



Canadian  
Cancer Clinical  
Trials Network

Canadian Cancer Clinical Trials Network



# Quarter Performance Report

Quarter 4 2015/16: January 1 – March 31, 2016

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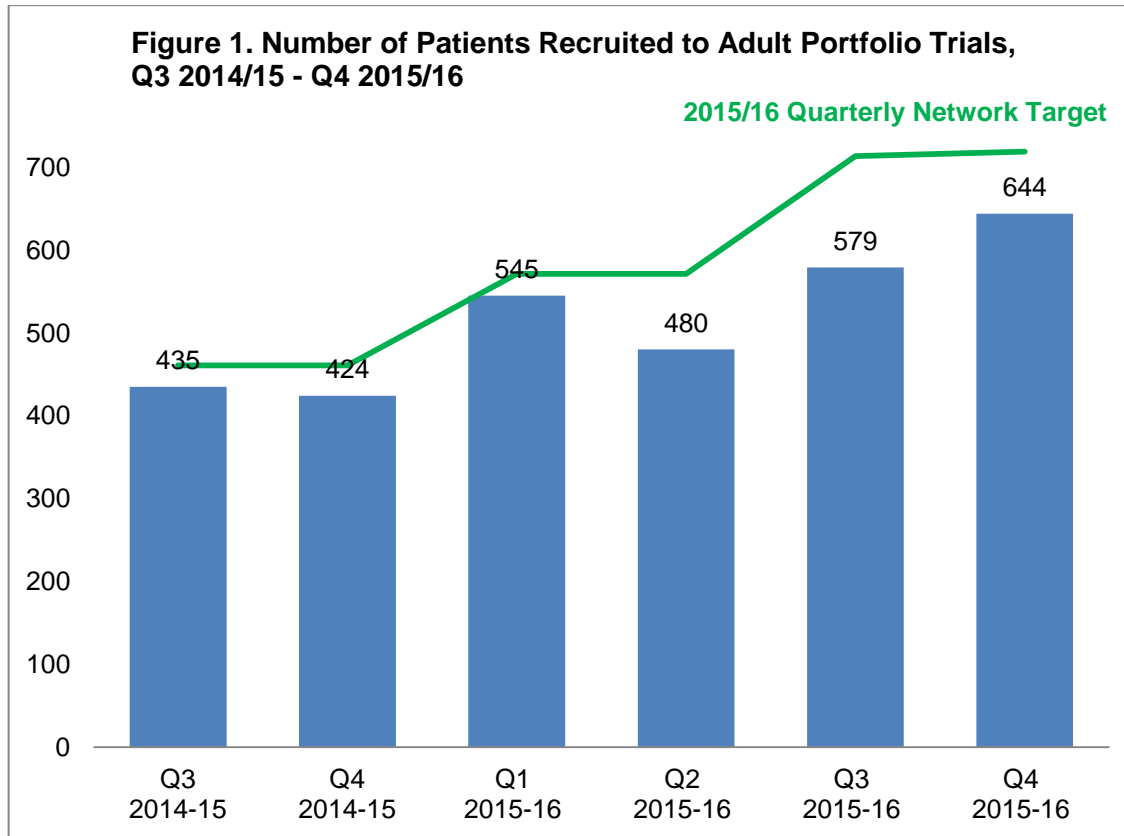
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### Legend:

	below quarter baseline
	exceed quarter baseline

## Section A: Progress at Adult Network Sites

**Objective:** To improve patient access to academic clinical trials: a) Improve adult patient recruitment by greater than 50% within four years



Q4 2015/16 progress against quarterly 2015/16 Network target			
	Actual	Target	Difference
Accrual	644	719	-75
% above baseline	106%	125%	⚠️

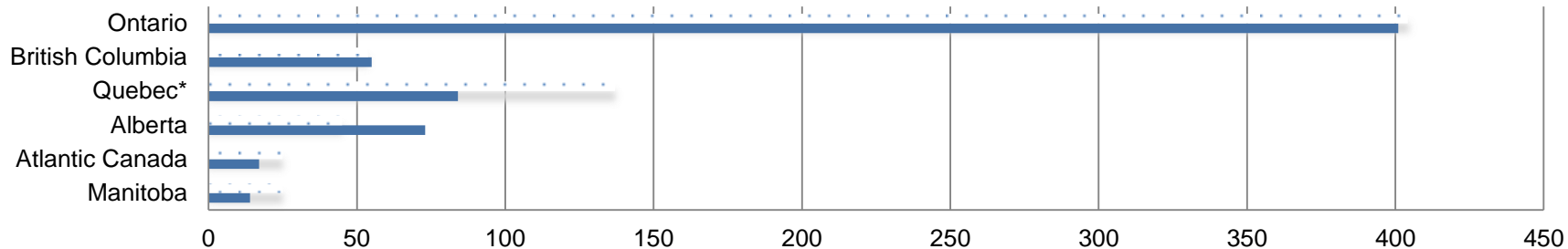
### Notes:

- 644 patients were recruited to adult Portfolio trials in Quarter 4 2015/16. The quarterly Network target for 2015/16 is 639 patients recruited to meet an annual target of 2876 patients recruited (25% over baseline). The Network is 19% below its quarterly target for recruitment
- Data includes adult sites with formal Agreements with 3CTN (N=48).
- The Network target is the target recruitment per year, as defined in the 3CTN business plan. The site target is the target recruitment per year as defined in the Agreement between 3CTN and sites. 2 Qs' accrual from Quebec sites and Mount Sinai Hospital; 1 Q from St Joseph Hamilton, % to prorated baseline for these 12 sites.

### 3CTN Actions to Improve Performance:

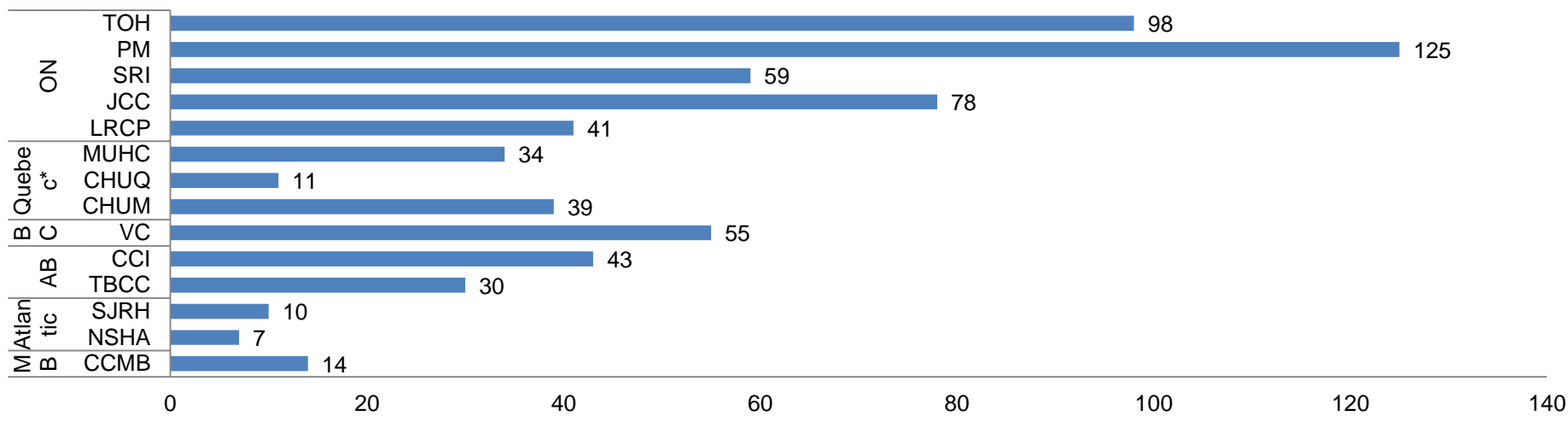
- Development of a recruitment best practices guide by the Performance Strategy Team
- Hosted a Recruitment Workshop and sites are implementing recruitment tools and best practices
- Increased communications (e.g., monthly report of new trials added to portfolio, quarterly recruitment discussions, feature trials in monthly newsletter)
- Publicizing N2's new patient education and awareness website
- Sharing of templates/tools to support recruitment to individual trials across the Network
- Rolled out Ask Me Campaign and site training

