Precision Panc: Advancing personalised medicine treatment strategies for pancreatic cancer

Submission date 22/01/2018	Recruitment status Suspended	Prospectively registered			
22/01/2018		[X] Protocol			
Registration date	Overall study status	Statistical analysis plan			
29/01/2018	Completed	Results			
Last Edited	Condition category	Individual participant data			
20/09/2021	Cancer	Record updated in last year			

Plain English summary of protocol

Background and study aims

At present pancreatic cancer is the 3rd leading cause of cancer death in the western world with only 3% of patients surviving for 5 years or more. Therefore there is an urgent need to both optimise the use of current therapies by identifying responsive (or non-responsive) subgroups and to develop novel therapeutic approaches. The Precision Panc Master Protocol allows for the taking of either extra tissue from a patient's diagnostic biopsy or an additional specific trial biopsy as well as a blood sample. These samples are subjected to molecular profiling and allow for the patient to then be enrolled into a PRIMUS study.

Who can participate?

Adults aged patients aged 16 and older who have a pancreatic mass and are willing to undergo a tumour biopsy.

What does the study involve?

Patients with either suspected or confirmed pancreatic cancer are approached to take part in the study and given the Precision Panc Screening PIS. Participants are given time to consider trial participation and if they are willing to take part in the study they are screened onto the study. If the patient has suspected pancreatic cancer and are having a standard of care diagnostic biopsy, extra cores are taken at that time for the Precision Panc study. If pancreatic ductal adenocarcinoma is confirmed the patient are then given the registration PIS/consent which allows for molecular profiling to take place on the extra tissue taken for research. If the patient already has a diagnosis of pancreatic ductal adenocarcinoma they are asked to undergo and additional research biopsy for the study. All participants are also asked to provide a blood sample for research. The tissue (either the extra diagnostic tissue or the research biopsy) and blood sample are sent to Glasgow for molecular profiling and if enough tissue is available for profiling they may be eligible for an open PRIMUS study.

What are the possible benefits and risks of participating?

It cannot be guaranteed that taking part in this study will benefit participants directly. This is because we cannot be sure that we will identify changes in participant's tumour make up that

will indicate that a specific treatment or clinical trial will work better than any other until the study is undertaken. However, participating in the first stage of Precision-Panc study, will enable the collection of tumour samples that can be studied in detail in the second stage of this study (if cancer diagnosis is made). This information from the tumour sample may help to determine which treatment or clinical trial is best suited to your specific cancer. Participants are invited to allow the study to take a further sample of tissue from participants pancreatic lesion or disease elsewhere such as liver or lung (if applicable), during your routine diagnostic procedure. Before a biopsy is carried out, the risks are discussed with participants directly by the clinical team who do the biopsy, and they obtain your consent for it (Screening Consent). They answer any questions that you may have about the biopsy. If you have been diagnosed with pancreatic cancer already, we will ask you to consent to undergo a new biopsy procedure to obtain samples for research use only. The biopsies can be obtained through interventional radiology procedure or endoscopic ultrasound. This has a few small risks due to discomfort with needles. Additional research samples are usually taken at the same time as participants diagnostic biopsy, so it should not cause you additional risk or inconvenience. However, there may be occasions where you are asked to have another biopsy if the previously obtained samples are not good enough for research purposes. There may be additional risks that we do not expect or do not know about.

Where is the study run from? Glasgow Royal Infirmary (UK)

When is the study starting and how long is it expected to run for? April 2017 to March 2022

Who is funding the study?
1. CRUK (UK)
2. Celgene (UK)

Who is the main contact? Ms Judith Dixon-Hughes (Public) judith.dixon@glasgow.ac.uk

Contact information

Type(s)

