

Monday October 6, 2008

GREEN LIGHT FOR FIRST UK LUNG CANCER SCREENING TRIAL

Scientists have received funding for the initial stage of the UK's first national lung cancer screening trial, it was announced at the National Cancer Research Institute (NCRI) Cancer Conference today, (Monday).

A team led by professor John Field, director of the Roy Castle Lung Cancer Research Programme, at the University of Liverpool, has received £155,000 from Health Technology Assessment (HTA), within the Department of Health to run a feasibility study for the first UK-based screening trial for lung cancer, and develop a protocol.

The UKLS (UK Lung Cancer Screening Trial) will use computerised tomography (CT) to scan people at high-risk of developing lung cancer using the Liverpool Lung Project Risk Assessment Model, for example individuals with a long duration of smoking, family history, previous history of respiratory disease, previous cancer and exposure to asbestosis. The development of the model was funded by the Roy Castle Foundation. .

The feasibility study and protocol development will assess whether the planned programme will save lives, and whether the NHS can afford the cost of a pilot and then full-scale trial.

Professor John Field, principal investigator of the study, said: "In the UK 33,500 people die from lung cancer each year. Even with smoking cessation programmes this number has not significantly reduced. We need to identify individuals who have a high risk of developing lung cancer and undertake CT screening on healthy participants".

"We must undertake these randomised control studies to prove that CT scanning is the best way forward before a National Lung cancer Screening Programme is considered and we are delighted that the HTA has decided to invest in this first stage of the UK's first lung cancer screening trial, which we hope will lead to a full trial."

The trial is expected to take place in a number of UK centres, probably recruiting 14,000 high risk participants. Of these, 7500 will be randomised into the CT screen arm and 7500 will be randomised into the non-interventive control arm. All the recruited individuals in this trial will be provided with smoking cessation advice.

The NCRI Lung Cancer Strategic Committee has strongly supported the concept of lung cancer screening using spiral CT imaging.

Dr Jane Cope, NCRI administrative director, said: “When we published our report on lung cancer two years ago, we identified the need to evaluate spiral CT screening as one of the priorities for more research. I am delighted that this will now be taken forward by Professor Field and colleagues, with support from the HTA.”

Professor Tim Eisen, chair of the NCRI’s lung cancer clinical studies group and a Cancer Research UK lung cancer clinician, said: “We know that most people – around 80 per cent - who get lung cancer only find out about it once the cancer has gone past the point where it can be cured. This trial aims to assess the proportion of people who are diagnosed at a time when it can still be treated. We await the results of this important study with interest.”

ENDS

For media enquiries please contact Emma Rigby on 020 7061 83218 or, out-of-hours, the duty press officer on 07050 264 059.

Notes to Editors:

Project title: UK Lung cancer screening trial (UKLS) HTA Number 07/82.

The project is subject to contract details.

The feasibility study will last six months. It will be followed by a planning stage of six months and a pilot of six months. The UKLS main trial would last approximately nine-and-a-half years.

UKLS is the first lung cancer screening trial in the UK. Currently there are two large international lung cancer screening studies, in the USA (NLST) and the Netherlands (NELSON), as well as three smaller studies in Italy and Germany.

The Lung Cancer Screening Trial (UKLS) plans to recruit high-risk individuals into the screening study as determined by the Liverpool Lung Project (LLP) Risk Prediction Model which has been validated in external case-control studies (Cassidy BJC 2008). This work was funded by the Roy Castle Lung Cancer Foundation.

The UKLS plans to run a randomised control study, (spiral CT screened against no intervention) within the UK, following a successful pilot and full funding.

The results of the UKLS will be studied together with current European CT Trials.

Questions to be answered in the Main UKLS trial

- Is there a lung cancer mortality benefit from CT screening and if so, how large is it?
- What is the corresponding total mortality benefit?
- If there is a benefit, is it sufficiently cost-effective to justify a national programme, and if so in what population?
- What is the best regime for cost-effective delivery of such a service- for example, how frequently should screening take place?
- What are the harms in terms of screening false positives, and further diagnostic interventions, invasive and non-invasive, in these cases?
- What are the psychosocial benefits and harms of the screening?
- What is the rate of over diagnosis (detection of lung cancers which would never have been diagnosed clinically during the host's lifetime if screening had not taken place)?
- Does the intervention affect rates of stopping smoking in current smokers or relapsing in ex-smokers?

