAL-IE 24-09) aims to determine if single fraction SABR is non-inferior to multiple fraction SABR, with respect to Healthcare Provider (HCP)-reported grade 3-5 adverse events related to treatment. The study will open in SLRON, Beacon, BonS UPMC, CUH, MPH, UMPC Whitfield and UHG.

PRESERVE Breast (CTRIAL-IE 24-35) aims to evaluate the risk of a 1-week ultra-hypofractionated re-irradiation with partial breast irradiation (rPBI) regimen following breast-conserving surgery for patients with localised, recurrent or new primary breast cancer. The study will open in CUH, SLRON, and UHG. Contract reviews and ethics preparation is ongoing.

NRG BN013 (CTRIAL-IE 24-15) is a collaborative RT study aiming to compare Single Fraction Stereotactic Radiosurgery (SRS) with Fractionated SRS (FSRS) for Intact Brain Metastasis. The protocol has SMG approval and feasibility has been completed by 6 Irish sites. Ethics submission and study document preparation is ongoing.

Radiotherapy Updates

Studies pending / in development continued:

OPTIMISE Lung (CTRIAL-IE 24-15) is a new lung cancer radiotherapy IIT proposal which aims to evaluate the safety of standard five fraction SABR and optimised three fraction SABR in patients with inoperable peripheral lung disease. The study will include translational sub-studies. Prof Pierre Thirion is the CI. Study is in set up - DSSG approval is in place, protocol development and peer review is ongoing. SMG approval, feasibilities, ethics submission planned in due course.

FAST FORWARD BOOST is a proposed collaborative RT study aiming to compare 1-week Simultaneous integrated boost (SIB) with 3-week SIB in breast cancer patients requiring a tumour bed boost. Ethics submission preparation ongoing, however, protocol, PIL/CF and study documents have not yet been approved. Study is planned to open in Ireland in 2025.

Studies in early stages of development:

INSPIRE is a proposed IIT for an all-island multi-centre prospective single arm phase 2 trial of prostate SABR with a number of toxicity reduction strategies, which will open at up to 12 RT centres in ROI and Northern Ireland.

TOURIST Lung is a phase III platform lung study designed to use advanced radiotherapy techniques to establish the utility of thoracic radiotherapy in the treatment of stage IV NSCLC. Conversations between the sponsors (Christie NHS and Southampton) are ongoing to confirm the set-up at Irish sites. Feasibility Questionnaires to be circulated to sites.

SHORT OPC is a proposed collaborative RT study looking at stereotactic boost and short-course RT for HPV-associated OroPharynx Cancer. Discussions are ongoing with the Canadian sponsor, and a protocol amendment is expected.

Studies in early stages of development continued:

ASCENDE-SBRT is a proposed collaborative RT study looking at Androgen Suppression Combined with Elective Nodal and a Dose Escalated Boost. The study is not yet approved to open at international sites.

NRG GI011 LAP 100 is a proposed collaborative RT study looking at dose escalated radiation in locally advanced pancreas cancer patients. The study has not yet opened internationally, and the protocol has not yet been released.

NRG CC014 is a proposed collaborative RT study looking at prophylactic RT vs. Standard-of-care for Patients with High-risk, asymptomatic bone metastases. The study has not yet opened at international sites.

Publications

IMRT Prostate (CTRIAL-IE 08-17) sub-study was published in 'Frontiers in Oncology' in Feb 2025: 'Detection of radiosensitive subpopulations ex-vivo with Raman microspectroscopy'.



Prof Alina Mihai, The Beacon Hospital

Lymph & Haem Updates

The Isa-RVD Clinical Trial Completes Accrual

The Isa-RVD (CTRIAL-IE 19-34) clinical trial is led by Prof. Peter O’Gorman, Consultant Haematologist at the Mater Misericordiae University Hospital and sponsored by Cancer Trials Ireland.

This international, phase II, multi-centre trial is evaluating the addition of Isatuximab, a monoclonal antibody targeting CD38, to standard treatment, Lenalidomide, Bortezomib, and Dexamethasone. The objective is to assess the efficacy and safety of this regimen and determine its potential as a frontline treatment option for newly diagnosed multiple myeloma patients. The primary endpoint of this trial is to assess the Very Good Partial Response or better rate after two cycles of induction therapy, as defined by the International Myeloma Working Group criteria.

The trial is a collaboration with investigators from the Dana-Farber Cancer Institute in Boston, who are running a complementing sister trial in the United States.

The Isa-RVD trial, opened for recruitment in March 2022 and completed accrual March 2025, recruiting 54 patients, across five Irish sites and one international site in Denmark. The Participating sites include:

- Mater Misericordiae University Hospital/Mater Private Hospital (24 patients)
- University Hospital Limerick (14 patients)
- University Hospital Waterford (7 patients)
- Beaumont Hospital (4 patients)
- St James’s Hospital (2 patients)
- Aarhus University Hospital, Denmark (3 patient)



Prof Peter O’Gorman, Mater Misericordiae University Hospital

We would like to extend our gratitude to the patients, investigators, and research staff across all participating centres for their contribution to the trial. We look forward to sharing further insights as the trial progresses.