**Figure 2. Number of patients recruited to adult Network sites per region in Q4 2015/16**

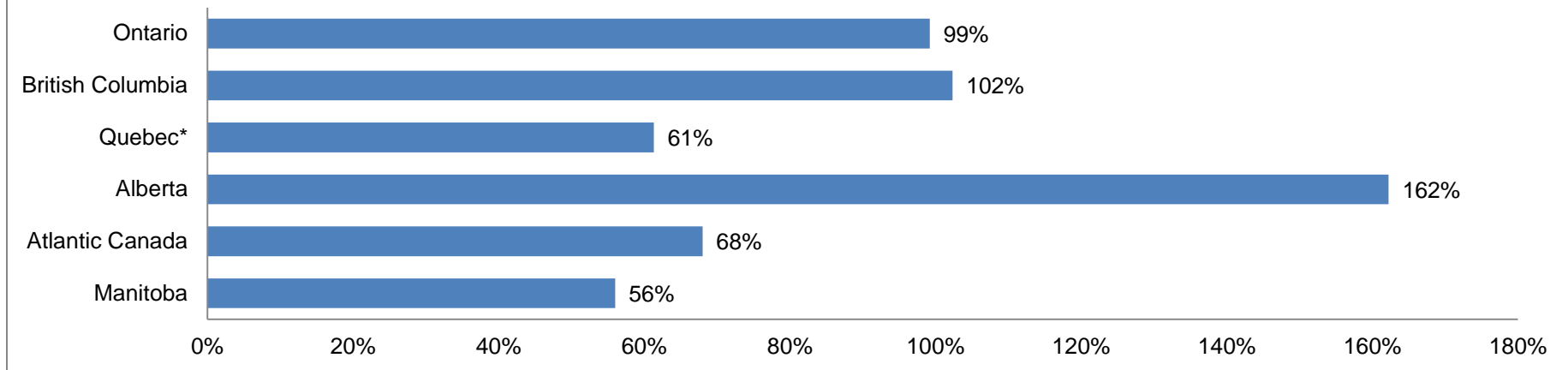


	Manitoba	Atlantic Canada	Alberta	Quebec*	British Columbia	Ontario
· 2015/16 Quarterly Baseline	25	25	45	137	54	404
■ Y2Q4 Actual	14	17	73	84	55	401

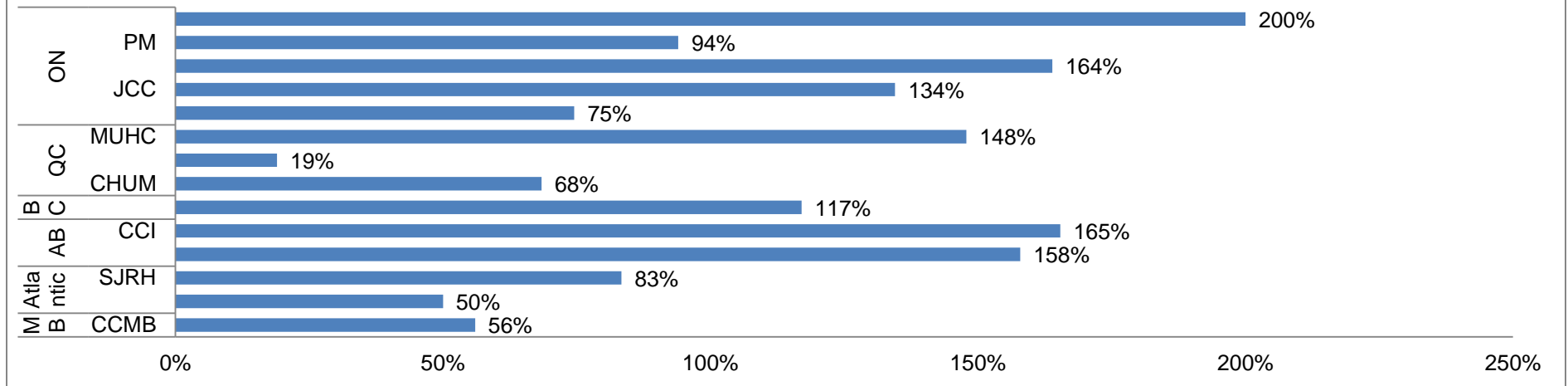
**Figure 3. Number of patients recruited to adult Network sites per local-regional node (NCC + NACC) in Q4 2015/16**



**Figure 4. Progress to quarterly recruitment baseline at adult Network sites per region in Q4 2015/16**



**Figure 5. Percentage of patients recruited to quarter baseline of adult Network sites per local-regional node (NCC + NACC) in Q4 2015/16**

