

**MINUTES OF THE 24th MEETING OF  
ANGLO CELTIC COOPERATIVE ONCOLOGY GROUP  
INTENSIVE CHEMOTHERAPY FOR HIGH RISK BREAST CANCER**

Friday 5<sup>th</sup> May 2006

**PRESENT:**

**Prof J Crown**

**Prof RCF Leonard**

**Chair**

Prof R Coleman

Prof P Neven

Dr H Earl

Dr M Mano

Dr J Mansi

Dr M Quigley

Dr N Murray

Prof Martin Clynes

Lorraine O'Driscoll

Robert O'Connor

Dr S O'Reilly

Dr E Whipp

Sheffield

Leuven

Addenbrookes

Institut Jules Bordet

St Georges

Romford

Southampton

NICB, Dublin

NICB, Dublin

NICB, Dublin

Clatterbridge

Bristol

Dr Ann Yellowlees

Liz Foster

Kathy Malinowszky

Quantics Consulting

Wales Cancer Trials Network

Sharon Broby

Jill Bruce

Christina oliva

Astra Zeneca

Lilly

GSK

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	<b>ACTION</b>
<p>As a large proportion of ACCOG members were not present a very brief meeting was held after the educational meeting in Dublin.</p>	
<p><b>1. CARAT – Dr Max Mano</b></p> <p>See attached slides.</p> <p>The proposed CARAT trial will look at treatment options for patients who fail to respond to anthracycline or taxane based primary chemotherapy. The initial plan was to randomise these patients between radiotherapy versus radiotherapy plus 4 cycles of capecitabine. However Roche were not interested in supporting this trial. Therefore other possible agents were discussed including Sorafenib, Sutent or Omnitarg.</p> <p>It was considered that these agents would probably require more pilot studies as safety data on these drugs is less well documented.</p> <p>It may be possible to ask Roche whether they would consider providing free drug – with the funding for infrastructure support through CTAAC. There may also be the possibility of central subvention funding from the DoH for the Capecitabine.</p> <p>Kathy Malinovszky will circulate the slides to the rest of the group asking for comments/ideas. It was agreed that members should submit outline ideas for different agents to Kathy Malinovszky – to be discussed at the next ACCOG meeting.</p>	
<p><b>2. Marker Study in Metastatic Breast Cancer– Dr N Murray</b></p> <p>This proposed study will look at treatment based on current standard practice vs treatment based on changes (30% increase?) in CEA and ? markers. Beckman Coulter have agreed to provide free reagent/analysis for 3,000 patients. An application has been made to CTAAC /HTA for support for trial infrastructure.</p> <p>Interest has been shown around the UK, mainly from Clinical Oncologists and Cancer Units.</p>	

<p><b>3.OPTION – Prof R Leonard</b></p> <p>Recruitment into the OPTION trial continues to be slow. Over 60 centres are open to recruitment and an amendment to allow ER+ve patients, for patients whom clinicians do not consider ovarian suppression a necessary part of treatment, has been implemented.</p> <p>A possible means of increasing accrual would be to open up the study to lymphoma patients. However there was some concern over the potential variance in chemotherapy induced menopause between the different regimens.</p> <p>It was agreed to await feedback from John Radford’s lymphoma group.</p>	
<p><b>4. Date of Next Meeting</b></p> <p><b>November 3<sup>rd</sup> London c/o Dr Mansi</b></p>	