Opening Soon CTRIAL-IE 24-34 CLL18

CLL18 is due to open at Irish sites in Q2 2025, offering a new opportunity for patients with chronic lymphocytic leukemia (CLL) to access an innovative treatment approach. This international study is designed to evaluate the effectiveness and safety of different treatment strategies for CLL, with the goal of improving patient outcomes and quality of life.

The primary objective of the study is to compare the efficacy of MRD-guided Venetoclax/Pirtobrutinib vs fixed-duration (15 cycles) Venetoclax/Pirtobrutinib and MRD-guided Venetoclax/Pirtobrutinib vs. fixed-duration (12 cycles) Venetoclax/Obinutuzumab by measuring progression-free survival (PFS) in patients with previously untreated CLL/SLL.

Lymph & Haem Updates cont.

Key Inclusion criteria:

- Documented CLL/SLL requiring treatment with a CLL phenotype cell count $>10^{-2}$.
- Adequate bone marrow function:
 - ANC $\geq 1 \times 10^9/l$, Hb ≥ 8.0 g/dl (without transfusion unless CLL-related), platelets $\geq 25 \times 10^9/l$ (or $\geq 10,000/\mu l$ if CLL-related).
- Renal function: Creatinine clearance ≥ 30 ml/min.
- Liver function: Bilirubin $\leq 2 \times$ ULN, AST/ALT $\leq 2.5 \times$ ULN (unless CLL-related or Gilbert's).
- Negative tests for HBV, HCV, and HIV.

Exclusion Criteria:

- Prior CLL/SLL-specific therapy (except low-dose corticosteroids <20 mg prednisolone/day).
- Decompensated autoimmune cytopenia or suspected Richter transformation/CNS involvement.

Irish sites:

Beaumont Hospital (Prof Patrick Thornton), University Hospital Limerick (Prof Ruth Clifford), Mater Misericordiae Hospital (Dr Anne Fortune), St James Hospital, University Hospital Waterford, University Hospital Galway, Cork University Hospital.



Prof Patrick Thornton, Beaumont Hospital

GI Updates

NEEDS (CTRIAL-IE 20-36) NEEDS is a Neoadjuvant trial, investigating locally advanced squamous cell carcinoma (SCC) of the oesophagus. The aim of the study is to compare outcomes after neoadjuvant chemoradiotherapy with subsequent oesophagectomy to definitive chemoradiotherapy with surveillance and salvage oesophagectomy as needed in patients with resectable locally advanced squamous cell carcinoma (SCC) of the oesophagus, with the aim to provide generalisable guidance for future clinical practice.

The NEEDS study is open to recruitment in St. James's Hospital, led by Prof. John Reynolds, as Chief Investigator, and Dr. Maeve Lowery (Co-Chief Investigator). The radiotherapy will be completed at the St. Luke's Radiation Oncology Network on the St. James's Hospital Campus led by Dr. Moya Cunningham (Co-Chief Investigator). The NEEDS study hopes to recruit 12 pts per year, with a total of 20 patients recruited in Ireland to this important trial. Treatment allocation will be open-label among the two arms in a 1:1 ratio.

Pat Smullen Pancreatic Cancer Fund

A message from Frances Crowley

There were two big developments this year. One was the appointment of Prof Grainne O’Kane as the Pat Smullen Chair in Pancreatic Cancer in UCD, and the other was (€100,000) to support the rollout of a surveillance programme for people with a genetic disposition to pancreatic cancer.

It’s a very exciting time for pancreatic research. There is a gene mutation that is present in 90% of pancreatic tumours, and for many years our efforts to target this mutation haven’t worked – but that’s starting to change. With the Pat Smullen Chair in Pancreatic Cancer now in place, Ireland is in a strong position to attract trials using new agents that better target this mutation. Hopefully we will see patients benefitting from these trials soon – the goal is to have a trial targeting the main gene in pancreatic cancer (KRAS) in the next two years.



We are also looking at the possibility of supporting improved access to germline testing, i.e. for people who are newly diagnosed patients, to determine the pick-up rate of hereditary predisposition genes in all pancreas cancer patients.

Since 2019, the Pat Smullen Fund has supported four trials opening for patients with pancreatic cancer, opening up new, previously unavailable treatment options to 174 people in Ireland who are diagnosed with pancreatic cancer.

A proportion of the Pat Smullen Pancreatic Cancer Fund has been used to fund new research in pancreatic cancer in Ireland. Three studies are presently open for pancreatic cancer patients thanks to this funding:

FEED (CTRIAL-IE 20-26) five of the planned 70 patients have been recruited to the FEED study, a nutritional intervention which aims to strengthen patient resilience and recovery from pancreas tumour resection (surgery). This study had a successful pilot programme, and models similar approaches established in other kinds of cancer. Participants will participate in a 12 week multi-modal nutritional care package while undergoing standard chemotherapy for pancreatic cancer at SVUH. The care package consists of diet, supplements, daily step target and dietitian and physiotherapist appointments. The FEED study is open in SVUH.