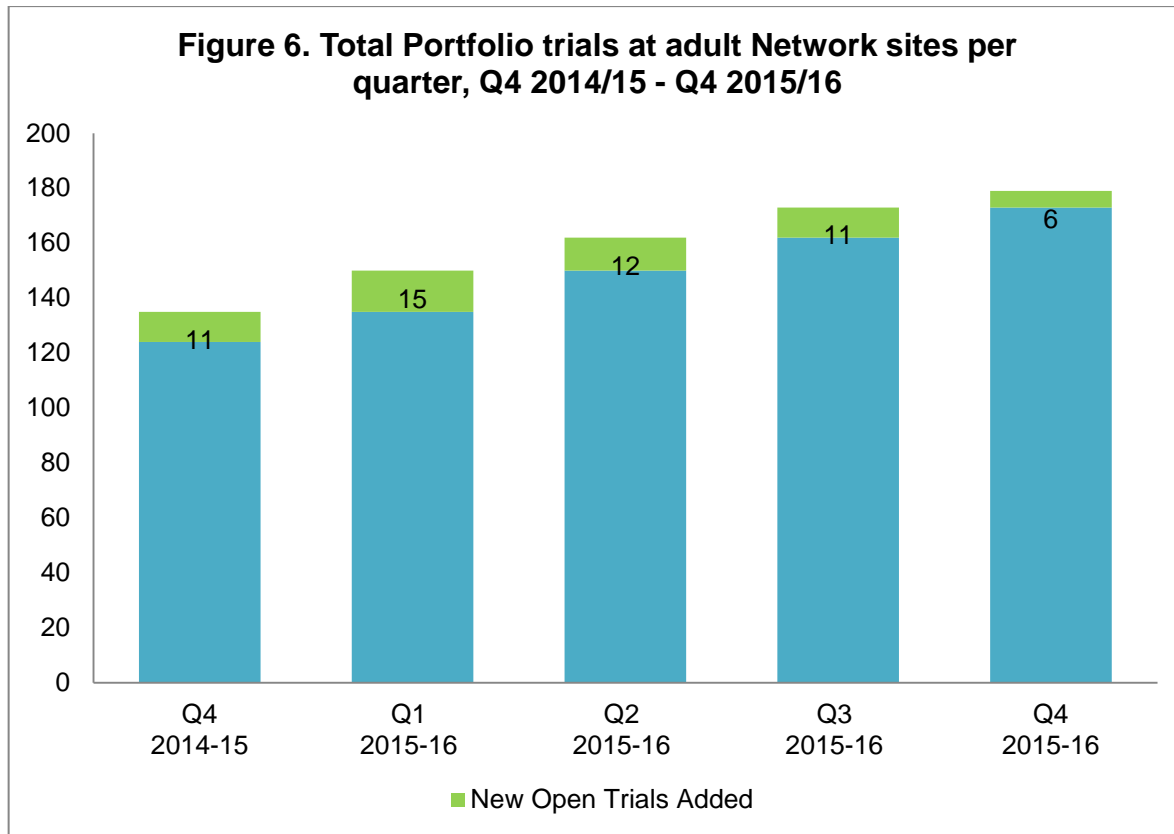


**Table 1. Number of patients recruited per adult Network site**

Network Site	Annual Baseline	Quarter Baseline	Q3 2014-15	Q4 2014-15	Q1 2015-16	Q2 2015-16	Q3 2015-16	Q4 2015-16	YTD	Q4 Actual vs. Baseline
London Regional Cancer Program	186	47	36	35	53	33	45	33	164	⊗
Grand River Regional Cancer centre	20	5	6	6	1	4	5	3	13	⊗
Windsor Regional Hospital	14	4	4	4	4	3	5	5	17	⊙
Juravinski Cancer Centre	181	45	51	59	70	63	50	48	231	⊙
Niagara Health System	17	4	2	2	6	8	3	5	22	⊙
Cambridge Memorial Hospital	11	3	1	1	2	0	0	0	2	⊗
St. Joseph Healthcare Hamilton	21	5	-	-	-	-	-	25	25	⊙
Sunnybrook Research Institute	141	35	50	63	77	58	39	56	230	⊙
North York General Hospital	0	0	1	2	0	0	1	3	4	⊙
Toronto East General Hospital	2	1	0	0	2	0	0	0	2	⊗
Humber River Hospital	0	0	0	0	1	1	0	0	2	⊙
Princess Margaret Cancer Centre	396	99	86	66	79	76	110	98	363	⊗
Northeast Cancer Centre - Health Sciences North	24	6	0	2	3	5	2	7	17	⊙
Trillium Health Partners	27	7	2	3	1	4	0	0	5	⊗
Thunder Bay Regional Health Sciences Centre	26	7	2	0	1	0	1	1	3	⊗
Southlake Regional Health Centre	10	3	0	1	3	2	2	8	15	⊙
Royal Victoria Hospital	8	2	6	2	7	2	4	5	18	⊙
St. Michael's Hospital	19	5	3	1	0	0	0	0	0	⊗
William Osler Health System	1	0	0	0	0	0	0	0	0	⊗
Markham Stouffville Hospital	0	0	0	0	0	0	0	0	0	⊙
Mount Sinai Hospital	21	5	-	-	-	-	6	6	12	⊙
The Ottawa Hospital	132	33	31	28	54	50	72	64	240	⊙
Kingston General Hospital	41	10	17	6	12	11	11	24	58	⊙
Lakeridge Health	22	6	4	2	4	9	3	10	26	⊙
NRCC Ontario Subtotal	1320	330	302	283	380	329	359	401	1469	⊙
CancerCare Manitoba	99	25	17	21	26	14	18	14	72	⊗
Saskatoon Cancer Centre	-	-	-	-	-	-	-	-	-	-
CancerCare Manitoba	99	25	17	21	26	14	18	14	72	⊗
Saint John Regional Hospital	37	9	5	6	2	3	3	8	16	⊗
Dr. Everett Chalmers Hospital	1	0	0	1	0	0	0	0	0	⊗
The Moncton Hospital	-	-	-	-	-	-	-	-	-	-
Dr. Léon-Richard Oncology Centre	9	2	1	1	0	1	1	2	4	⊗
Nova Scotia Health Authority (old name: ACCRU)	39	10	1	3	13	9	1	1	24	⊗
Cape Breton Cancer Centre	-	-	-	-	-	-	-	-	-	-
PEI Cancer Treatment Centre	8	2	0	1	4	4	0	0	8	⊗
Nova Scotia Health Authority, Hematology	7	2	8	5	14	4	1	6	25	⊙
Atlantic NRCC total	101	25	15	17	33	21	6	17	77	⊗

