



Canadian
Cancer Clinical
Trials Network

Canadian Cancer Clinical Trials Network



Y2 Performance Report

April 1, 2015 – March 31, 2016

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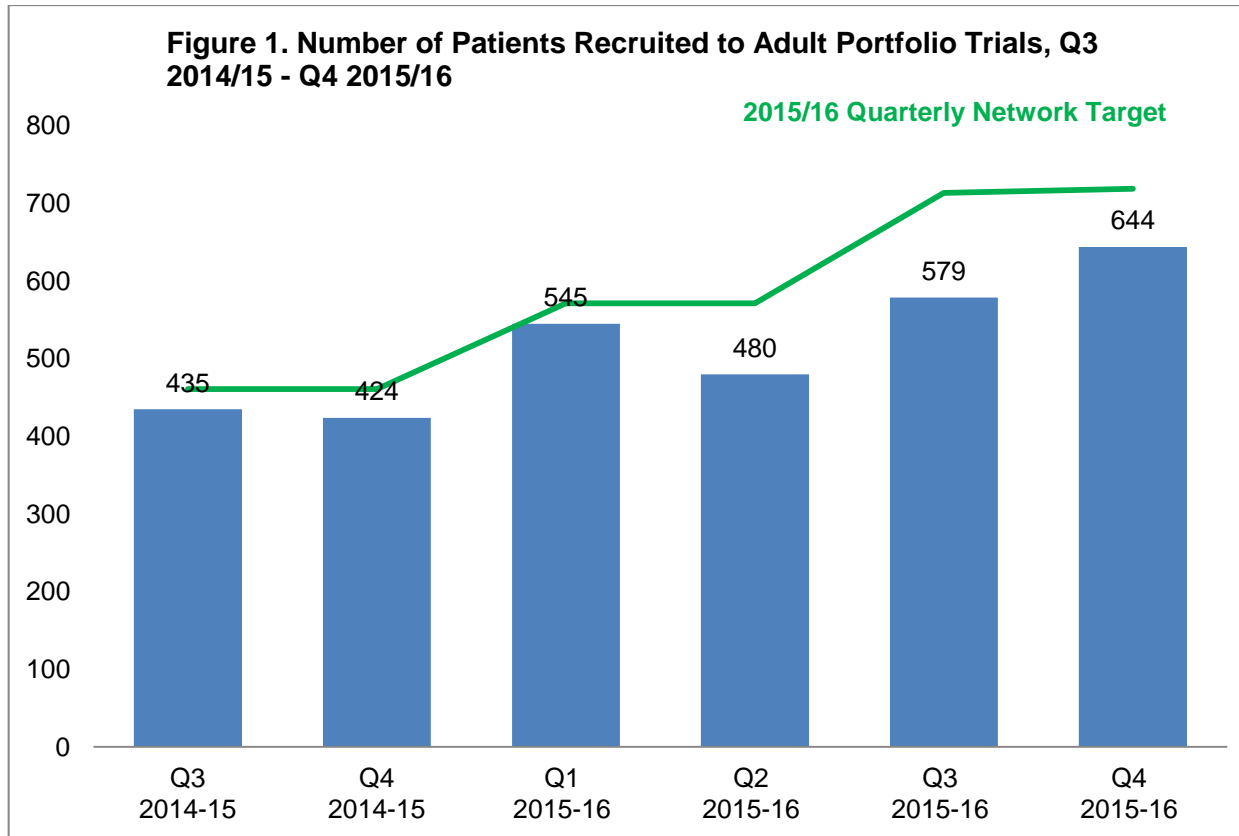
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Legend:

	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



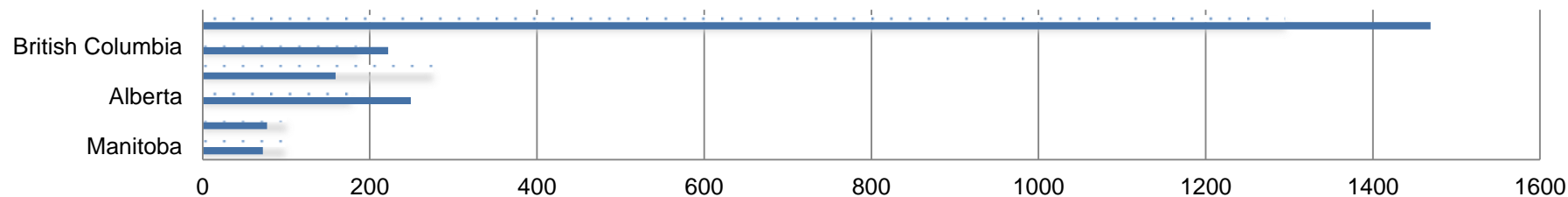
Notes:

- 2248 patients were recruited to adult Portfolio trials in 2015/16. The annual Network target for 2015/16 is 2686 patients (about 25% over baseline). The Network is 20% below its annual network target but 13% below if calculating based on cumulative contract targets.
- 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. Only 2 Qs' accrual from Quebec sites and Mount Sinai Hospital; 1 Q from St Joseph Hamilton, % to prorated baseline for these 12 sites.

2015/16 progress against quarterly 2015/16 Network Target

	Actual	Target	Difference	Y2 Baseline
Accrual	2248	2670	-422	2136
% above baseline	105%	125%	🚩	100%

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



	Manitoba	Atlantic Canada	Alberta	Quebec*	British Columbia	Ontario
Annual Baseline	99	101	178	276	187	1295
■ Y2 Actual	72	77	249	159	222	1469