PaTcH (CTRIAL-IE 20-27) 14 of the planned 22 patients have been recruited to the PaTcH trial for patients with advanced stage pancreatic cancer that have failed treatment. The goal of this study is to examine if Trametinib and Hydroxychloroquine will improve results for patients with advanced pancreatic cancer compared to standard chemotherapy. The PaTcH study is open in MMUH and SVUH.

DP-IMRT Pancreas (CTRIAL - IE 17-12) three of the planned 67 patients have been recruited to the radiotherapy DP-IMRT study for patients with operable / borderline-operable pancreatic cancer, in order to investigate if radiotherapy that directly targets a tumour using modern treatment planning, imagery and delivery can improve patient outcomes. The study is open in St Luke’s Radiation Oncology Network @ St Luke’s Hospital and St Vincent’s University Hospital.

Melanoma Update

The Mel Mar T II study, sponsored by the Australian Group MASC and led in Ireland by Dr Shirley Potter from the Mater Misericordiae University Hospital, is now open at four Irish sites (Mater Misericordiae University Hospital, St James's Hospital, Cork University Hospital and Tallaght University Hospital). To date, 6 patients have been recruited to the study (4 at MMUH and 2 at SJH). Work is ongoing to open two additional Irish sites at Tallaght University Hospital and Beaumont Hospital.



Dr Shirley Potter, Mater Misericordiae University Hospital

Irish Molecular Tumour Board (MTB)

The Irish Molecular Tumour Board (MTB), operated by Cancer Trials Ireland and supported through the Sarah Jennifer Knott Foundation, is continuing meetings throughout 2025. The expert multidisciplinary team at the core of the MTB, review anonymized patient cases based on clinical information and genetic sequencing reports.

The main objective of the MTB is to analyse and discuss cancer patient cases that have undergone molecular analysis whose results fall outside the current standard of diagnostic, prognostic and predictive evaluation, and to provide education and support to the primary treating consultant in the correct interpretation of complex molecular and genomic variant data.

It currently operates meetings for solid tumour & malignant haematological cases. Solid tumour meetings are held on the last Tuesday of each month. Haematology-oncology meetings are currently held every two months.

Next solid tumour MTB: 29th April 2025 at 4pm.

Next haematology-oncology MTB: to be confirmed.

The MTB is a valuable precision oncology resource for clinicians in Ireland which has received very positive feedback from both the clinical and scientific community. If you are a healthcare professional in oncology and would like more information on submitting a case or wish to join the MTB mailing list please contact: mtb@cancertrials.ie



Dr Verena Murphy, Dr Dearbhaile Collins and Claire Bermingham of the MTB.

Academic Publications from Cancer Trials Ireland Investigators

Basket:

CTRIAL-IE 14-11: PENELOPE-B: Dynamics of molecular heterogeneity in high-risk luminal breast cancer-From intrinsic to adaptive subtyping (PENELOPE-B study) Denkert C, Rachakonda S, Karn T, Weber K, Martin M, Marmé F, Untch M, Bonnefoi H, Kim S, Seiler S, Bear HD, Witkiewicz AK, Im SA, DeMichele A, Pehl A, Veer LV, McCarthy N, Stiewe T, Jank P, Gelmon KA, García-Sáenz JA, Westhoff CC, Kelly CM, Reimer T, Felder B, Olivé MM, Knudsen ES, Turner N, Rojo F, Schmitt WD, Fasching PA, Teply-Szymanski, Zhe Zhang, Masakazu Toi, Hope S, Rugo, Michael Gnant, Andreas Makris J, Holtschmidt J, Nekljudova V, Loibl S. *Cancer Cell*. 2025 Feb; 10;43(2):232-247.e4. PMID: 39933898

Breast:

CTRIAL-IE 21-05: DESTINY Breast 12 Survival with Trastuzumab Emtansine in Residual HER2-Positive Breast Cancer. Geyer Jr CE, Untch M, Huang C, Mano MS, Mamounas EP, Wolmark N, Rastogi P, Schneeweiss A, Redondo A, Fischer HH, D'Hondt V, Conlin AK, Guarneri V, Wapnir IL, Jackisch C, Arce-Salinas C, Fasching PA, DiGiovanna MP, Crown JP, Wuelfing P, Shao Z, Caremoli ET, Bonnefoi HR, Hennessy BT, Stamatovic L, Castro-Salguero H, Brufsky AM, Knott A, Siddiqui A, Lambertini C, Boulet T, Nyawira B, Restuccia E, Loibl S, KATHERINE Study Group. *N Engl J Med* 2025. Jan 16; 392(3):249-257 PMID: 39813643

CTRIAL-IE 17-15: WO39391 / Impassion030/ ALEXANDRA - Adjuvant Atezolizumab for Early Triple-