Network Site	Annual Baseline	Quarter Baseline	Q3 2014-15	Q4 2014-15	Q1 2015-16	Q2 2015-16	Q3 2015-16	Q4 2015-16	YTD	Q4 Actual vs. Baseline
Vancouver Centre	106	27	33	28	27	30	28	24	109	✗
Abbotsford Centre	16	4	5	7	7	5	10	6	28	✓
Centre for the North/Prince George	1	0	2	1	0	1	1	3	5	✓
Sindi Ahluwalia Hawkins Centre for the Southern Interior	38	10	10	17	9	11	10	8	38	✗
Fraser Valley Centre	-	-	-	-	-	-	-	-	-	
Vancouver Island Centre	26	7	3	5	12	4	12	14	42	✓
<b>BCCA NRCC total</b>	<b>187</b>	<b>47</b>	<b>53</b>	<b>58</b>	<b>55</b>	<b>51</b>	<b>61</b>	<b>55</b>	<b>222</b>	✓
McGill University Health Centre (MUHC)	-	-	-	-	-	-	-	-	-	
CIUSSS de l'Ouest-de-l'Île-de-Montréal* (CIUSSS ODIM)	-	-	-	-	-	-	-	-	-	
CIUSSS du Centre-Ouest-de-l'Île-de-Montréal* (CIUSSS CODIM)	87	22	-	-	-	-	27	34	61	✓
CISSS de l'Outaouais*	3	1	-	-	-	-	0	0	0	✗
CHU de Québec – Université Laval*	180	45	-	-	-	-	8	2	10	✗
CISSS du Bas-Saint-Laurent* (CISSS-BSL)	4	1	-	-	-	-	0	0	0	✗
Institut universitaire de cardiologie et de pneumologie de Québec* (IUCPQ)	-	-	-	-	-	-	-	-	-	
CIUSSS de l'Estrie – Centre hospitalier universitaire de Sherbrooke* (CIUSSS-Estrie-CHUS)	46	12	-	-	-	-	7	9	16	✗
CISSS de Chaudière-Appalaches* (CISSS CA)	-	-	-	-	-	-	-	-	-	
Centre Hospitalier de l'Université de Montréal (CHUM)*	153	38	-	-	-	-	25	32	57	✗
CIUSSS de la Mauricie-et-du-Centre-du-Québec* (CIUSSS MCQ)	8	2	-	-	-	-	1	0	1	✗
CISSS de Laval*	4	1	-	-	-	-	2	1	3	✓
CIUSSS du Nord-de-l'Île-de-Montréal* (CIUSSS NDIM)	3	1	-	-	-	-	0	0	0	✗
CIUSSS de l'Est-de-l'Île-de-Montréal* (CIUSSS-EDIM)	60	15	-	-	-	-	5	6	11	✗
<b>QCROC NRCC total</b>	<b>548</b>	<b>137</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>75</b>	<b>84</b>	<b>159</b>	✗
Tom Baker Cancer Centre	76	19	22	20	40	35	33	30	138	✓
Cross Cancer Institute	102	26	26	25	11	30	27	43	111	✓
<b>Alberta NRCC total</b>	<b>178</b>	<b>45</b>	<b>48</b>	<b>45</b>	<b>51</b>	<b>65</b>	<b>60</b>	<b>73</b>	<b>249</b>	✓
<b>Adults total</b>	<b>2433</b>	<b>608</b>	<b>435</b>	<b>424</b>	<b>545</b>	<b>480</b>	<b>579</b>	<b>644</b>	<b>2248</b>	✓

**Objective:** To demonstrate impact of the Network and academic trials on the Canadian Health Care System: a) Develop and maintain a portfolio of academic trials that will ensure the enthusiastic participation of academic trialists and patients and impact patient care.

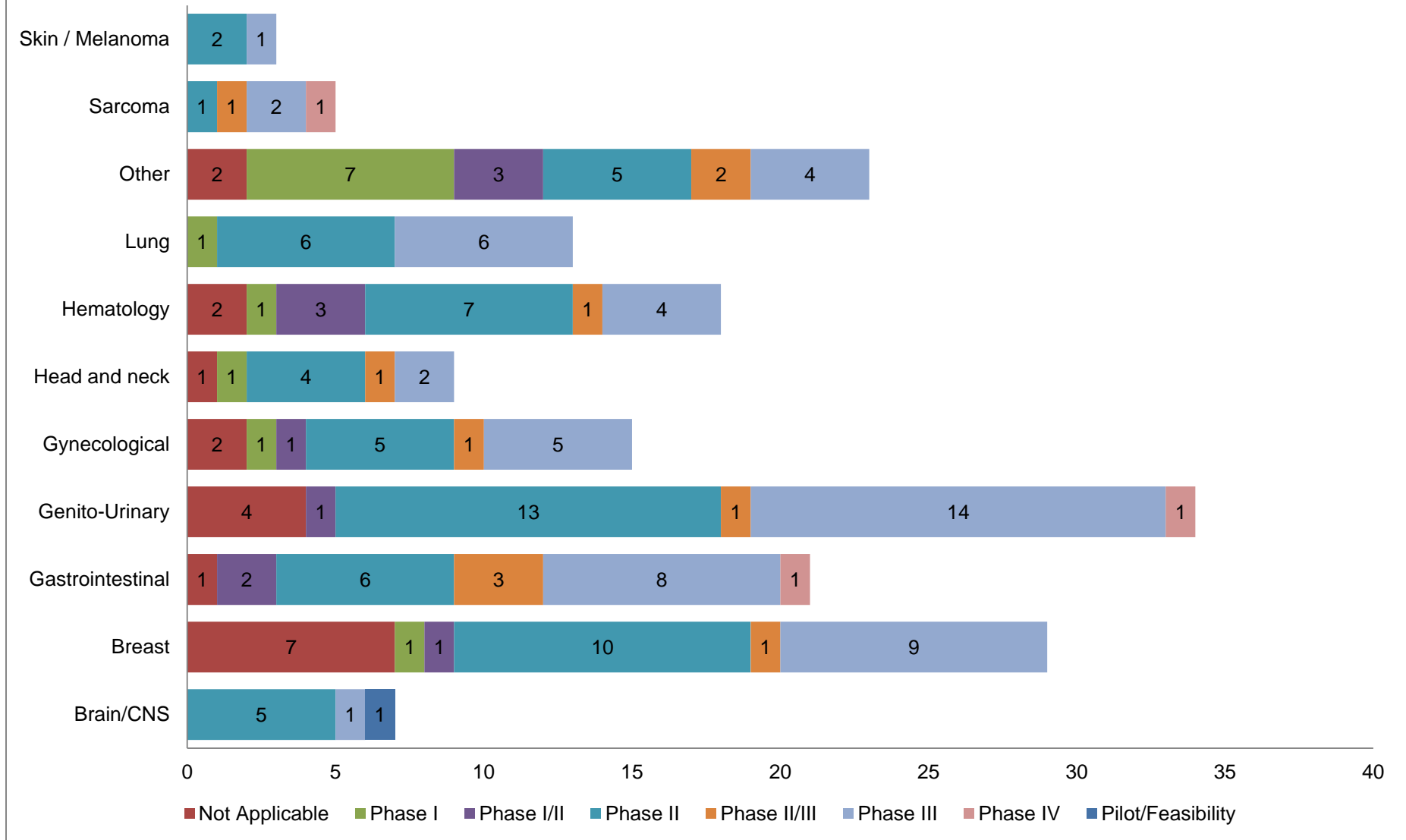


**Notes:**

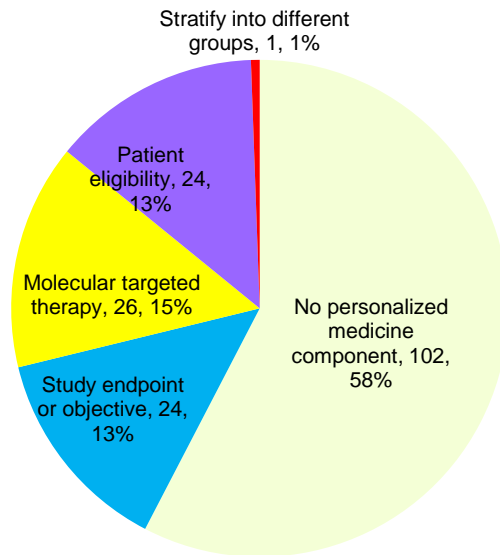
- There were 179 Portfolio trials, including 6 new open to accrual trials added at the end of Quarter 4
- 173 recruiting trial in total for Quarter 4
- Two trials were available at both adult and pediatric Network sites in 2015 and are included in both adult and pediatric figures
- The data provided in Figure 7 are a snapshot of the Portfolio as of April 29, 2016 (n=179)



