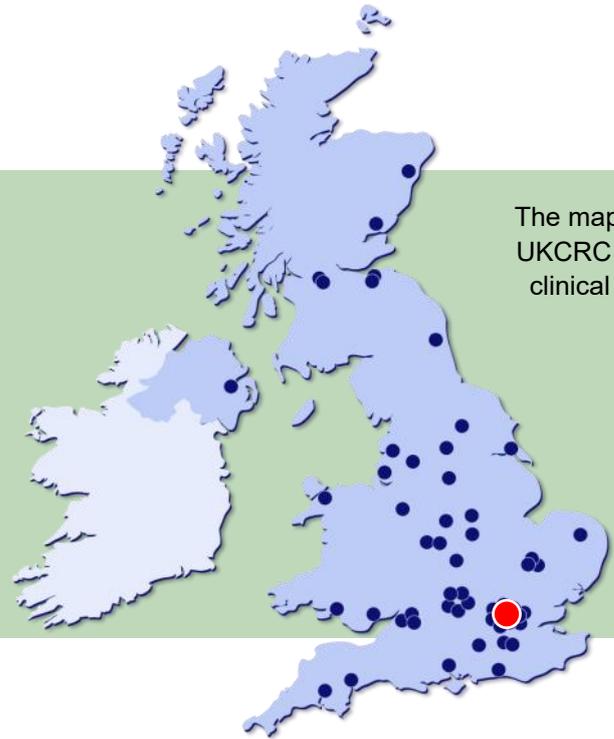


Royal Marsden Clinical Trials Unit (RM-CTU)

Using liquid biopsies as an alternative diagnostic test to protect patients and staff



The map shows all UKCRC registered clinical trials units

During the COVID-19 pandemic, Royal Marsden Clinical Trials Unit (RM-CTU) has worked at pace to develop and launch a pilot study for patients presenting with symptoms of pancreatic, lung, bladder, colorectal cancers and gastrointestinal stromal tumors. PREVAIL-ctDNA aims to replace invasive tissue biopsies with a liquid biopsy in order to support prompt cancer diagnosis and treatment despite diagnostic capacity constraints. A liquid biopsy can detect tiny amounts of cancer in the blood (circulating tumour DNA or ctDNA).



Photograph courtesy of The Royal Marsden NHS Foundation Trust

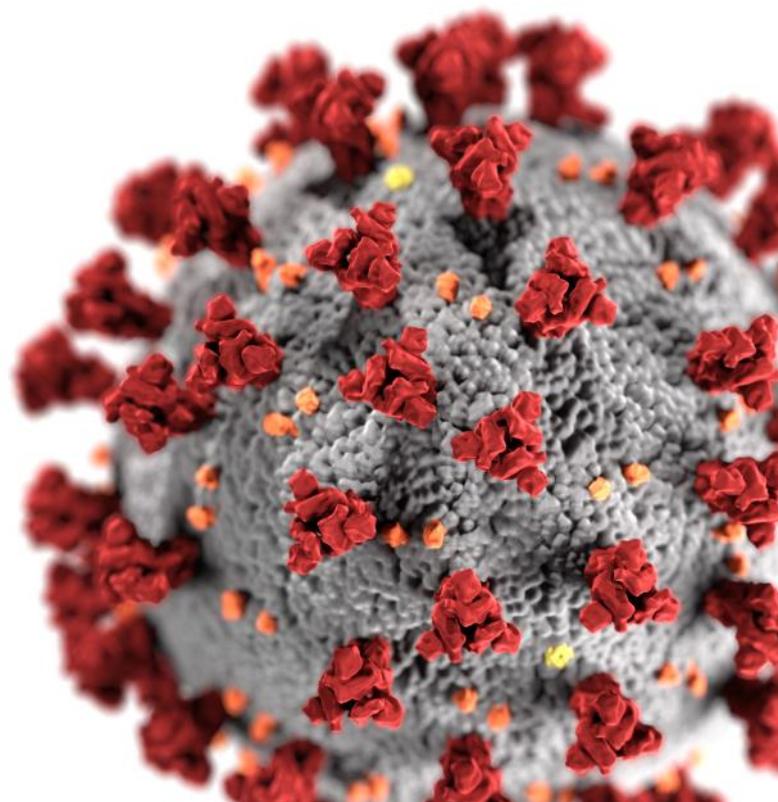
RM-CTU is embedded within the world leading cancer treatment centre, and the broader substantial cancer-focused clinical research and research governance infrastructure of The Royal Marsden.

Our UKCRC accredited CTU facilitated the rapid development and implementation of PREVAIL-ctDNA due to the ability to rapidly re-prioritise work and ensure an expedited sponsorship review drawing upon our critical mass of cancer researchers and trial management expertise. RM-CTU enabled funding to be rapidly agreed from our co-located NIHR BRC and The Royal Marsden Cancer Charity due to the recognised experience of the CTU and our track record in delivery.

PREVAIL-ctDNA expands upon our world-leading research into liquid biopsies, which is enhanced by RM-CTU membership of the UKCRC CTU Network. We have benefited from access to training for our trial managers and the sharing of best practice from across the network of academic CTUs. We have ensured a patient representative co-applicant for the study despite the rapid set-up as per patient involvement standards.

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The value of PREVAIL-ctDNA arises from the dramatic fall during the pandemic in the number of invasive biopsies through camera tests into the body usually performed for bowel, lung, stomach, uterus, bladder cancer patients. This is partly due to re-directing resource to tackle the pandemic but also because these tests can produce an aerosol containing the virus from infected patients, risking infection of staff in the room, contamination of the diagnostic suite and infection of other patients. PREVAIL-ctDNA may give clinicians important information to use alongside cancer risk assessment of patients' routine diagnostic scans, other blood tests, symptoms and medical history to appropriately prioritise and personalise cancer treatment (surgery, radiotherapy, drug therapy).



Virus image: CDC / Alissa Eckert & Dan Higgins