Negative Breast Cancer: The ALEXANDRA/ Impassion030 Randomized Clinical Trial. Ignatiadis M, Bailey A, McArthur H, El-Abed S, Azambuja E, Metzger O, Chui SY, Dieterich M, Perretti T, Shearer- Kang E, Molinero L, Steger GG, Jassem J, Lee SC, Higgins M, Zarba J, Schmidt M, Gomez H, Zotano AG, Moscetti L, Chiu J, Munzone E, Ben-Baruch NE, Bajetta E, Ohno S, Im S, Werutsky G, Gal-Yam EN, Farre XG, Tseng L, Jacot W, Gluz O, Shao Z, Shparyk Y, Zimina A, Winer E, Cameron DA, Viale G, Saji S, Gelber R, Piccart M. *JAMA*. 2025 Jan; 30:e2426886. PMID: 39883436 - Online ahead of print

ICORG 12-01: RX PONDER/SWOG S1007 Irish national real-world analysis of the clinical and economic impact of 21-gene oncotype DX® testing in early-stage, 1-3 lymph node-positive, oestrogen receptor-positive, HER2-negative, breast cancer. Browne IM, McLaughlin RA, Weadick CS, O'Sullivan S, McSorley LM, Hadi DK, Millen SJ, Higgins MJ, Crown JP, Prichard RS, McCartan DP, Hill ADK, Connolly RM, Noonan SA, O'Mahony D, Murray C, O'Hanlon-Brown C, Hennessy BT, Quinn CM, Kelly CM, O'Reilly S, Morris PG, Walshe JM. *Breast Cancer Res Treat*. 2025 Jan; 209(1):189-199. PMID: 39365509

Not study specific:

Dynamics of molecular heterogeneity in high-risk luminal breast cancer-From intrinsic to adaptive

subtyping. Denkert C, Rachakonda S, Karn T, Weber K, Martin M, Marmé F, Untch M, Bonnefoi H, Kim S, Seiler S, Bear HD, Witkiewicz AK, Im S, DeMichele A, Pehl A, Veer LV, McCarthy N, Stiewe T, Jank P, Gelmon KA, García-Sáenz JA, Westhoff CC, Kelly CM, Reimer T, Felder B,

Olivé MM, Knudsen ES, Turner N, Rojo F, Schmitt WD, Fasching PA, Teply-Szymanski J, Zhang Z, Toi M, Rugo HS, Gnant M, Makris A, Holtschmidt J, Nekljudova V, Loibl S. *Cancer Cell*. 2025 Feb 10; 43(2):232-247.e4. PMID: 39933898

Further Optimizing Care of Patients With Operable Hormone Receptor-Sensitive Breast Cancer. Thomas A, Mayer EL, DeMichele A, Harbeck N, Curigliano G, Ignatiadis M, Adam V, Zhou Y, Brown TP, Gilham L, Chua BH, Kalinsky K, Wolff AC, O'Reilly S. *J Clin Oncol*. 2025 Feb 10; 43(5):487-491. PMID: 39383501

CTRIAL-IE 23-05: Metastatic Breast Cancer Survey A patient-led survey on information and communication needs of patients with metastatic breast cancer in Ireland and Northern Ireland. Gaynor S, O'Meara Y, Mulvaney E, Keogh RJ, Weadick CS, Duane FJ, Brien AM, Grealley H, O'Leary MJ, Teiserskyte I, Beristain I, Marron J, Mulroe E, Donachie V, Mc Loughlin S, O'Reilly S. *Breast*. 2025 Feb; 79:103837. PMID: 39591880

Gastrointestinal:

CTRIAL-IE 12-38: TRI-LARC Quality-of-Life Analysis of a Phase II Randomised Controlled Trial Comparing Three-Dimensional Conformal Radiotherapy and Intensity-Modulated Radiotherapy in Locally Advanced Rectal Cancer. Geary RL, Gillham C, McVey G, Armstrong J, Cunningham M, Rangaswamy G, Sharma D, Wallace N, Skourou C, Dunne M, Mahon M, Bradshaw S, O'Sullivan L, Marron J, Parker I, Shannon AM, McDermott R, Toomey S, Hennessy BT, O'Neill B. *Clin Oncol (R Coll Radiol)*. 2025 Jan; 37:103695 PMID: 39693793

Genitourinary:

CTRIAL-IE (ICORG) 08-17: IMRT Prostate Detection of radiosensitive subpopulations ex-vivo with Raman microspectroscopy (IMRT Prostate 08-17 study) Meade AD, Maguire A, Bryant J, Cullen D, Medipally D, White L, Armstrong J, Dunne M, Noone E, Bradshaw S, Finn M, M. Shannon A, L. Howe O, M. Lyng F. *Frontiers in Oncology*. 2025 Feb 27; Volume 15 – 2025. doi.org/10.3389/fonc.2025.1470431

Gynaecology:

Prognostic significance and accuracy of oncologists' estimates of survival time in recurrent ovarian cancer. Nahm SH, Kiely BE, O'Connell RL, Lee YC, Davis A, Avall-Lundqvist E, Bere JS, Berton D, Donnellan P, Hilpert F, Joly F, Lanceley A, Ledermann JA, Okamoto A, Oza A, Pignata S, Sehouli J, King MT, Friedlander M, Stockler MR, Roncolato FT, GCIG Symptom Benefit Group. *Int J Gynecol Cancer*. 2025 Jan; 35(1):100030 PMID: 39878283