**Figure 7. Breakdown of Portfolio trials at adult Network sites, as of April 29, 2016**



**Figure 8. Breakdown of personalized medicine trials at adult Network sites, as of April 29, 2016**

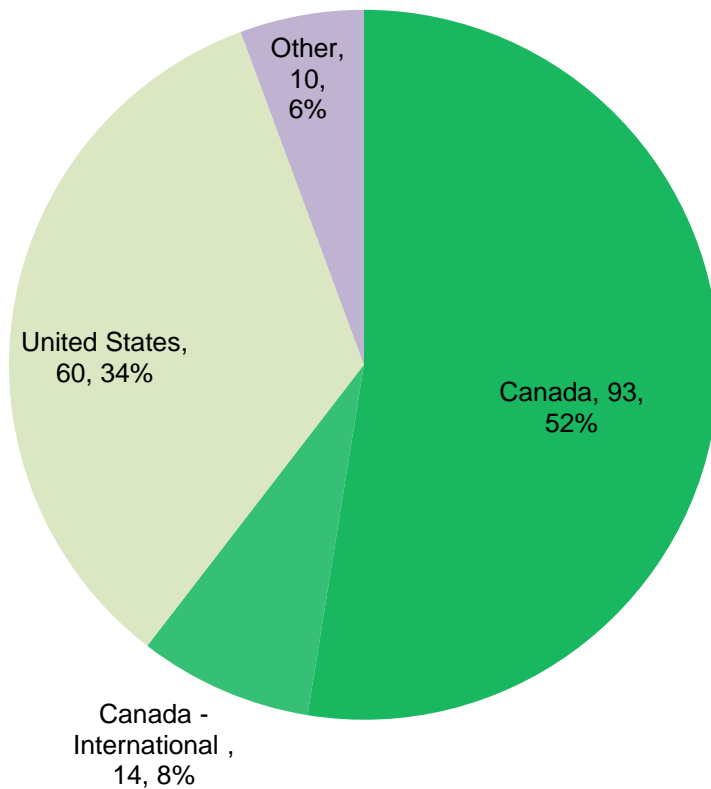


**Notes:**

- Personalized medicine trials open to recruitment at adult Network sites, as of December 31, 2015 (n=173)
- 43% of all trials at adult Network sites have a personalized medicine component
- Two trials were available at both adult and pediatric Network sites in 2015 and are included in both adult and pediatric figures

Category	Definition
Patient eligibility	Use of a genetic marker or other individualized biologic factor to determine if patient is eligible for the trial (i.e. included in trial design via the inclusion/exclusion criteria)
Study endpoint	Use of a genetic marker or other individualized biologic factor to correlate with study endpoint (i.e. included in trial design as an objective or endpoint)
Stratify into different groups	After patient enrollment, trial design uses a genetic marker or other individualized biologic factor to stratify into different groups (i.e. included in trial design to stratify for treatment or analysis groups)
Targeted therapy	Trial is using a molecular targeted therapy; drug used in a “targeted” patient population ( i.e. HER2+ breast cancer gets a HER2 targeted agent)

**Figure 9. Breakdown of Portfolio trials at adult Network centres by lead country, as of April 29, 2016**

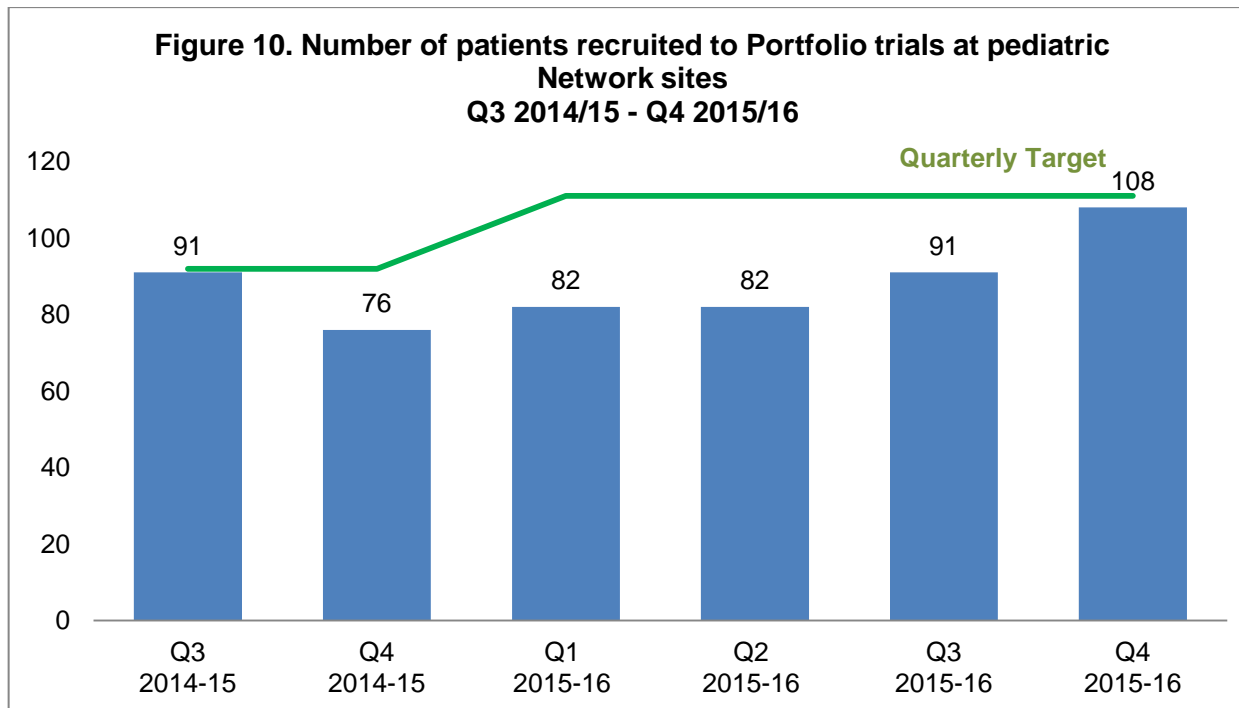


**Notes:**

- Breakdown of trials at adult Network sites by lead country, as of April 29, 2016 (n=177)
- Approx. 60% of all trials at adult Network sites are led by Canada – 8% of which are international, multicentered studies
- The average number of Network sites per trial led by Canada (including international multicentered) is 5.
- Two trials were available at both adult and pediatric Network sites in 2015 and are included in both adult and pediatric figures