UKLS Team

Professor John Field, clinical professor of Molecular Oncology, director of the Roy Castle Research Programme, University of Liverpool, is the lead applicant.

Professor Paula Williamson, director clinical trial unit, University of Liverpool.

Professor Stephen Duffy is the professor of cancer screening at Barts and the London.

Professor David Hansell is the professor of thoracic imaging at Royal Brompton Hospital and Imperial College, London.

Dr David Baldwin consultant respiratory physician Nottingham, Chair BTS Lung Cancer & Mesothelioma Advisory Group.

Dr Mahesh Parmar, head, cancer group associate MRC Clinical Trials Unit and NCRN assistant director.

Professor Keith Kerr, consultant pathologist, Aberdeen, member of NELSON Pathology Review Board.

Mr Richard Page consultant cardiothoracic surgeon, CTC Liverpool

Professor David Weller, professor of general practice, University of Edinburgh

Professor Nicholas Wald is the director of the Wolfson Institute of Preventive Medicine.

Professor David Whynes, professor of health economics, University of Nottingham.

Professor Tim Eisen, professor of medical oncology, University of Cambridge,

Dr Joan Austoker, director, Cancer Research UK Primary Care Education Research Group, University of Oxford.

Dr Catrin Tudur-Smith, statistician, Liverpool Cancer Trials Unit.

Lung Cancer

- Lung cancer kills more people worldwide than any other malignancy.
- Currently 33,500 individuals die each year in the UK from lung cancer.
- The number of deaths has fallen in the past years and this is likely to be due to a decline in tobacco smoking, and possibly greater public awareness.
- There is now a large ex-smoking population in the UK and Europe, who remain at high risk of developing lung cancer, which is dependent on their smoking duration prior to tobacco cessation.
- This group of individuals will continue to do so over the next two to three decades.
- Screening to detect the disease before patients develop any symptoms is a control measure urgently requiring evaluation as surgical resection at an early stage of the disease remains the only realistic option for a cure.

Low Dose CT lung cancer screening

This was introduced in the late 1990's and offers a major advance in imaging technology. It is more sensitive than chest X-Ray and has enabled detection of lung tumours smaller than one centimetre.

Smoking cessation

Giving up smoking decreases cancer risk. Different people give up in different ways, whether this is working towards a quit date or giving up on the spur of the moment, so individuals should decide what will work best for them.

Research shows people are much more likely to succeed in quitting with professional support and advice on medication. The NHS has services to help people give up., including stop smoking groups, one-to-one counselling and the Together programme to help people give up at home.

For more information call the NHS Smoking Helpline on 0800 169 0 169 (open 7am-11pm every day) and visit www.givingupsmoking.co.uk

Healthcare professionals may recommend treatment to help control withdrawal symptoms. There are several products on the market including:

- Nicotine Replacement Therapy (NRT) which helps reduce cravings
- Zyban which reduces your desire to smoke.

Some treatment is available free on prescription. See you GP or pharmacist to find out more.

National Cancer Research Institute

The National Cancer Research Institute (NCRI) is a UK-wide partnership between the government, charity and industry which promotes co-operation in cancer research among the 21 member organisations for the benefit of patients, the public and the scientific community.

The NCRI Cancer Conference 5–8 October 2008 is the major forum in the UK for showcasing the best British and international cancer research. The Conference offers unique

opportunities for networking and sharing knowledge by bringing together the leading experts from all cancer research disciplines.

Cancer Research UK

- Cancer Research UK's vision is to conquer cancer through world-class research.
- The charity works alone and in partnership with others to carry out research into the biology and causes of cancer, to develop effective treatments, improve the quality of life for cancer patients, reduce the number of people getting cancer and to provide authoritative information on cancer. Cancer Research UK is the world's leading independent charity dedicated to research on the causes, treatment and prevention of cancer.
- For further information about Cancer Research UK's work or to find out how to support the charity, please call 020 7009 8820 or visit www.cancerresearchuk.org