Non-CTRIAL: PICCOLO Trial

The efficacy and safety of mirvetuximab soravtansine in FRα-positive, third-line and later, recurrent platinum-sensitive ovarian cancer: the single-arm phase II

PICCOLO trial. Alvarez Secord A, Lewin SN, Murphy CG, Cecere SC, Barquín A, Gálvez-Montosa F, Mathews CA, Konecny GE, Ray-Coquard I, Oaknin A, Rubio Pérez MJ, Bonaventura A, Diver EJ, Ayuk S-M, Wang Y, Corr BR, Salutari V. *Ann Oncol*. 2025 Mar 36(3):321-330. PMID: 39617145

Cancer Trials Ireland & ISMO National Training Day 2025

The second Cancer Trials Ireland & ISMO National Training Day took place in early 2025, bringing together nearly 200 in-person attendees, with additional participation online. This event provided an important platform for oncology trainees to present research, engage with experts, and explore opportunities in clinical trials.

The programme featured 20 oral presentations selected from 57 abstract submissions, alongside discussions on integrating clinical research into training, funding models, mentorship, and collaboration across disciplines. Sessions also highlighted the importance of early research involvement and strategies to enhance Ireland's position in global cancer trials.

Bursaries were awarded to recognise outstanding trainee research, and key themes included the need for structured research opportunities, increased protected time for trainees, and a collaborative approach to advancing oncology research in Ireland.



Cancer Retreat 2025 – Save the Date

Cancer Trials Ireland will host the 2025 Cancer Retreat on Friday, 9th May, at College Hall, RCSI, Dublin.

This year's retreat will focus on Preparing for the new HRB grant and reflections on the current funding cycle. The event will bring together clinical leads, research teams, and industry partners for discussions on funding opportunities, trial expansion, and collaboration.

Agenda highlights include:

- Opening remarks from the Irish Cancer Society and Health Research Board
- Keynote address by Prof. Donal Brennan on the Clinical Trials Oversight Committee's findings
- Insights from clinical research leaders on successes and challenges in the current HRB grant cycle
- Interactive breakout discussions on industry collaboration, career development, and new trial opportunities.



Further details and registration information will be shared soon.

PCC Progress Update: November 2024 – March 2025

Since November, the Patient Consultants Committee (PCC) has been actively working to strengthen patient involvement in cancer research at Cancer Trials Ireland. Here's a snapshot of what we've been up to:

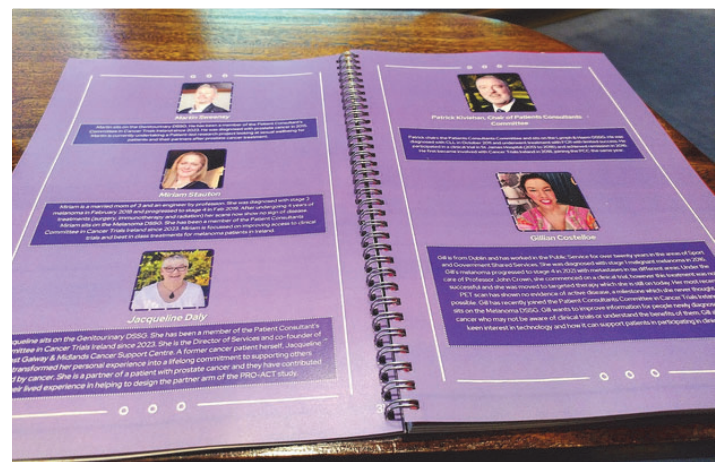
Growing Our Team

- We welcomed two new members in early 2025, focusing on Gastrointestinal (GI) and Head & Neck cancers.
- This brings the PCC to 22 members, covering multiple cancer research groups.
- A recruitment campaign is planned to meet the growing demand for patient and public input in research reviews.

Engaging with Research and Events

- The PCC met in February 2025 to discuss research updates, upcoming events, and the soon-to-be-formed executive committee.
- Members actively participated in key events, including:
 - iCHAMs Conference (RCSI): A great chance to connect with medical students and highlight the importance of patient involvement.
 - ICS PPI Achievement of the Year 2025: Recognizing the impact of patient-public involvement, with a spotlight on Siobhan Gaynor's Metastatic Breast Cancer (MBC) Survey Project.
 - Prostate Cancer Research: The PRO-ACT survey for patients and partners is nearing completion, with plans for publication and presentations.
 - Digital Health Records Attitudinal Survey: Led by Miriam Stuanton, Melanoma DSSG Member, received an overwhelming response, demonstrating strong public interest in digital health data.

- New Research Grant Application: A proposal has been submitted for a future project focusing on gynaecological cancers.
- IACR Conference (Belfast): Jennifer Coppins represented Cancer Trials Ireland at this key event.
- IPHA Conference: PCC members spoke at this important industry event, further strengthening engagement with key stakeholders.