Public

Contact name

Ms Judith Dixon-Hughes

ORCID ID

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Contact details

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Additional identifiers

Integrated Research Application System (IRAS) 184216

Protocol serial number IRAS184216

Study information

Scientific Title

Precision Panc Master Protocol: Personalising Treatment for Pancreatic Cancer

Acronym

Precision Panc

Study objectives

The overall framework of Precision-Panc aims to accelerate stratified therapeutic development though co-ordination, data sharing and aligned decision-making. This UK-wide Master Protocol will enable the screening and molecular profiling of patients with pancreatic cancer, embedded within the standard diagnostic pathway to subsequent enrolment in available Pancreatic canceR Individualised Multi-arm Umbrella Study (PRIMUS) studies. PRIMUS is the set of clinical trials where patients may be recruited to the most suitable treatment studies based on their molecular phenotype and/or integrated with biomarker discovery and validation approaches. We aim to create a patient-focused environment where attractive trial options are offered to as many patients and their treating clinicians as possible. The aim is to identify the right trial for the patient, rather than current approaches where we search for patients for a specific trial. By offering a range of attractive options for patients and clinicians, we envisage significant increases in recruitment. In addition, Precision-Panc will also provide a platform for drug development in partnership with industry, by screening and identifying subgroup of patients with candidate biomarker of therapeutic responsiveness.

The outcomes of the patients will be recorded on the Master Protocol or the PRIMUS studies. Precision-Panc Master Protocol will serve not only as a molecular profiling platform for PRIMUS clinical trials, but also a translational research platform. The molecular profiling data generated along with the outcome data will be essential in the delineation of molecular mechanisms important in the pathophysiology of pancreatic cancer. This in turn will provide significant opportunities to understand the molecular pathology of pancreatic cancer better, and to identify candidate biomarkers for available therapeutic options and define therapeutic targets for novel drug development.

Ethics approval required

Old ethics approval format

Ethics approval(s)

West of Scotland REC 1, 27/09/2017, ref: 17/WS/0147

Study design

Interventional non randomised study

Primary study design

Interventional

Study type(s)

Diagnostic

Health condition(s) or problem(s) studied

Pancreatic Cancer

Interventions

Patients with either suspected or confirmed pancreatic cancer are approached to take part in the study and given the Precision Panc Screening PIS. Participants are given time to consider trial participation and if they are willing to take part in the study they are screened onto the study. If the patient has suspected pancreatic cancer and are having a standard of care diagnostic biopsy, extra cores are taken at that time for the Precision Panc study. If pancreatic ductal adenocarcinoma is confirmed the patient are then given the registration PIS/consent which allows for molecular profiling to take place on the extra tissue taken for research. If the patient already has a diagnosis of pancreatic ductal adenocarcinoma they are asked to undergo and additional research biopsy for the study. All participants are also asked to provide a blood sample for research. The tissue (either the extra diagnostic tissue or the research biopsy) and blood sample are sent to Glasgow for molecular profiling and if enough tissue is available for profiling they may be eligible for an open PRIMUS study.

Intervention Type

Procedure/Surgery

Primary outcome(s)

To establish a mechanism and framework to recruit and screen patients with pancreatic cancer to perform molecular profiling, evaluation of circulating biomarkers and allow enrolment to Precision Panc PRIMUS studies. This will be measured by the number of patients screened and registered to the study and the number of patients where a molecular profile is obtained. The number of patients registered to Precision Panc who then go onto a PRIMUS study will also be measured

Key secondary outcome(s))

- 1. To assess the overall survival (OS) in patients enrolled in Precision-Panc and relate this to molecular profile information
- 2. To assess the safety of obtaining tumour biopsies suitable for molecular profiling within a standard patient treatment pathway
- 3. To establish a central repository of molecular profiles with accompanying phenotypic data and accompanying biospecimens for further translational research
- 4. To establish a dynamic platform for evaluation of circulating biomarkers to subsequently inform design of subsequent clinical studies