## Section B: Progress at Pediatric Network Sites

**Objective:** To improve patient access to academic clinical trials: Improve recruitment of pediatric patients




### Notes:

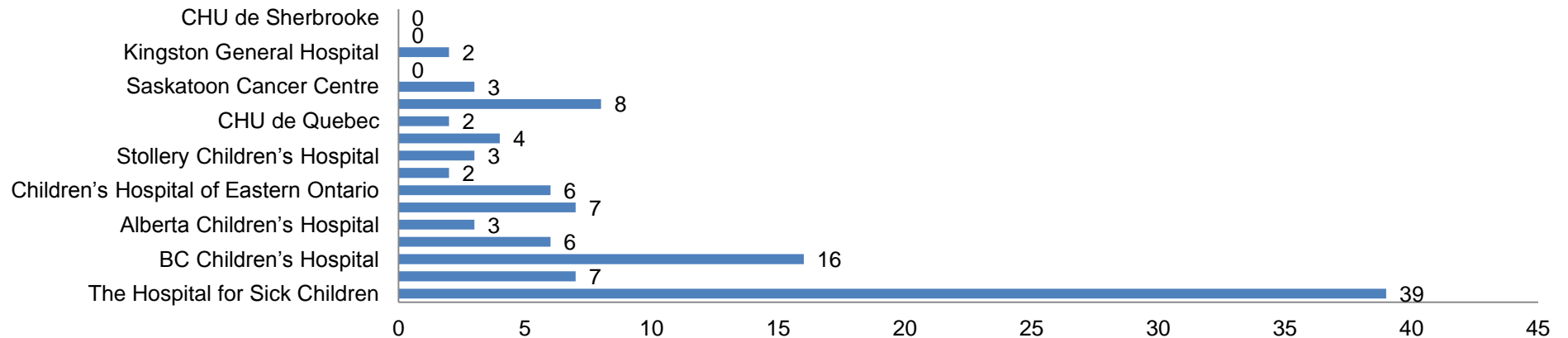
- 108 patients were recruited to Portfolio trials at pediatric Network sites in Quarter 4 2015/16. The quarterly target for 2015/16 is 111 patients recruited to meet an annual target of 443 patients recruited. Pediatric Network sites are 24% below its quarterly target for recruitment
- Data includes pediatric sites associated with the C17 Council (n=17)

### 3CTN Actions to Improve Performance:

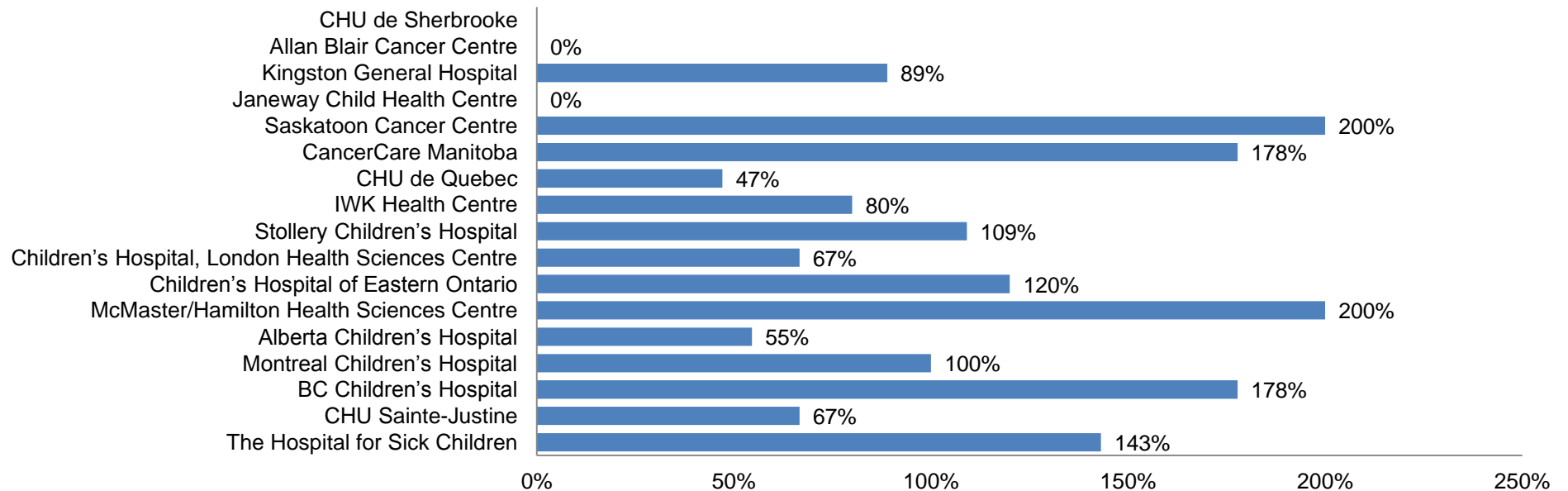
- Development of a recruitment best practices guide by the Performance Strategy Team
- Hosting a Recruitment Workshop to discuss and launch recruitment tools and best practices
- Increased communications (e.g., monthly report of new trials added to portfolio, quarterly recruitment discussions, feature trials in monthly newsletter)
- Publicizing N2's new patient education and awareness website
- Sharing of templates/tools to support recruitment to individual trials across the Network
- Discussion with academic sponsors regarding upcoming new studies

Q4 2015/16 progress against quarterly target			
	Accrual	Target	Difference
Accrual	108	111	3
% above baseline	95.60%	120%	

**Figure 11. Number of patients recruited per pediatric Network site in Q4 2015/16**



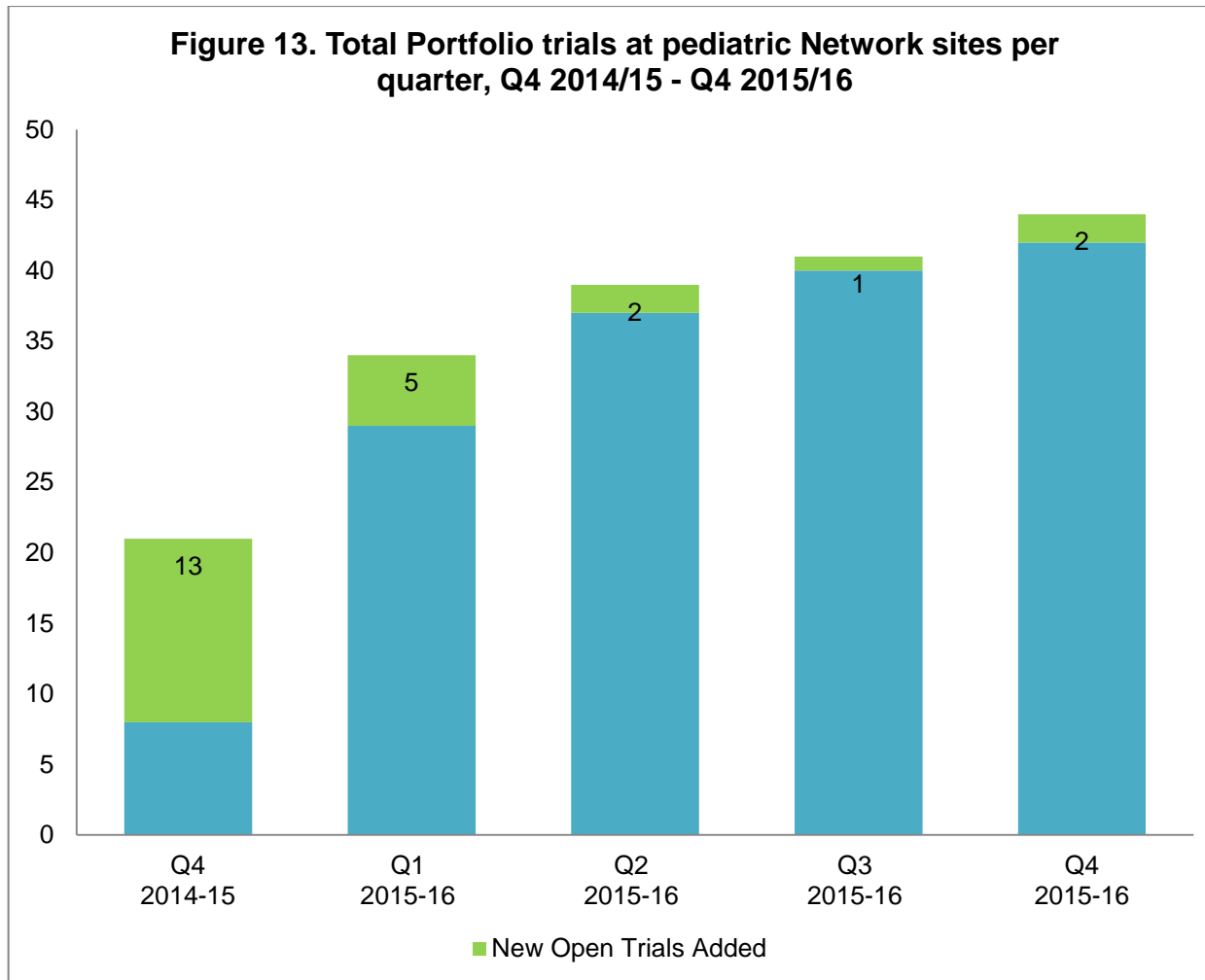
**Figure 12. Progress to quarter baseline recruitment per pediatric Network site in Q4 2015/16**



**Table 2. Number of patients recruited per pediatric Network site**

Network Site	Annual Baseline	Quarter Baseline	Q3 2014-15	Q4 2014-15	Q1 2015-16	Q2 2015-16	Q3 2015-16	Q4 2015-16	YTD	Q4 Actual vs. Baseline
The Hospital for Sick Children	109	27	32	21	25	24	26	39	114	✓
CHU Sainte-Justine	42	11	9	9	10	1	8	7	26	✗
BC Children's Hospital	36	9	9	4	7	12	11	16	46	✓
Montreal Children's Hospital	24	6	3	6	4	5	8	6	23	✓
Alberta Children's Hospital	22	6	5	5	8	7	3	3	21	✗
McMaster/Hamilton Health Sciences Centre	14	4	4	2	4	7	2	7	20	✓
Children's Hospital of Eastern Ontario	20	5	5	5	5	4	3	6	18	✓
Children's Hospital, London Health Sciences Centre	12	3	3	4	2	6	5	2	15	✗
Stollery Children's Hospital	11	3	4	4	3	2	2	3	10	✓
IWK Health Centre	20	5	4	2	6	2	8	4	20	✗
CHU de Quebec	17	4	4	3	2	3	7	2	14	✗
CancerCare Manitoba	18	5	1	4	2	4	6	8	20	✓
Saskatoon Cancer Centre	6	2	5	4	2	1	0	3	6	✓
Janeway Child Health Centre	4	1	1	0	1	1	1	0	3	✗
Kingston General Hospital	9	2	2	3	1	3	1	2	7	✗
Allan Blair Cancer Centre	4	1	0	0	0	0	0	0	0	✗
CHU de Sherbrooke	0	0	0	0	0	0	0	0	0	✓
<b>C17 Total</b>	<b>368</b>	<b>92</b>	<b>91</b>	<b>76</b>	<b>82</b>	<b>82</b>	<b>91</b>	<b>108</b>	<b>363</b>	<b>✓</b>

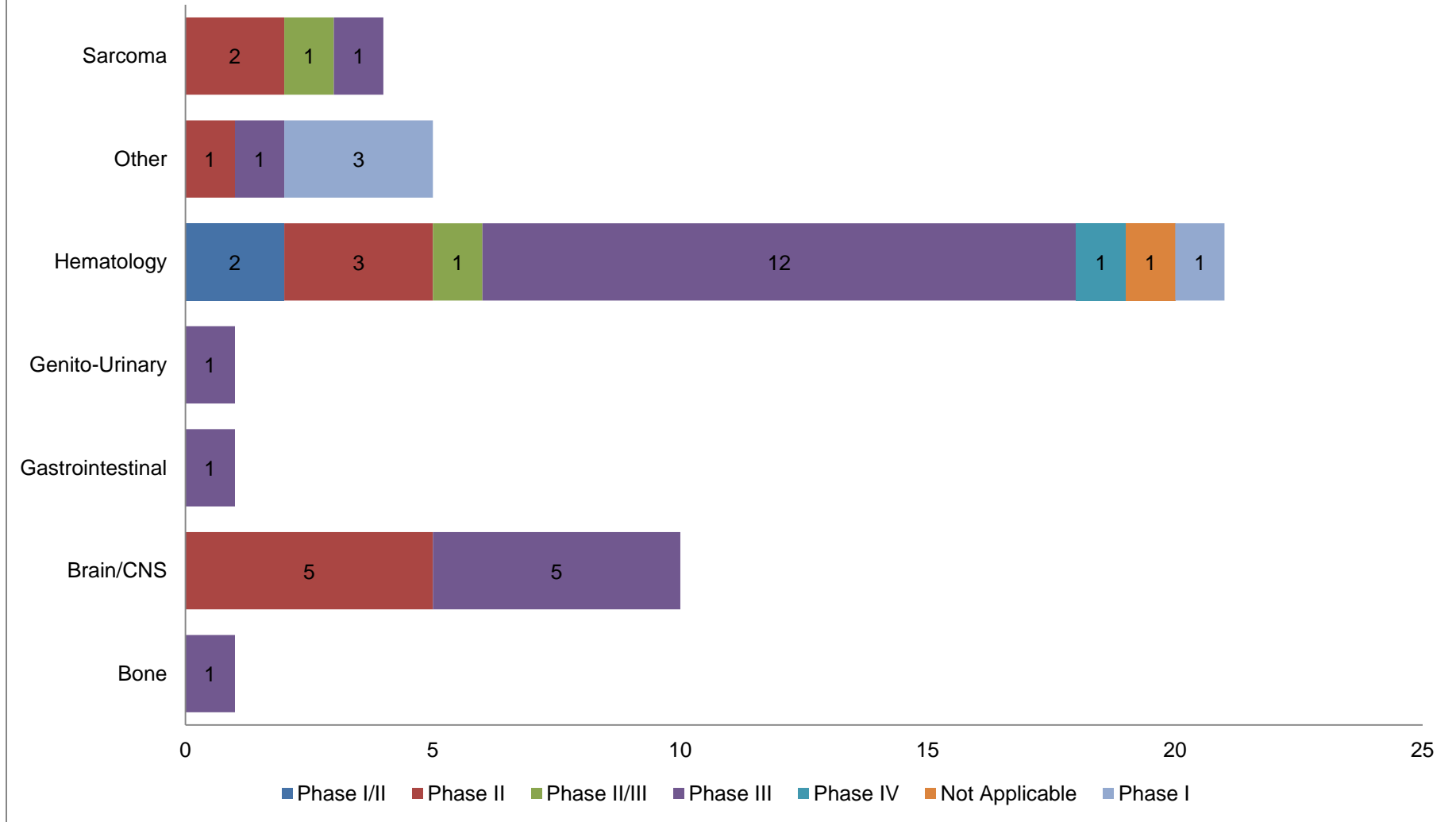
**Objective:** To demonstrate impact of the Network and academic trials on the Canadian Health Care System: a) Develop and maintain a portfolio of academic trials that will ensure the enthusiastic participation of academic trialists and patients and impact patient care.



**Notes:**

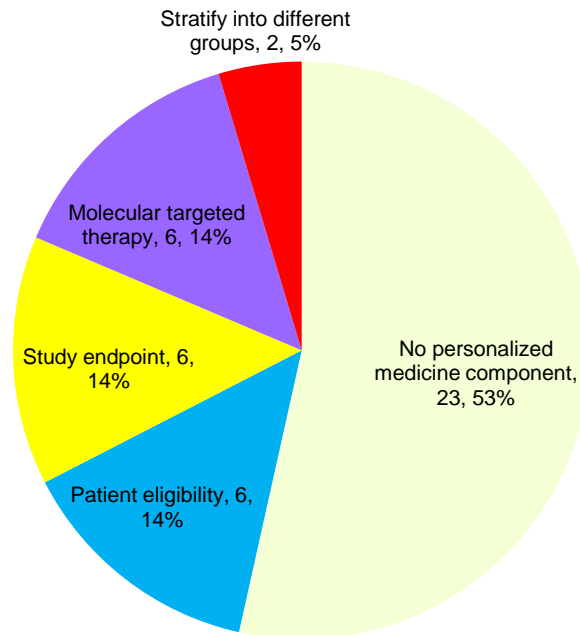
- There were 43 Portfolio trials available at pediatric Network sites, 2 new trials added at the end of Quarter 4
- The data provided in Figure 13 is a snapshot of the Portfolio as of April 29, 2016
- Two trials were available at both adult and pediatric Network sites in 2015 and is included in both adult and pediatric figures

**Figure 14. Breakdown of Portfolio trials at pediatric Network sites, as of April 29,2015**





**Figure 15. Breakdown of personalized medicine trials at pediatric Network sites, as of April 29, 2016**

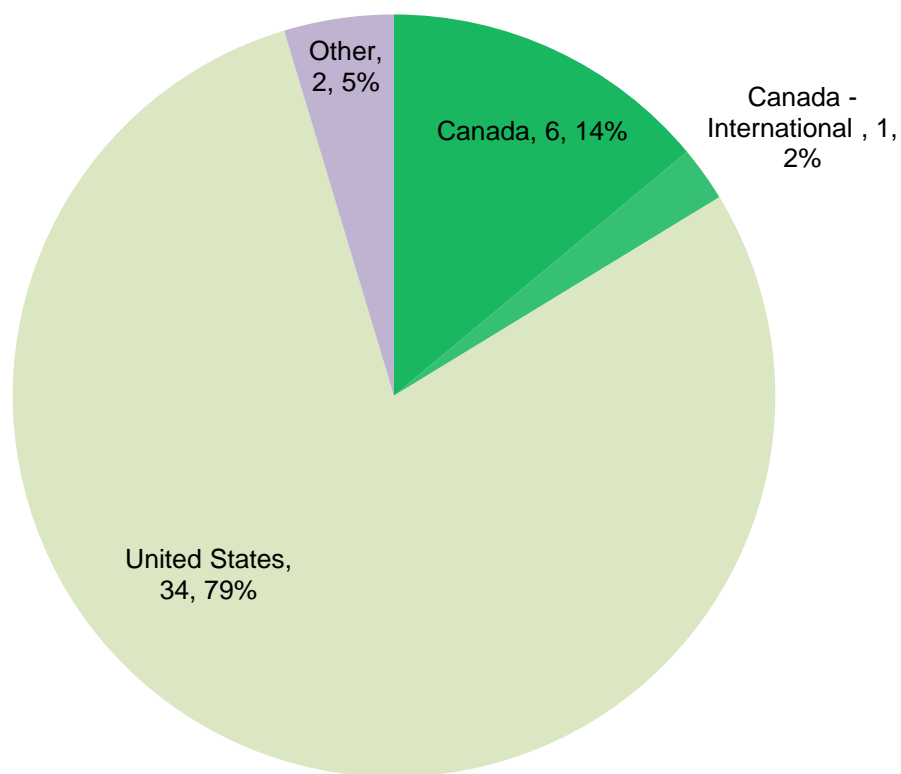


**Notes:**

- Personalized medicine trials at pediatric Network sites, as of April 29, 2016 (n=43)
- 47% of all trials at pediatric Network sites have a personalized medicine component
- Two trials were available at both adult and pediatric Network sites in 2015 and are included in both adult and pediatric figures

Category	Definition
Patient eligibility	Use of a genetic marker or other individualized biologic factor to determine if patient is eligible for the trial (i.e. included in trial design via the inclusion/exclusion criteria)
Study endpoint	Use of a genetic marker or other individualized biologic factor to correlate with study endpoint (i.e. included in trial design as an objective or endpoint)
Stratify into different groups	After patient enrollment, trial design uses a genetic marker or other individualized biologic factor to stratify into different groups (i.e. included in trial design to stratify for treatment or analysis groups)
Targeted therapy	Trial is using a molecular targeted therapy; drug used in a “targeted” patient population ( i.e. HER2+ breast cancer gets a HER2 targeted agent)

**Figure 16. Breakdown of Portfolio trials at pediatric Network centres by lead country, as of April 29, 2016**



**Notes:**

- Breakdown of trials at pediatric Network sites by lead country, as of April 23, 2016 (n=43)
- 14% of all trials at pediatric Network sites are led by Canada – 2% of which are international, multicentered studies
- The average number of Network sites per trial led by Canada (including international multicentered) is 8.
- Two trials were available at both adult and pediatric Network sites in 2015 and are included in both adult and pediatric figures

## Appendix: Additional Notes

Table 3. Reporting periods and dates Q4 2014/15 – Q4 2015/16

Quarter	Period	Recruitment Database Lock
Q3 2014/15	October – December 2014	NA*
Q4 2014/15	January – March 2015	NA*
Q1 2015/16	April – June 2015	NA*
Q2 2015/16	July – September 2015	October 20, 2015
Q3 2015/16	October – December 2015	March 31, 2016
Q4 2015/16	January – March 2016	May 31, 2106

\*Dates not available as database lock implemented in Q2 2015/16