PCC Progress Update: November 2024 – March 2025

Media and Public Engagement

The PCC has also been active in raising awareness of patient involvement in cancer research through media and public outreach:

- Patrick Kivlehan featured in the Irish Independent for World Cancer Day, highlighting the importance of clinical trials.
- Miriam Staunton was featured in the Irish Times, bringing attention to key issues in cancer research and patient involvement.

Strengthening the PCC Structure

- A new executive committee is being set up, which will include a Chair, Co-Chair, and up to five additional members.
- This group will support training, research collaborations, and engagement with researchers.



Looking Ahead


The PCC continues to grow, ensuring patients and the public have a voice in shaping cancer research. With ongoing projects, new initiatives, and stronger leadership, we’re excited for what’s next!

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Bureaucracy around clinical trials ‘putting lives at risk’, cancer survivor warns



Cian Ó Broin

Today at 02:30



Studies Open to Accrual – following pages

Key to data contained in the following tables. To view tables correctly select double page view in your PDF reader.

Purple	Industry Study	Site open to accrual (or closed to accrual since last DSSG)
Green	Investigator-Initiated trial (IIT)	Site to be initiated (TBI) i.e. approval in place
Orange	Collaborative Study	Site in Set-up (ISU) i.e. submission/approval/contract pending
Blue	Adopted IIT	Site initiated but not active (pending)
Grey	Adopted Collaborative Study	

Cancer Trials Ireland studies open to accrual (as of Jan 31st 2025)

Purple = Industry studies - Green = Investigator-initiated Trial - Orange = Collaborative Group studies - Adopted IIT - Adopted Collab study

DSSG	General Group	Cancer Trials Ireland No:	Study Name:	Ac-cruals	TUH	Beacon	Beau-mont	BonS Cork	BonS UPMC Cork	CUH	UHG
Breast	Trans	08-01	CADY-Substudy	342	33		Open	34		46	Open
Breast	Trans	09-07	Breast Cancer Proteomics and Molecular Heterogeneity	5163			3320			1103	
Breast	Radio	19-03	EXPERT BIG	16						1	4
Breast	Clinical	21-32	Novartis EPIK-B5 (closed to accrual Feb 2025)	2			Open				
Breast	Clinical	22-01	SHAMROCK (on hold)	11			7			3	
Breast	Radio	22-16	TAORMINA	0			TBI		TBI	TBI	TBI
Breast	Trans	22-21	Exosomes in TNBC	39							
Breast	Clinical	23-03	EORTC 2129 TREAT ctDNA	9		TBI					
Breast	Clinical	23-06	CAMBRIA-2	2			Open			TBI	TBI
Breast	Clinical	23-13	PREcoopERA	0						ISU	ISU
Breast	Clinical	24-07	EMBER-4	83		Open	7	4		8	11
Breast	Trans	24-08	PRIMROSE CSF	0			Open				
Breast	Observational	24-21	UCARE (accrual closed)	100							86
Breast	Clinical	24-36	ASCENT 05	0			ISU			TBI	
Breast	Trans	24-53	Ovarian Escape	91							
Breast	Clinical	24-58	MK-2870-012	0				Open			ISU
Breast	Clinical	24-98	DESTINY-Breast15	1			1			ISU	ISU
Breast	Trans	24-100	BCRF	4						4	
Breast	Clinical	24-113	MK-2870-010	1				Open			
CNS	Radio	20-03	Spine SABR (accrual on hold Apr-Nov 2024)	6		4			Pending		
CNS	Trans	24-90	IMPROVE TMZ	11						11	
GI	Radio	17-12	DP-IMRT Pancreas	3		ISU				ISU	
GI	Clinical	20-27	PaTcH	14							
GI	Clinical	21-35	HERIZON-GEA-01 (ZWI-ZW25-301)	4							
GI	IIT	20-26	FEED	3							
GI	Clinical	24-16	Cardia	1							
GI	Clinical	20-36	NEEDs	0							
GI	Clinical	23-25	Mountaineer-03	1			Open	Open			
GI	Clinical	24-01	SARONG II	28						Open	ISU
GI	Clinical	24-50	ProviDHe	8						2	
GU	Radio	22-17	SAMURAI	0		0					TBI
GU	RT	23-01	PACE NODES	11					4		
GU	Clinical	21-20	MK3475- 365	3	3						
GU	Clinical	21-38	IMvigor011 B042843 (accrual closed)	7	4					3	
GU	Clinical	20-32	PEACE 6: VULNERABLE	2	2						
GU	Trans	17-30	IRONMAN	119	53	9					
GU	Clinical	22-11	SABRE	22					22		
GU	Registry	23-09	SLECT	86	86						
GU	Inventional Programme	23-18	LIAM Mc	67						67	
GU	Clinical	24-02	MK5684-003	9	6						
GU	Clinical	24-03	MK5684-004	5	3						
GU	Clinical	24-65	MK5684-01A	0	0					0	
Gynae	Clinical	20-07	OVIHIPEC 2	12							
Gynae	Trans	22-05	ENGOT ov47 HELPER	3		3					
Gynae	Clinical	22-08	ENGOT en-20 SIENDO Part 2 XPORT	1						1	0
Gynae	Clinical	21-29	NRG GY019	1						0	
Gynae	Clinical	23-04	MK-2870-005 ENGOT-En23 MI-TO PREVENTER	2						0	
Gynae	Clinical	24-10	ENGOT cx20	1						0	
Gynae	Clinical	22-18	GLORIOSA	0			0	0		0	0
Lymph & Haem	Clinical	19-34	Isa-RVD	52			4				
Lymph & Haem	Clinical	21-10	CC220-MM-002 EXCALIBER-RRMM (accrual closed)	6			3			2	1
Lymph & Haem	Clinical	21-22	MK1026-003	0			0				
Lymph & Haem	Clinical	23-13	Affirm-AL	0			0			Open	