Completion date

30/03/2022

Eligibility

Key inclusion criteria

- 1. Adult patients (age >16 years)
- 2. With either:
- 2.1. Presence of a hypodense pancreatic mass highly suspicious of primary pancreatic cancer with or without distant metastasis as assessed by a Pancreatic Multi-Disciplinary Team (MDT) or
- 2.2. Histologically or cytologically confirmed pancreatic ductal adenocarcinoma and its variants
- 3. Patient is willing and able to undergo tumour biopsy aimed at obtaining sufficient tissue for molecular profiling
- 4. Patient is deemed suitable to receive chemotherapy and/or radiotherapy, and/or surgery pending stage of disease at presentation
- 5. Signed informed consent for screening research tumour biopsy (Consent 1)
- 6. Signed informed consent for Precision-Panc Master Protocol molecular profiling (Consent 2)

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

Αll

Key exclusion criteria

There is no participant exclusion criteria.

Date of first enrolment

14/12/2017

Date of final enrolment

29/03/2022

Locations

Countries of recruitment

United Kingdom

England

Northern Ireland

Scotland

Study participating centre

Glasgow Royal Infirmary

84 Castle Street Glasgow United Kingdom G4 0SF

Study participating centre Aberdeen Royal Infirmary

Aberdeen United Kingdom AB25 2ZN

Study participating centre Royal Marsden Hospital

London United Kingdom SW3 6JJ

Study participating centre UCLH

London United Kingdom NW1 2BU

Study participating centre Addenbrookes Hospital

Cambridge United Kingdom CB2 0QQ.

Study participating centre Christie, Manchester

Manchester United Kingdom M20 4BX

Study participating centre Weston Park Sheffield

United Kingdom S10 2SJ

S10 2SJ

Study participating centre
Bristol Oncology Centre
Bristol
United Kingdom

Study participating centre Imperial College London London United Kingdom SW7 2BX

Study participating centre
Nottingham University Healthcare Trust
Nottingham
United Kingdom
NG5 1PB

Study participating centre Royal Free London Hospital London United Kingdom NW3 2QG

Study participating centre Ninewells Hospital Dundee United Kingdom DD2 1UB

Study participating centre St George's Hospital London United Kingdom SW17 0QT

Study participating centre Southampton University Hospital

Southampton United Kingdom SO16 6YD

Study participating centre Queen Elizabeth Hospital Birmingham Rismingham

Birmingham United Kingdom B15 2WB

Study participating centre King's College Hospital

London United Kingdom SE5 9RS

Study participating centre Churchill Hospital

Oxford United Kingdom OX3 7LE

Study participating centre Castle Hill Hospital

Cottingham United Kingdom HU16 5JQ

Study participating centre Poole Hospital

Poole United Kingdom BH15 2JB

Study participating centre

Freeman Hospital

Newcastle United Kingdom NE7 7DN

Study participating centre Royal Bournemouth Hospital

Bournemouth United Kingdom BH7 7DW

Study participating centre Royal Albert Edward Infirmary

Wigan United Kingdom WN1 2NN

Study participating centre Northern Ireland Cancer Centre

Belfast United Kingdom BT9 7JL

Study participating centre Western General Infirmary

Edinburgh United Kingdom EH4 2XU

Study participating centre Raigmore Hospital

Inverness United Kingdom IV2 3DZ

Study participating centre

Royal Liverpool Hospital

Liverpool United Kingdom L7 8XP

Study participating centre
Huddersfield Royal Infirmary
Huddersfield
United Kingdom
HD3 3EA

Sponsor information

Organisation

NHS Greater Glasgow and Clyde

ROR

https://ror.org/05kdz4d87

Funder(s)

Funder type

Charity

Funder Name

CRUK

Funder Name

Celgene

Alternative Name(s)

Celgene Corporation

Funding Body Type

Private sector organisation

Funding Body Subtype

For-profit companies (industry)

Location

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from Judith Dixon at judith.dixon@glasgow.ac.uk

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
HRA research summary			28/06/2023		No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
<u>Protocol file</u>	Study website	06/10/2017	02/04/2019	No	No
Study website		11/11/2025	11/11/2025	No	Yes