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

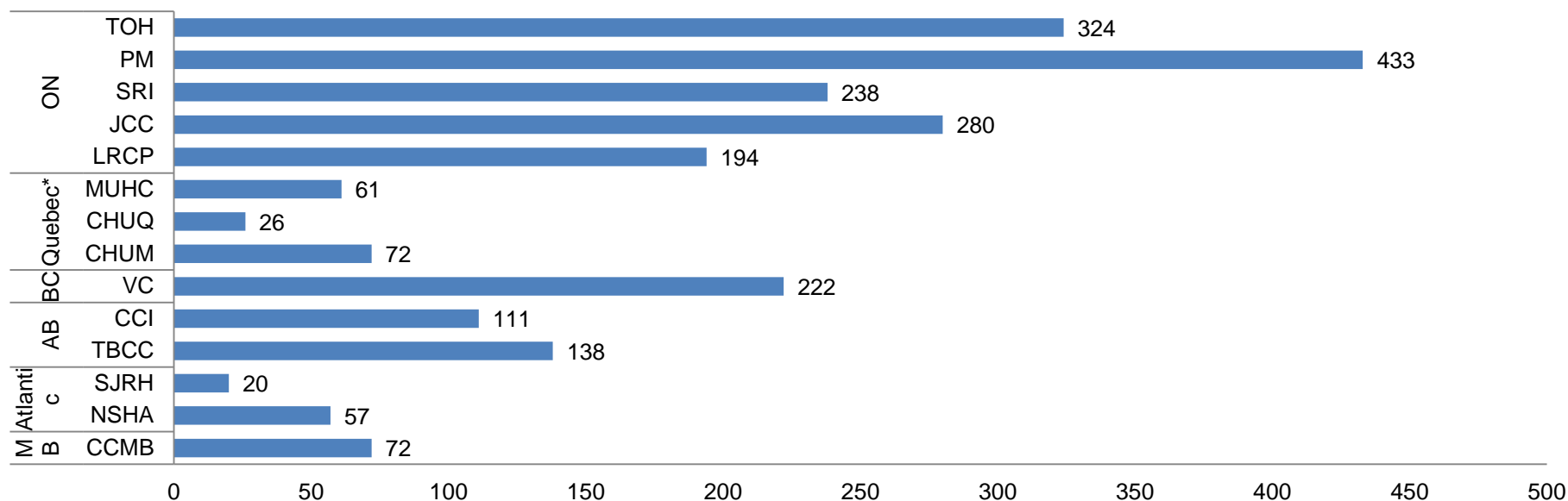


Figure 4. Progress to recruitment baseline at adult Network sites per region in 2015/16

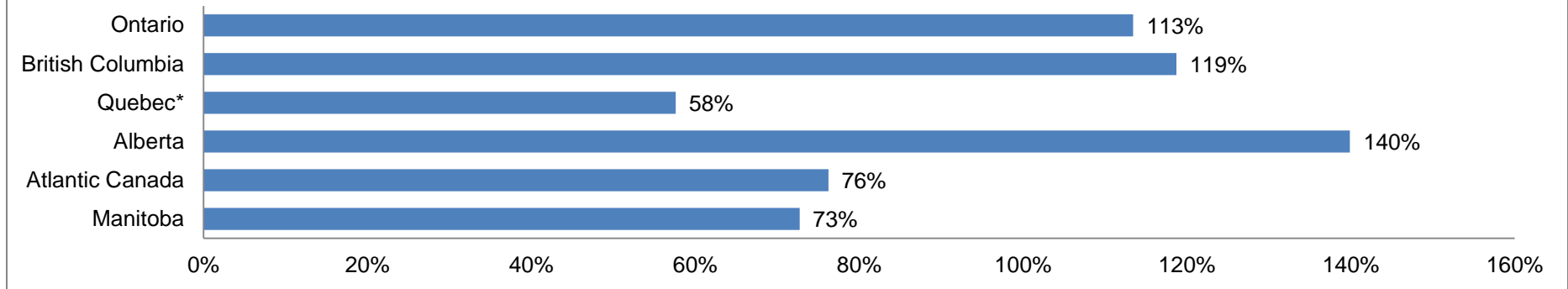


Figure 3. Number of patients recruited to adult Network sites per local-regional node (NCC + NACC) in 2015/16