Cancer Trials Ireland studies open to accrual (as of Jan 31st 2025)

Full key on p23. Shorthand = **Open to accrual** **Site To Be Initiated (TBI)** **In Set -up** **Pending**

LUH	Mater	MWROC at UHL	MRH	MUH	OLLHD	CHI	Hospices*	UHL	SLRON	SJH	SUH	SVUH	UHW	UPMC Whitfield	International Sites
27	50				ISU			23		34	21	43	31		
								381				Open	359		
									11						
										Open		2			
								1		Open		Open			
	TBI								Open	TBI		TBI			
	11											28			
	TBI									9			TBI		
	1											1			
										Open					
										12	1	37	3		
											14				
	ISU							TBI		Open					
	58											33			
												Open			
	ISU									Open		Open			
	1											TBI			
									2						
									1			2			
	7											7			
										4					
												3			
							0			1					
										Open					
	1											Open	Open		
			Open							28					
										1		5			
	TBI								TBI						
		2							5						
												0			
	Open							ISU				Open	ISU		
											17	40			
												3			
												2			
												0			
	12														
										0		TBI	0		
										1					
	2									0					
	1									0					
										0	0		0		
	22							14		2			7		3
								0							
										0					

Cancer Trials Ireland studies open to accrual (as of Jan 31st 2025)

Purple = Industry studies - Green = Investigator-initiated Trial - Orange = Collaborative Group studies - Adopted IIT - Adopted Collab study

DSSG	General Group	Cancer Trials Ireland No:	Study Name:	Total Accrual (to 31-Jan-25)	TUH	Beacon	Beau-mont	BonS Cork	BonS UPMC Cork	CUH	UHG
L&H	Clinical	23-21	MajesTEC-4	1			1			Open	Open
L&H	Clinical	23-16	MK 2140-006	2							
L&H	Clinical	23-20	CA057-001 SUCCESSOR-1	6						2	2
L&H	Clinical	24-05	firmMIND (accrual closed)	2				1			1
L&H	Clinical	24-30	Beigene 311-308 / Mahogany	7							
Head & Neck	RT	23-24	OPEN	157							
Head & Neck	RT / Clinical	22-04	NRG HN009	1							1
Lung	Radio	18-33	SOURCE Lung	44		5					
Lung	Clinical	22-07	KRYSTAL-7	1	Open		1				
Lung	Trans	23-11	BRAND	94			46				
Lung	Clinical	22-09	ADEPPT (accrual closed)	7			4				
Lung	Clinical	24-51	V940-002	1	1						
Lung	Clinical	24-24	HARMONI-3	1			1				ISU
Lung	Clinical	24-52	DeLLphi-305	0			Open				
Melanoma	Clinical	18-50	R2910-ONC-1788	8						2	3
Melanoma	Clinical	20-37	MelMarT-II	9	Open		ISU			2	
Melanoma	Clinical	22-25	R3767 ONC 2055	22			10			6	2
Melanoma	Clinical	22-26	R3767 ONC 2011	10						3	Open
Basket	Radio	19-21	SABR COMET-3	14		0			8		
Basket	Clinical	19-27	MK-7339-002/LYNK-002 (accrual closed)	5	Closed			3			
Basket	Radio	21-28	E2RADlatE	26		6					1
Basket	Clinical	22-22	Immuno Fertility	8			8				
Basket	Observational	24-18	POST	555							
Basket	Trans	24-19	TAGNEY	23			23				
Basket	Survivorship	24-31	Sleepio SAC	299							
Basket	Clinical	24-11	ANTHOS ANT 007 - Aster	13			1	5		2	
Basket	Clinical	24-23	Gut Microbiome	31			31				
Basket	Clinical	24-17	MK 3475-587/ Keynote-587	8	2						
Basket	Clinical	24-12	ANTHOS ANT 008 - MAGNOLIA	4				1		3	
Basket	Clinical	23-07	CAReS	10	ISU						Open
Basket	Survivorship	24-49	EU Navigate	42							
Basket	Observational	24-54	TPAC	104							
Basket	Observational	24-61	GAMBIT	42			42				
Basket	Clinical	24-57	DS7300-203	1	ISU					ISU	ISU
Basket	Observational	24-101	HRQOL	20						20	
Basket	Survey	24-103	EUonQOL	94							
Paeds	Trans	16-34	LLR Leukaemia Cell bank (on hold)	67							
Paeds	Registry	16-37	EWOG-MDS-2006	10							
Paeds	Trans	16-42	Renal IMPORT	59							
Paeds	Trans	16-43	Tumour Banking Study	159							
Paeds	Trans	16-46	EWOG-SAA 2010	24							
Paeds	Trans	16-49	NB SCI Study	3							
Paeds	Clinical	16-53	Interfant 06 (accrual closed)	6							
Paeds	Clinical	16-81	SIOP Ependymoma II	11							
Paeds	Clinical	18-16	ITCC 059	2							
Paeds	Clinical	18-17	PHITT (accrual closed)	7							
Paeds	Clinical	18-18	LCH IV	6							
Paeds	Clinical	18-24	ITCC 054 AAML 1621 (accrual closed)	0							
Paeds	Clinical	19-31	DIPG Registry	0							
Paeds	Clinical	20-09	ALLTogether	25							
Paeds	Registry	20-29	LOGGIC CORE	5							
Paeds	Registry	23-26	EBMT	40							
Paeds	Clinical	23-33	Interfant 21	1							
Paeds	Clinical	24-108	LOGGIC/FIREFLY	1							

