# Biobanking for Successful Translational Oncology

National Day – Germany's Way Towards Excellence in Biobanking

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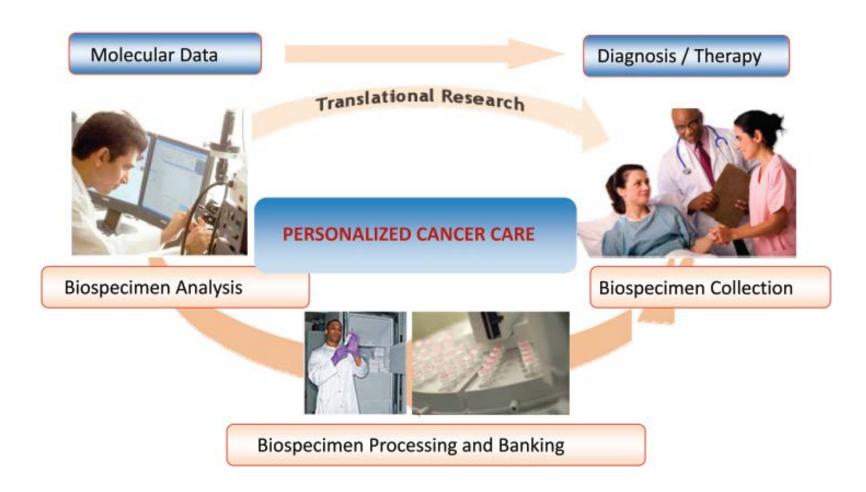


NATIONALES CENTRUM FÜR TUMORERKRANKUNGEN HEIDELBERG

getragen von:

Deutsches Krebsforschungszentrum Universitätsklinikum Heidelberg Thoraxklinik-Heidelberg Deutsche Krebshilfe

#### Central role of biomaterial in translational oncology





#### But....



Increasing value and reducing waste in research design, conduct, and analysis

John P A Ioannidis, Sander Greenland, Mark A Hlatky, Muin J Khoury, Malcolm R Macleod, David Moher, Kenneth F Schulz, Robert Tibshirani

#### An open investigation of the reproducibility of cancer biology research

The American Journal of Pathology, Vol. 185, No. 1, January 2015



#### **EDITORIAL**

Science Isn't Science If It Isn't Reproducible

Kevin A. Roth\* and Audra E. Cox

Stakeholder Research on Biospecimen Needs and Reactions to the Development of a National Cancer Human Biobank by the Renate Myles, Holly A. Massett, Gretchen Comey, Nancy Atkinson, Dee Allsop, Carolyn Compton National Cancer Institute

COMMENTARY The Impact of Preclinical Irreproducibility on Drug Development

FEATURES

# THE CANCER TEST

A nonprofit's effort to replicate 50 top cancer papers is shaking up labs

By Jocelyn Kaiser

October 2013 was ie writer was part

impact papers chosen for scrutiny by the Reproducibility Project: Cancer Biology. The

rrived in Richard | spurs tumor growth was among 50 high- | plied, they still wanted to repeat it. But they needed more information about the protocol. After weeks of emails back and forth group might need help with materials and and scrambling by graduate students and



# Which issues are important?

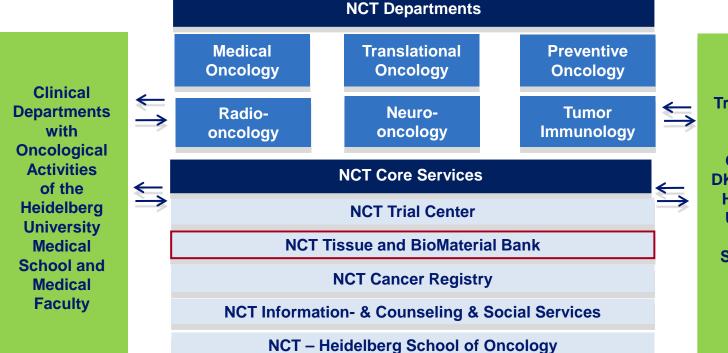


# 1. Align your Biobank upon your objectives and local circumstances









Translational
Cancer
Research
Groups of
DKFZ and the
Heidelberg
University
Medical
School and
Medical
Faculty

# 1. Align your Biobank upon your objectives and local circumstances

#### **NCT Tissue Bank**

since 2005, Head: E. Herpel

- □ Focus: cancer
- ☐ Cryopreserved Tissue: >25.000 FFPE (archive): >500.000 Proben
- □ >1900 successfully completed projects
- Established quality and project management, technology platform
- □ Accreditation since 2009

#### **NCT Liquid Bank**

since 2011, Head: R. Kirsten

- Focus: cancer
- ☐ Liquid samples: blood and derivatives, urine, stool, sputum, DNA/RNA,..
- □ >200.000 samples, 35 projects
- SOP guided sample storage and processing





# 1. Align your Biobank upon your objectives and local circumstances

One comprehensive Biobank.....

Because the benefits are e.g. .....

- □ Efficient use of valuable biomaterial resources
   □ Use of synergies (sample preparation, data storage, informed consent, sample storage systems, staff and training)
- Implementation of common quality standards
- Transparency and an interdisciplinary structure (core-function, consistent regulations, access)
- □ Platform for numerous project designs (epidemiological studies, complex projects, joint research, international co-operations)
- Reduced stress for patients (blood draw, informed consent procedure, data safety)

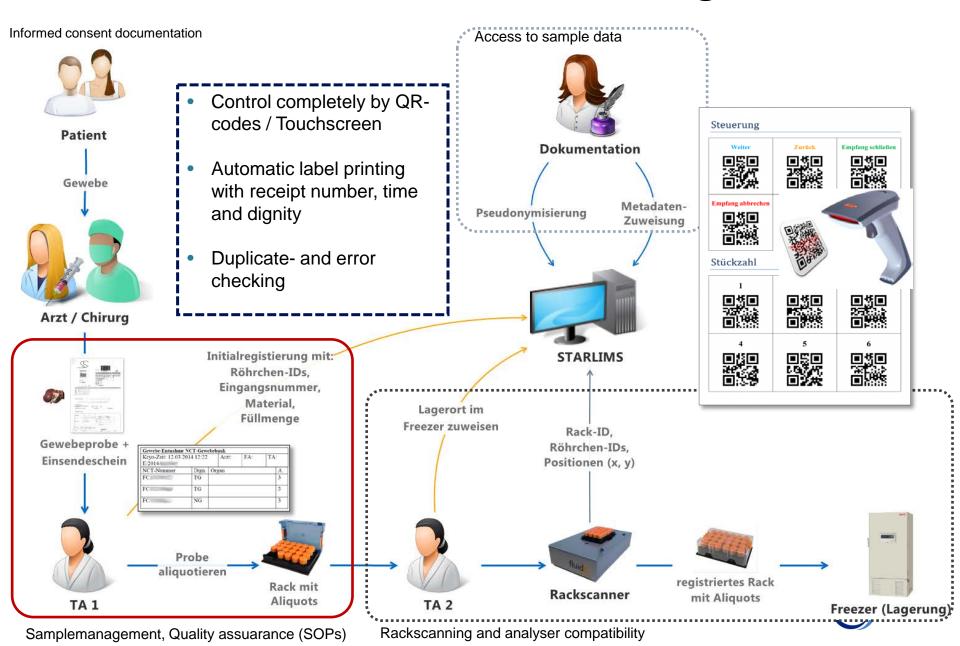


# 2. Note the legal requirements and ethical aspects

- Comprehensive ethical vote for tissue acquisitionCompliance with legal regulations
- Data safety concept
- Standardized informed consent for all biomaterials and respective data
- Hospital admission contract
- Priority of clinical diagnostics and therapy
- Release of retrospective tissue collection



### 3. Take care for clear data management



# 4a. Build a "living" quality management (QM)

#### Only high sample quality may ensure succesful translational oncology

QM = active and integrated system that ensures the quality of a process/project.

- ☐ Written SOPs
- Data management
- Emergency management
- Measurable quality objectives (Feedback of customers, publications...)
- ☐ Quality control (Entry-/ Exit control)

#### **NCT Tissue Bank:**

Accreditation since 2009/2013 in accordance with DIN EN ISO/IEC 17020





# 4a. Provide high quality of biomaterial

	>50% of studies using homogenised human tissue derivatives are based on insufficiently characterized/documented starting material (  Perren, Nature
	2011)
	□ Lack of:
	<ul> <li>Expert-evaluation (diagnosis, quality, composition of collective)</li> </ul>
	□ Trial specific parameters
	☐ Standardized entry- and exit-controls
	□ Standard reporting and documentation
	Good scientific practice in pre-experimental tissue assessment and selection is the decisive basis of work with human tissues



# 4b. Provide high Quality of biomaterial

- Processing of biomaterial under regard of the respective research projects
- Projects require different quality
  - Type of fixation (FFPE vs. Fresh Frozen)
  - ☐ Immunhistochemistry vs. homogenization
- Result report (exit-control) = quality control
- Handover protocol including a MTA (e.g. instructions on how to handle the samples, quoting in publications)
- □ Tracking



# 5. Ensure transparency and clear structures

- ☐ Resources/Infrastructure
- Interdisciplinary structure
- Advisory Board
- Competent head of biobank
- □ Rules of procedure/ Organisation chart
- Access rules, project managment:





### 6. Protect your samples and data

Things always seem to happen when you least expect them...



It does not matter to foresee the future but to be prepared for the future

An emergency management defines preventive and reactive measures

- □ Which measures in case of emergency?
- Responsibilitites, information?
- ☐ How will "normal" conditions be recovered?



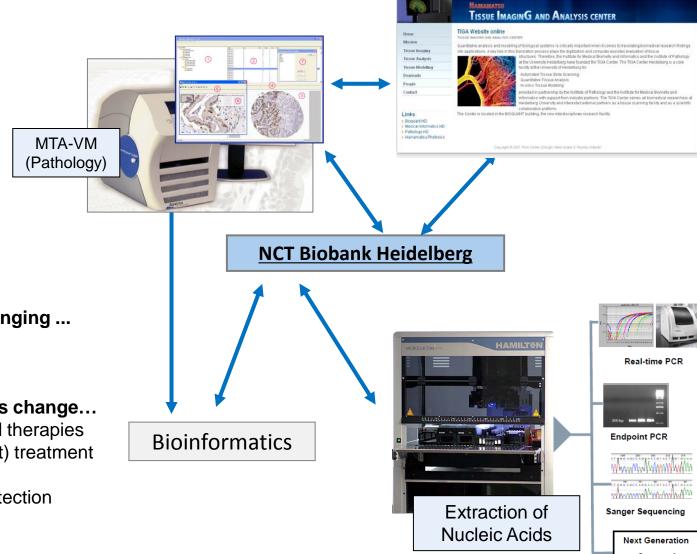
### 6. Protect your samples and data

#### **Some Measures of NCT Tissue Bank:**

- 24 hours monitoring of freezers + daily visual controls of temperature
- Emergency phone list
- Access restriction
- Labeling of freezers
- □ Backup-Freezer; alternative storage location
- Regular "emergency training"
- Separate servers for data
- Daily data backups



### 7. Be open to new scientific developments



(e.g. MiSeg / PGM)

#### Science is constantly changing ...

- New issues
- New technologies

#### **Medical Treatment options change...**

- Less "aggressive" surgical therapies
- Preoperative (neoadjuvant) treatment forms
- New methods for early detection

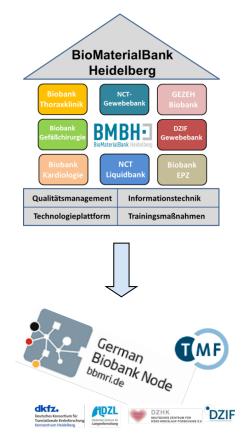
### 8. Be willing to share

Institutional collection

Biological ressource center

Single
Biobank

Network





### 9. Provide sustainability

#### In terms of

- ☐ Standardized quality
- Guarantueed data safety
- provision of resources/ biomaterial

high efforts - high costs

insufficient infrastructure and financing options



#### Development of a sustainable financing concept

- Acquisition and documentation of single expenses and structures
- consideration of these expenses in case of biomaterial requests
- Where applicable, fees for services (internal customer vs. external customer)
- □ Commercial activities (e.g. industrial co-operations)
- Integration at local centers



10. Do good things and talk about it



# Conclusion

# 10 biobanking issues for successful translational oncology

- 1. Align your biobank upon your objectives and local circumstances
- 2. Note the legal requirements and ethical aspects
- 3. Take care for clear data management
- 4. Build a "living" quality management
- 5. Ensure transparency and clear structures
- 6. Protect your samples and data
- 7. Be open to new scientific developments
- 8. Be willing to share
- 9. Provide sustainability
- 10. Do good things and talk about it