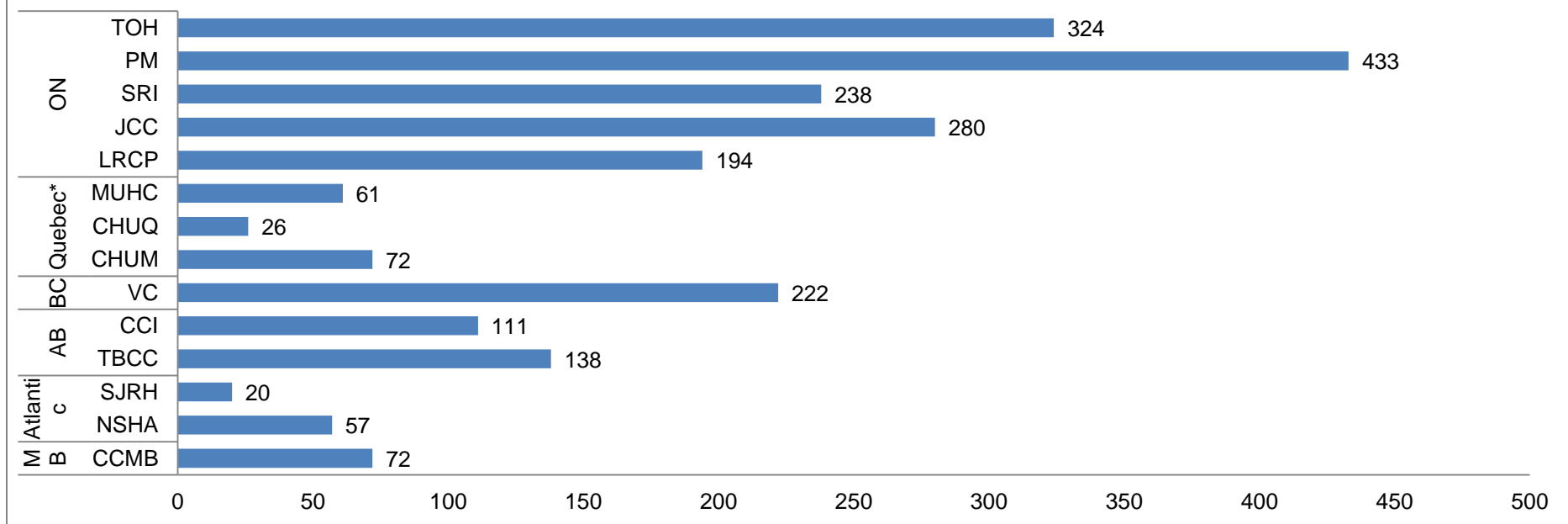


Table 1. Number of patients recruited per adult Network site

Network Site	**Baseline	°Year 2 Target	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Total	% of baseline	% of Target
London Regional Cancer Program	186	233	53	33	45	33	164	88	71
Grand River Regional Cancer Centre	20	25	1	4	5	3	13	65	52
Windsor Regional Hospital	14	18	4	3	5	5	17	121	97
Juravinski Cancer Centre	181	208	70	63	50	48	231	128	111
Niagara Health System	17	20	6	8	3	5	22	129	113
Cambridge Memorial Hospital	11	13	2	0	0	0	2	18	16
St. Joseph Healthcare Hamilton*	6	6	-	-	-	25	25	417	417
Sunnybrook Research Institute	141	169	77	58	39	56	230	163	136
North York General Hospital	0	1	0	0	1	3	4	NA	400
Toronto East General Hospital	2	2	2	0	0	0	2	100	83
Humber River Hospital	0	1	1	1	0	0	2	NA	200
Princess Margaret Cancer Centre	396	495	79	76	110	98	363	92	73
Northeast Cancer Centre - Health Sciences North	24	30	3	5	2	7	17	71	57
Trillium Health Partners	27	34	1	4	0	0	5	19	15
Thunder Bay Regional Health Sciences Centre	26	33	1	0	1	1	3	12	9
Southlake Regional Health Centre	10	13	3	2	2	8	15	150	120
Royal Victoria Hospital	8	10	7	2	4	5	18	225	180
St. Michael's Hospital	19	25	0	0	0	0	0	0	0
William Osler Health System	1	3	0	0	0	0	0	0	0
Markham Stouffville Hospital	0	1	0	0	0	0	0	NA	0
Mount Sinai Hospital*	11	11	-	-	6	6	12	109	109
The Ottawa Hospital	132	165	54	50	72	64	240	182	145
Kingston General Hospital	41	51	12	11	11	24	58	141	113
Lakeridge Health	22	28	4	9	3	10	26	118	95
CancerCare Manitoba	99	119	26	14	18	14	72	73	61
Saint John Regional Hospital	37	44	2	3	3	8	16	43	36
Dr. Everett Chalmers Hospital	1	1	0	0	0	0	0	0	0
The Moncton Hospital****	-	-	-	-	-	-	-	-	-
Dr. Léon-Richard Oncology Centre	9	10	0	1	1	2	4	44	40
Nova Scotia Health Authority	39	47	13	9	1	1	24	62	51
Cape Breton Cancer Centre*****	-	-	-	-	-	-	-	-	-
PEI Cancer Treatment Centre	8	10	4	4	0	0	8	100	83
Nova Scotia Health Authority, Hematology	7	8	14	4	1	6	25	357	298
Vancouver Centre	106	122	27	30	28	24	109	103	89
Abbotsford Centre	16	18	7	5	10	6	28	175	152
Centre for the North	1	2	0	1	1	3	5	500	250
Sindi Ahluwalia Hawkins Centre for the Southern Interior	38	44	9	11	10	8	38	100	87
Fraser Valley Centre****	-	-	-	-	-	-	-	-	-
Vancouver Island Centre	26	30	12	4	12	14	42	162	140

Network Site	**Baseline	°Year 2 Target	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Y2 Total	% of baseline	% of Target
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)*	44	44	-	-	27	34	61	139	139
CISSS de l'Outaouais*	2	2	-	-	0	0	0	0	0
CHU de Québec – Université Laval*	90	90	-	-	8	2	10	11	11
CISSS du Bas-Saint-Laurent(CISSS-BSL)*	2	2	-	-	0	0	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)*	23	23	-	-	7	9	16	70	70
CISSS de Chaudière-Appalaches(CISSS CA)***	-	-	-	-	-	-	-	-	-
Centre Hospitalier de l'Université de Montréal (CHUM)*	77	77	-	-	25	32	57	74	74
CIUSSS de la Mauricie-et-du-Centre-du-Québec (CIUSSS MCQ) *	4	4	-	-	1	0	1	25	25
CISSS de Laval*	2	2	-	-	2	1	3	150	150
CIUSSS du Nord-de-l'Île-de-Montréal(CIUSSS NDIM)*	2	2	-	-	0	0	0	0	0
CIUSSS de l'Est-de-l'Île-de-Montréal(CIUSSS-EDIM)*	30	30	-	-	5	6	11	37	37
Tom Baker Cancer Centre	76	95	40	35	33	30	138	182	145
Cross Cancer Institute	102	128	11	30	27	43	111	109	87
Adult Patients (N=48) Total	2136	2546	545	480	579	644	2248	105	88

Network Site	**Y1 Baseline	**Y2 Baseline	°Year 2 Target	Q3 2014	Q4 2015	% of Y1 baseline	Q1 2015	Q2 2015	Q3 2015	Q4 2015	Y2 Total	% of Y2 baseline	% of Y2 Target
Total (N=65 in Y2 all reporting sites only, N=53 sits for Y1)	1106	2504	2988	526	500	93	627	562	670	752	2611	104	87
Adult Patients (N=48 Total for Y2, and 36 for Y1)	922	2136	2546	435	424	93	545	480	579	644	2248	105	88
Ped sites (N=17) total	184	368	442	91	76	91	82	82	91	108	363	99	82

Total # of sites met baseline or target in Y1

21

Total # of sites met baseline or target in Y2

32

21

Note:

* Not had full year reports, baseline and target numbers were prorated based on the number of quarters they reported

**The baseline is the average number of patients recruited to the 3CTN portfolio from 2011-2013. Y1 is prorated to 0.5 annual baseline as it started Oct 2014

*** No reports available

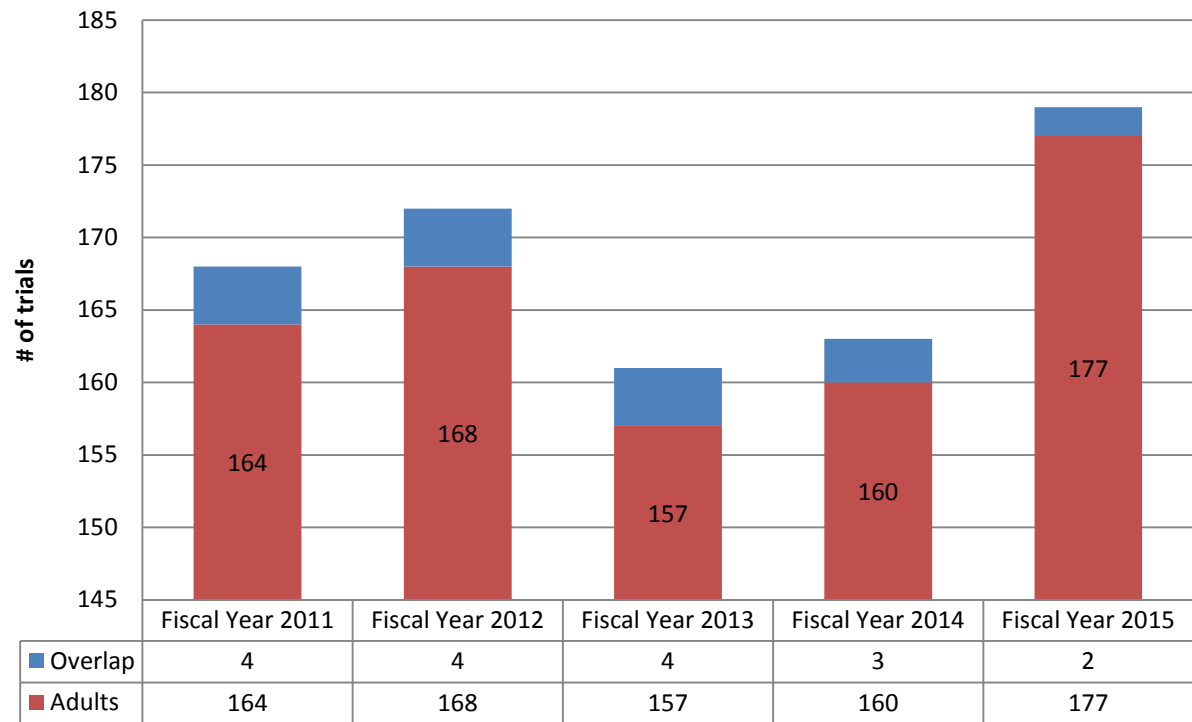
****Future potential NACC

° Year 2 overall target is 25% over the baseline, but some sites have less than 25% target in their contracts. The additional 12 sites have % growth target.

0-49
50-79
80-99
100+

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.

Figure 6. Total Portfolio Trials Year over Year for Adult Network Sites (2011-2015)



Notes:

- These trials are reported based on fiscal year April 2011- March 2016.
- There were 179 Portfolio trials for adult network sites.
- Two available at both adult and pediatric Network sites in 2015 and is included in both adult and pediatric figures
- The data provided in Figure 7 are a snapshot of the Portfolio as of June 8, 2016 (N=179)

Figure 7. Breakdown of Fiscal Year 2015 Portfolio trials at adult Network sites

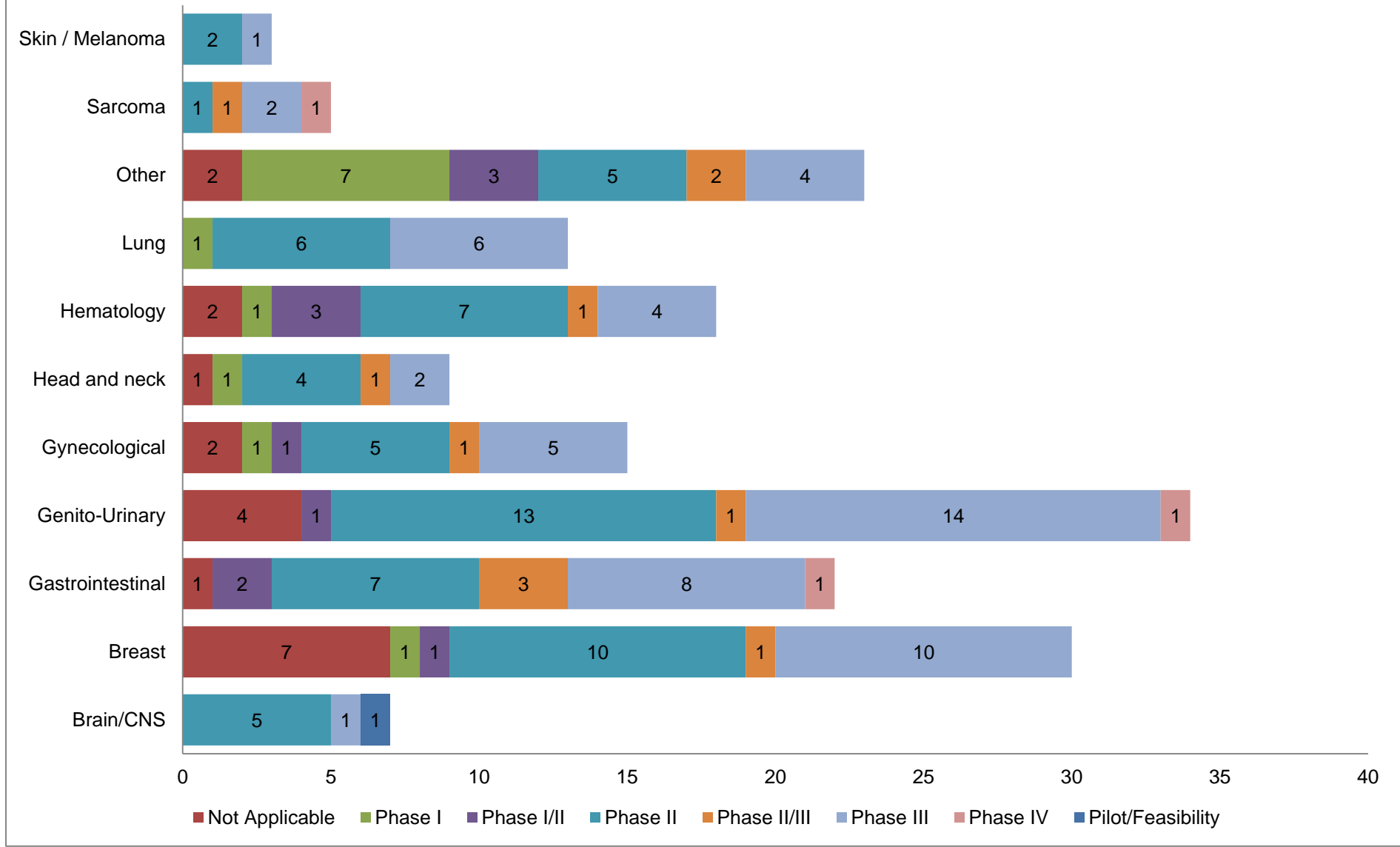
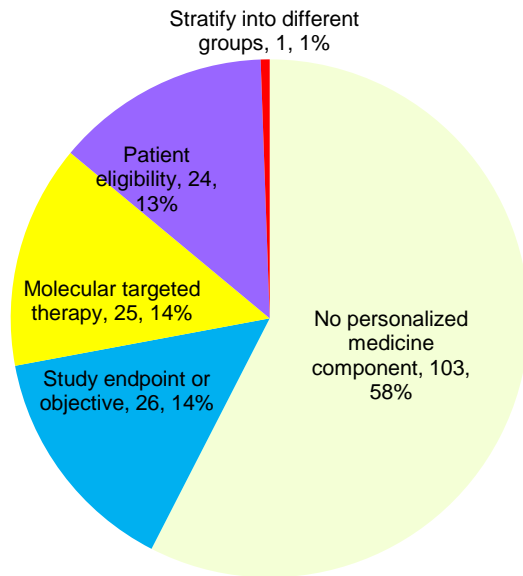


Figure 8. Breakdown of personalized medicine trials at adult Network sites for 2015/2016 Portfolio Trials

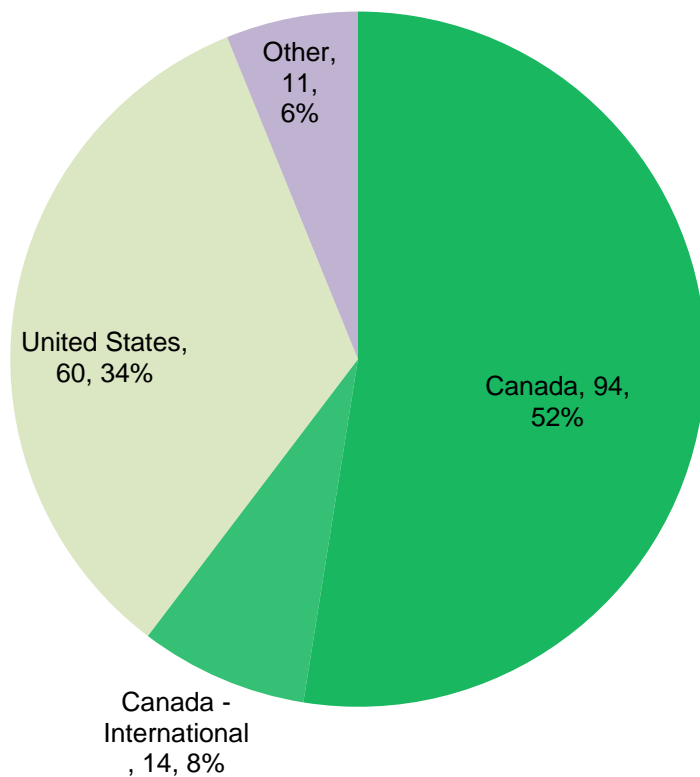


Notes:

- Personalized medicine trials open to recruitment at adult Network sites, as of December 31, 2015 (n=179)
- 42% 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 for 2015/2016
Porforlio Trials

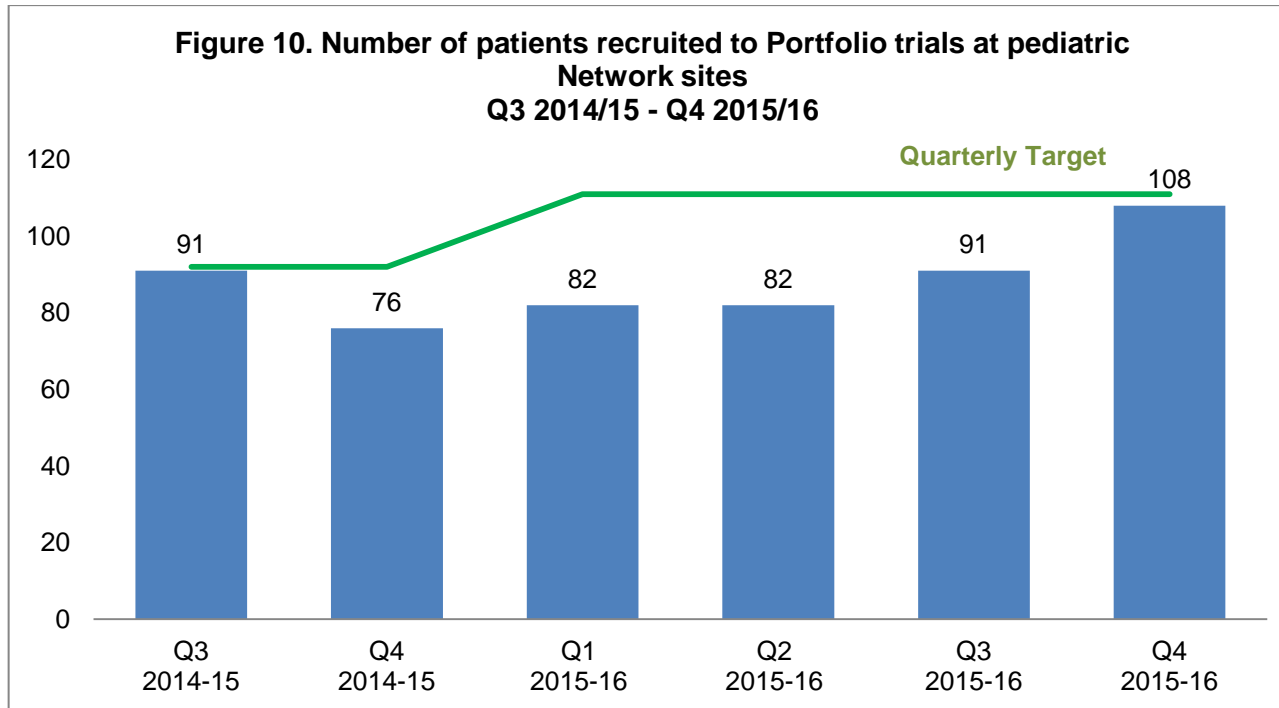


Notes:

- Breakdown of trials at adult Network sites by lead country, as of June 8, 2016 (n=179)
- 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 2016 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:

- 363 patients were recruited to Portfolio trials at pediatric Network sites in 2015/16. The annual target is 442 patients. Pediatric Network sites are 24% below its quarterly target for recruitment
- Data include pediatric sites associated with the C17 Council (n=17)

2015/16 progress against Y2 target			
	Accrual	Target	Difference
Accrual	363	442	79
% above baseline	99%	120%	⊗

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

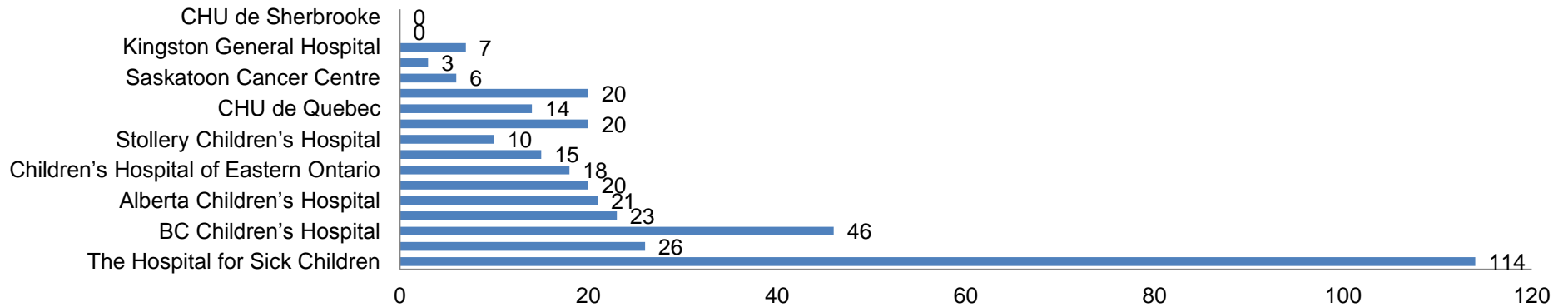


Figure 12. Progress to baseline recruitment per pediatric Network site in 2015/16

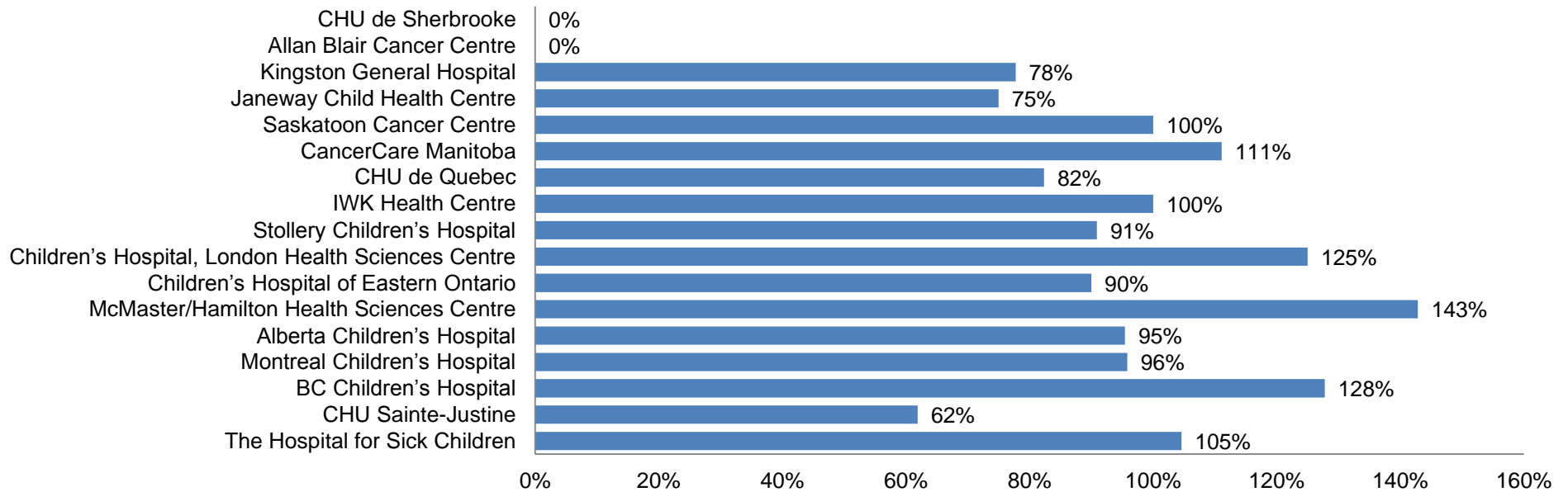
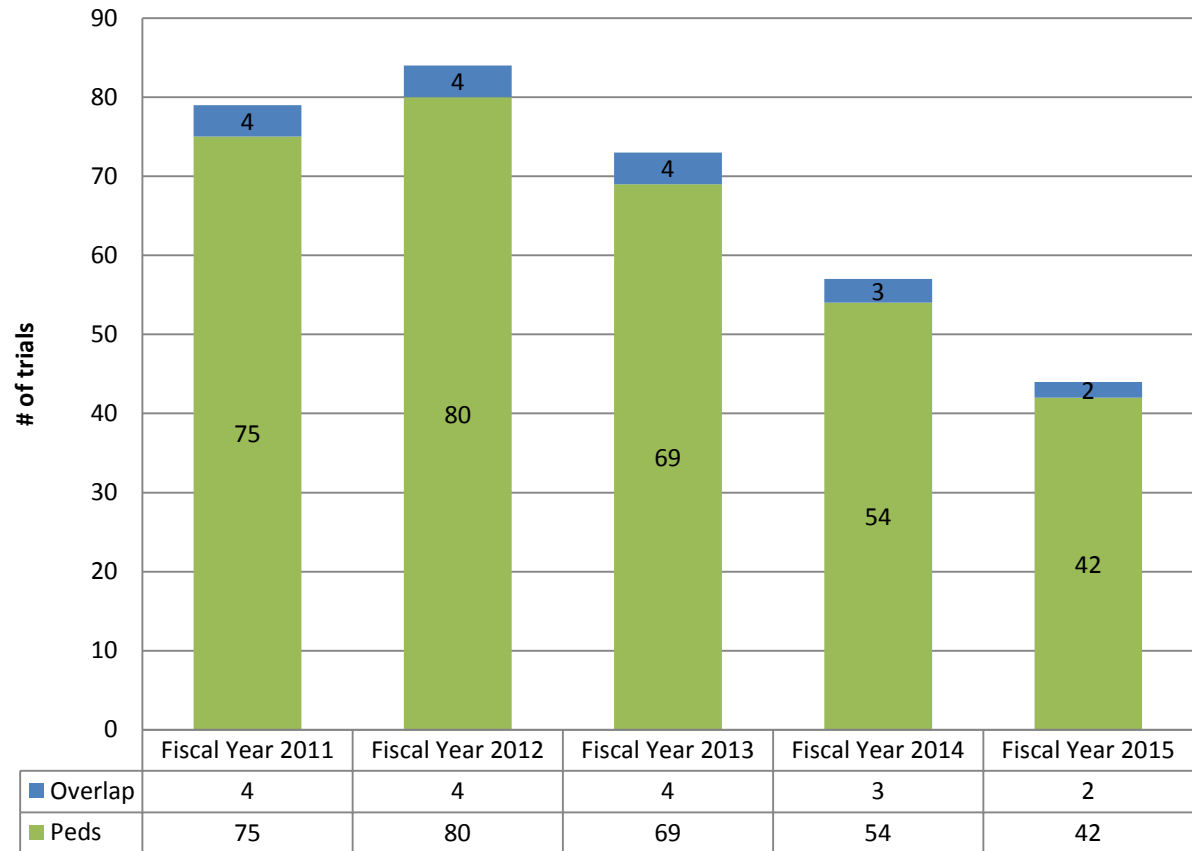


Table 2. Number of patients recruited per pediatric Network site

Network Site	Annual Baseline	Q3 2014-15	Q4 2014-15	Q1 2015-16	Q2 2015-16	Q3 2015-16	Q4 2015-16	YTD	Y2 Actual vs. Baseline
The Hospital for Sick Children	109	32	21	25	24	26	39	114	✓
CHU Sainte-Justine	42	9	9	10	1	8	7	26	✗
BC Children's Hospital	36	9	4	7	12	11	16	46	✓
Montreal Children's Hospital	24	3	6	4	5	8	6	23	✗
Alberta Children's Hospital	22	5	5	8	7	3	3	21	✗
McMaster/Hamilton Health Sciences Centre	14	4	2	4	7	2	7	20	✓
Children's Hospital of Eastern Ontario	20	5	5	5	4	3	6	18	✗
Children's Hospital, London Health Sciences Centre	12	3	4	2	6	5	2	15	✓
Stollery Children's Hospital	11	4	4	3	2	2	3	10	✗
IWK Health Centre	20	4	2	6	2	8	4	20	✓
CHU de Quebec	17	4	3	2	3	7	2	14	✗
CancerCare Manitoba	18	1	4	2	4	6	8	20	✓
Saskatoon Cancer Centre	6	5	4	2	1	0	3	6	✓
Janeway Child Health Centre	4	1	0	1	1	1	0	3	✗
Kingston General Hospital	9	2	3	1	3	1	2	7	✗
Allan Blair Cancer Centre	4	0	0	0	0	0	0	0	✗
CHU de Sherbrooke	0	0	0	0	0	0	0	0	✓
C17 Total	368	91	76	82	82	91	108	363	✗

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.

Figure 13. Total Portfolio Trials Year over Year for Pediatric Network Sites (2011-2015)



Notes:

- There were 44 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 June 8, 2016
- Two trials were available at both adult and pediatric Network sites in 2015 and are included in both adult and pediatric figures

Figure 14. Breakdown of Fiscal Year 2015 Portfolio trials at pediatric Network sites

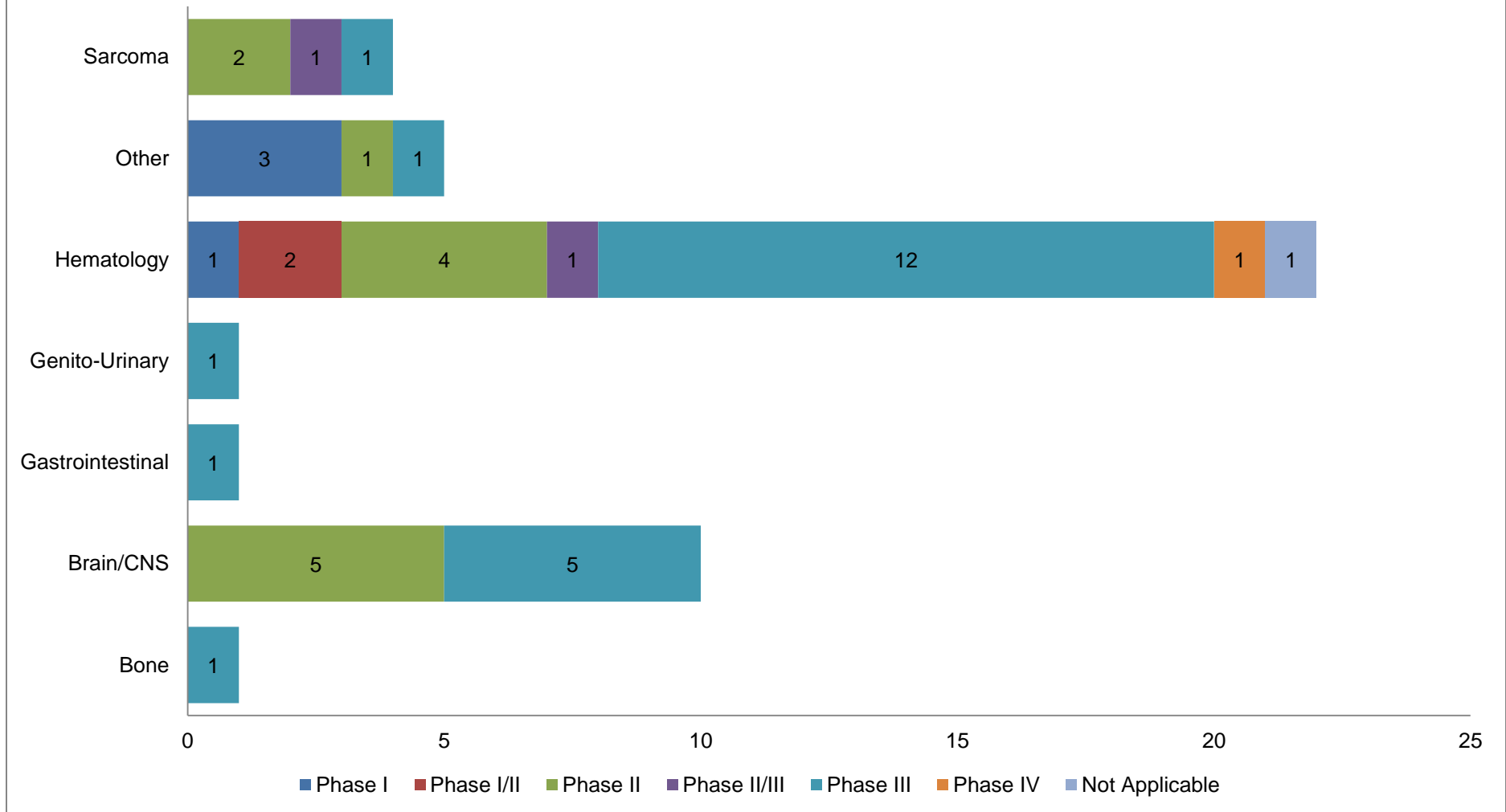
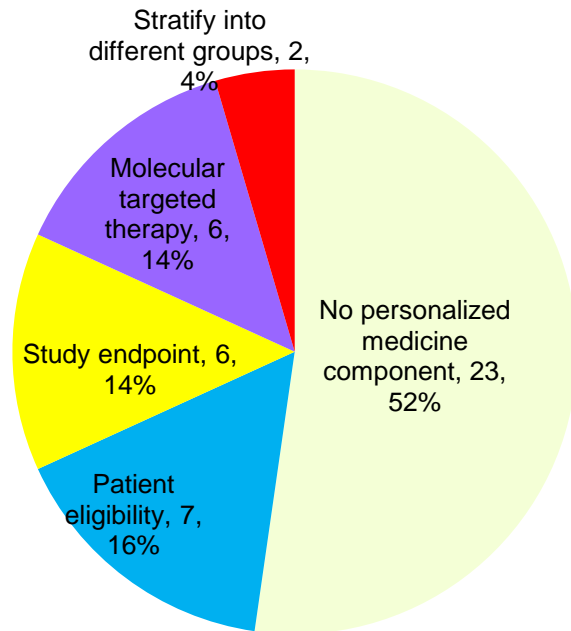


Figure 15. Breakdown of personalized medicine trials at pediatric Network sites in fiscal year 2015/2016

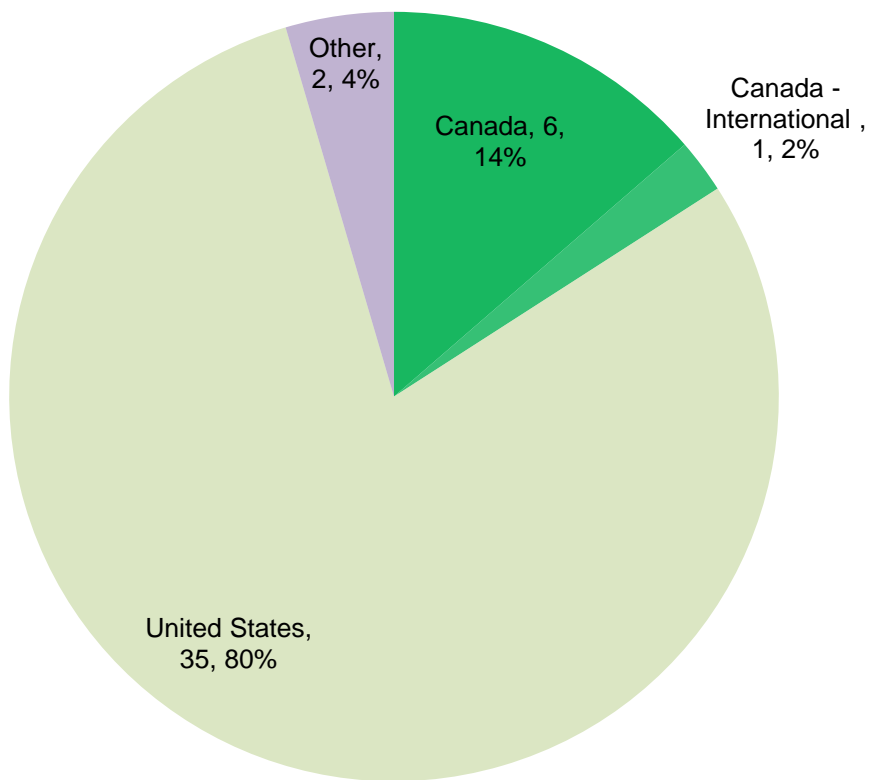


Notes:

- Personalized medicine trials at pediatric Network sites, as of June 8, 2016 (n=44)
- 48% 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 in 2015/2016



Notes:

- Breakdown of trials at pediatric Network sites by lead country, as of June 8, 2016 (n=44)
- 16% 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

Calendar Year	# Portfolio application	average application processing time*
2015	87	18
2016	32	14

Calendar Year	# Portfolio application	average peer review processing time**
2015	6	47
2016	2	33

*from application received to approve/decline the application since Jan 13, 2015 to May 31, 2016

** from date site agreed to pursue peer review to date last reviewer submitted completed PR package to 3CTN

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