Fundraising News

Friends of Cancer Trials Ireland

Last November, the Friends of Cancer Trials Ireland once again hosted a gala lunch, fundraiser and auction on behalf of Cancer Trials Ireland, this time raising a staggering €135,000.

The event was MC-ed by Mario Rosenstock, and featured a panel discussion that included a patient (Ian Fahy), and contributions from Prof Ray McDermott, Prof Janice Walshe, and Deirdre Somers, Chair of Cancer Trials Ireland.

Particular thanks to the Friends of Cancer Trials Ireland Committee (listed and pictured below), for their efforts and for confirming that they will once more host the event in November 2025. Committee members: Deirdre McDermott, Rita Lovett, Katherina Sheahan, Kim Fitzgerald, Grace McDermott, Liz Coughlan, Fiona Collins, Julie Liston, Mairead O'Brien and Paula Murphy.



Friends of Cancer Trials Ireland Committee



Angela Clayton-Lea, COO, Prof Ray McDermott & Deirdre Somers, Chair of the Board



MC Mario Rosenstock



Irish Oncologists at the Friends of Cancer Trials Ireland lunch

Andy Creevy / Nestle

For several years, Andy Creevy and his colleagues in Nestle – and outside Nestle, as we shall see – have been stalwart supporters of Cancer Trials Ireland. Last year along Andy organised an adventure run, a golf classic, and he also did the Liffey Descent. He and his colleagues raised almost €18,000 for Cancer Trials Ireland in 2024. Meanwhile a former colleague of Andy's (Stephen Briscoe) organised an event in Portmarnock that raised €13,000+, half of which was donated to Cancer Trials Ireland. Enormous thanks to Andy, and his colleagues and friends.

In May this year, the fourth Property Picnic is set to take place. This event was established by the property sector in memory of their colleague, Louise Creevy (Andy's wife).

Fundraising News – Pancreatic

Hannay Smullen & The University Horse Racing societies

For the third year running, Hannah and her co-members of the TCD Racing Society hosted a Pre-Cheltenham fundraising event. This year, Hannah secured the involvement of other university racing societies, and together they raised €4,477 for pancreatic research. Hannah and her friends – all students – have raised an unbelievable €20,000 for pancreatic research over the past three years. Later this year, Hannah's mother Frances Crowley will once again spearhead the Pat Smullen Race Day at the Curragh.

Other support for pancreatic

The Courts Services of Ireland made a €5,000 donation at the end of 2024, and we continue to enjoy the support and donations of others who have been affected by pancreatic cancer. Two other donors in pancreatic this year include Aisling Jones & neighbours, on behalf of Joan Kiernan, and also Luke Dolan, from the Coolmore Stud. Meanwhile, at the time of writing, Anna Horgan had raised over €1,600 for pancreatic ahead of her run in the Barcelona marathon in the coming months.

Raheens GAA Blitz

On St Stephen's Day in 2024, Aoife Kelly and her family, friends and colleagues organised a GAA blitz at their Kildare Club and went on to raise a staggering €34,384 for pancreatic cancer research. Cancer Trials Ireland is extremely grateful to everyone who took part in, and supported, this excellent event.



Aoife Kelly & family at their St Stephen's Day fundraiser

Other marathon runners

A range of donors taking part in the Dublin Marathon in 2024 collectively raised €9,332 on behalf of Cancer Trials Ireland. This was added to by Ciaran Dixon, who raised €380 directly for CTI, in the same race. Meanwhile, later this year, a group of schoolfriends will run the Stockholm marathon in memory of Owen Lochrin and Jack Lidholm. They will split what they raise (already €7,700 so far) between Cancer Trials Ireland and another charity.

Thanks to:

- Bequeathed – €23,313
- Robert Joyce – €2,500
- Ballyfoyle Agricultural Show – €1,600
- Swallows Golf Club – €1,805

Cancer Trials Ireland is also the fortunate recipient of many more small but valuable contributions from individuals affected by cancer.



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Cancer Trials Ireland is supported by:

