

**MINUTES OF THE 17th MEETING OF  
ANGLO CELTIC COOPERATIVE ONCOLOGY GROUP  
INTENSIVE CHEMOTHERAPY FOR HIGH RISK BREAST CANCER**

Friday 3<sup>rd</sup> May 2002

**PRESENT:**

**Prof RCF Leonard**

Dr D Cameron  
Dr H Earl  
Dr J Evans  
Dr M Highley  
Dr K McAdam  
Dr P Neven  
Dr T Perren  
Mr O Ravisekar  
Dr G Thomas  
Dr C Trask  
Dr M Verrill  
Dr C Wilson

Dr L Foster  
Dr A Gould  
Ms K Murray

Ms H Baines  
Ms H Cornwell  
Ms M Cremen  
Mr R Harris  
Ms I Inman  
Ms N Smith

Ms C Af'Uhr  
Ms B Cho  
Dr R Dias  
Mr D Eves  
Mr B Gilligan  
Mr Pim Kon  
Mr F Lee  
Ms M Pluck  
Ms D Richards  
Ms K Sweeney

**Co - Chair**

Edinburgh  
Cambridge  
Glasgow (Beatson)  
Dundee  
Peterborough  
Leuven, Belgium  
Leeds  
West Suffolk/Addenbrookes  
University of Cambridge  
Southend  
Newcastle  
Addenbrookes

SCTN Edinburgh  
SCTN Edinburgh  
SCTN Edinburgh

Mid Anglia Cancer Research Network  
Addenbrookes  
Addenbrookes  
Addenbrookes  
Addenbrookes  
West Suffolk/Bury St Edmunds

Amgen  
Amgen  
Aventis  
Chugai  
Bristol Myers Squibb  
Aventis Pharma  
Aventis  
Aventis  
Aventis Pharma  
Chugai



funding.	
<p><b>5.The OPT-IN trial</b>  Ovarian Protection in Hormone Receptor Negative Premenopausal Breast Cancer Patients receiving adjuvant or neo-adjuvant chemotherapy. RL displayed the study schema to the Group. There is a need to decide on the timing of the end of treatment assessment. MV knew of an ASCO presentation to add to the bibliography. MV will report to RL in 2 weeks on some suggestions. PN suggested we were careful of the effects on time of surgery for pre-op.</p>	<p><b>MV</b> <b>MV</b></p>
<p><b>6.A new pre-operative trial</b>  HE presented a new pre-operative trial to the Group. A neo-adjuvant study of sequential epirubicin and taxane in the treatment of poor risk early breast cancer with prospective molecular profiling. HE gave a presentation on the power of neo-adjuvant studies and the power of new genomics for breast cancer and had come up with a trial design. RL also had a neo-adjuvant trial design to present to the Group and it was decided to combine the 2 schema. HE would take this forward and email round the Group. LF will send round an email list of the active members. LF will look at Anglo Celtic II database to get information on treatment post trial.</p>	<p><b>HE</b> <b>LF</b>  <b>LF</b></p>
<p><b>7.Will Weekly Work</b>  MV gave an up-date on this trial. The protocol has gone to MREC and also to the NCRN/NCRI committee with approval from the clinical studies group. There may be an amendment mandating Her2 testing. Herve Bonnefoi has agreed to chair the DMC. LF will send MV a list of the “Intent to Participate “ received so far.</p>	<p><b>LF</b></p>
<p><b>8.ANGLO III - SPROG</b>  KM gave a presentation on the SPROG trial to date. There have been 15 patients recruited, amendments 1 and 2 have been accepted. This means that neo-adjuvant patients can be included as can patients on oral CMF. TACT, Tango and SECRA B patients are eligible. AG gave a presentation on the analysis plan for SPROG and an explanation of the calculation of Relative Dose Intensity. AG stated that where the treatment of febrile neutropenia is not controlled as an integral part of treatment in a trial, it is statistically valid to randomise those trial patients into SPROG. Slides of AG’s talk can be obtained from LF.</p>	<p><b>LF</b></p>
<p><b>9.p53 and HERA up-dates</b>  DC gave up-dates on these 2 trials – not much to report!!</p>	
<p><b>10.Peer Review</b>  The Group discussed a peer-review system but decided to use the</p>	

NCRN/CTAAC system in the beginning.	
<b>11.Anglo Celtic II</b> Jeff Evans gave a presentation that will be cut-down for ASCO. DC suggested we look at the ER-ve subgroup.	
<b>12.Date and Venue of next meeting</b> Mark Verrill offered to host the next meeting in Newcastle on October 11 <sup>th</sup> 2002. Dr Patrick Neven will look into the possibility of hosting the following meeting in Belgium.	<b>PN</b>

