## Clinical Trials Landscape in Oncology - Freedom of Information Request

To Whom It May Concern:

I hope this message finds you well. I am reaching out to gather crucial information regarding the pre- and current post-BREXIT clinical trials landscape in Oncology on a nationwide basis in the UK. Your expertise and insight from your current NHS hospital Trust that you represent, are invaluable in enhancing our understanding of the trends and challenges in this field, so that appropriate recommendations could be made.

Before completing this survey, kindly check to ensure that your hospital(s) provide(s) systemic therapy for solid cancer (i.e. initiation of SACT and follow up of Oncology patients) in adults. If so, please proceed with this survey.

If your hospital does not provide systemic therapy for solid cancers, then please do not complete this survey and instead e-mail back to notify us and we will update our records accordingly.

Furthermore, we advise that whoever is designated to complete this survey should be in charge of, lead or co-ordinate the solid cancer, thus only Oncology (i.e. NOT haematological malignancies, not haem-onc) clinical trials department at your NHS hospital. Questions should be answered on behalf of the organisation.

In relation to this survey, we only aim to obtain data regarding systemic anti-cancer therapies (SACT) as investigational medicinal products (IMP). Examples of such therapies include chemotherapy, cellular therapies, biologics, hormonal therapy, targeted therapy, immunotherapy and other. This survey specifically enquires about interventional studies (e.g. studying the safety and/or efficacy of novel treatments).

In the case of multi-phase trials, indicate the lower phase number. We request information from the following hospitals:

#### England: All

### Wales:

- Velindre Cancer Centre
- South Wales Cancer Centre (Aneurin Bevan)
- Glan Clwyd Hospital (Betsi Cadwaladr)
- Ysbyty Gwynedd Hospital (Betsi Cadwaladr)
- Wrexham Maelor (Betsi Cadwaladr)

#### Scotland:

- Aberdeen Royal Infirmary (Grampian)
- Beaston (the) West of Scotland Cancer Centre (Greater Glasgow & Clyde)
- Glasgow Royal Infirmary (Greater Glasgow & Clyde)
- Inverciyde Royal Hospital (Greater Glasgow & Clyde)
- Stobhill General Hospital (Greater Glasgow & Clyde)
- University Hospital Crosshouse (Ayrshire & Arran) University Hospital Ayrshire (Ayrshire & Arran)
- University Hospital Monklands (Lankashire)
- Ninewells Hospital (Tayside)
- Perth Royal Infirmary (Tayside)
- Queen Margaret Hospital (Fife)
- Victoria Hospital, Kirkcaldy (Fife)
- Edinburgh Cancer Centre, Western General Hospital (Edinburgh)
- Falkrik Royal Infirmary (Fort Valley)

#### Northern Ireland:

- Belfast City Hospital (Belfast)
- Royal Victoria Hospital (Belfast)
- Antrim Area Hospital (Northern)
- Ulster Hospital (Southern Eastern) Craigavon Area Hospital (Southern)
- Altnagelvin Area Hospital (Western)

Note that the purpose of this survey is for academic research with the aim to publish the final results. Final data will be collated. However, any outliers or notable results may be identifiable.

Please do not hesitate to contact us if you have any further queries. Thank you for your contribution.

*	Name of person completing out this form:	
*	Full name of the hospital or NHS Trust (specify):	Milton Keynes University NHS FT
*	Your role at the hospital:	Senior Research Practitioner
*	Your involvement in oncology clinical trials:	Lead

\* Is your hospital/ NHS Trust a Cancer Unit, Cancer Centre or Centre of Excellence in Cancer Care?

	Tick one
Yes	х
No	

\* 1.la What tumour groups do you treat with systemic anti-cancer therapy at your centre?

	Tick all that apply
Head & Neck (H&N)	
Central nervous system (CNS)	
Skin/ Melanoma	
Urology/ Renal	Х
Gynae-Onc	X
Breast	X
Upper Gastrointestinal (UGI)	X
Lower Gastrointestinal (LGI)	X
Hepato-pancreatico-biliary (HPB)	X
Cancer of unknown primary (CUP) Lung x	
Sarcoma	

\* 1.lb Since 2010, for what tumour groups has your organisation had clinical trials involving systemic anti-cancer therapy? Select all that apply.

	Tick all that apply
Head & Neck (H&N)	
Central nervous system (CNS)	
Skin/ Melanoma	
Urology/ Renal	Х
Gynae-Onc	Х
Breast	х
Upper Gastrointestinal (UGI)	х
Lower Gastrointestinal (LGI)	х
Hepato-pancreatico-biliary (HPB)	х
Cancer of unknown primary (CUP) Lung	х
Sarcoma	
None of the above (ensure you do not tick any other	
boxes)	

\* 1.Ic In TOTAL, how many clinical trials (interventional Phase 0 - III) involving novel or novel combination or novel way of administering systemic anti-cancer therapies for solid cancers did you have in the Oncology department on 31 Dec in each year (provide a snapshot number) since 2010?

	Number of trials
2010	2
2011	2
2012	2
2013	1
2014	1
2015	3
2016	3
2017	4
2018	1
2019	2
2020	2
2021	2
2022	3
2023	5

\* 1.Id Of the total number of clinical trials you reported in 1.Ic, how many were solely funded by the NHS and NIHR (thus excluding trials funded by charity, government research councils like MRC, academic institutions and commercial companies)?

	Number of trials, n
2010	1
2011	1
2012	1
2013	1
2014	1
2015	1
2016	0
2017	1
2018	1
2019	1
2020	1
2021	1
2022	1
2023	2

\* 1.le Of the total number of clinical trials you reported in 1.lc, how many were PHASE 1 trials?

	Number of trials, n
2010	0
2011	0
2012	0
2013	0
2014	0
2015	0
2016	0

2017	0
2018	0
2019	0
2020	0
2021	0
2022	0
2023	0

\* 1.If Of the total number of clinical trials you reported in 1.Ic, how many were PHASE 2 trials?

	Number of trials, n
2010	0
2011	0
2012	0
2013	0
2014	0
2015	1
2016	1
2017	1
2018	1
2019	1
2020	1
2021	2
2022	1
2023	1

\* 1.lg Of the total number of clinical trials you reported in 1.lc, how many were PHASE 3 trials?

	Number of trials, n
2010	2
2011	2
2012	2
2013	1
2014	2
2015	3
2016	2
2017	4
2018	3
2019	1
2020	1
2021	2
2022	3
2023	4

\* 1.Ih On a separate note, how many Phase IV trials did you conduct in each year at your hospital/ Trust?

Number of trials, n

2010	1
2011	1
2012	1
2013	0
2014	1
2015	4
2016	4
2017	4
2018	4
2019	3
2020	2
2021	3
2022	3
2023	4

\* 1.Ii Of the total number of clinical trials you reported in 1.Ic, how many involved another procedure such as surgery or radiotherapy in combination with the trialed systemic anti-cancer therapy within the trial?

	Number of trials, n
2010	0
2011	0
2012	0
2013	0
2014	0
2015	1
2016	1
2017	1
2018	1
2019	1
2020	1
2021	1
2022	0
2023	0

\* 1.Ij Provide the total number of adult patients enrolled in phase I - III solid-cancer systemic anticancer therapy trials on 31 Dec of each year at your hospital/ Trust:

	Number of trials, n
2010	Data not available
2011	Data not available
2012	Data not available
2013	Data not available
2014	Data not available
2015	4
2016	3
2017	8
2018	4
2019	9
2020	7
2021	1

2022	5
2023	13

\* 1.lk In each year, how many new Phase I - III clinical trials did you open for recruitment?

	Number of trials, n
2010	0
2011	0
2012	0
2013	1
2014	3
2015	8
2016	6
2017	6
2018	2
2019	2
2020	2
2021	7
2022	4
2023	2

\* 2.I Post-BREXIT, what regulatory changes have had the greatest impact on the initiation of oncology trials at your centre?

Unknown as we have not sponsored oncology trials.	

\* 2.II Post-BREXIT, what regulatory changes have had the greatest impact on the conduct/ continuation of oncology trials at your centre?

Unknown as we have not sponsored oncology trials.	

\* 2.IIIa Post-BREXIT, have you observed any specific challenges related to regulatory compliance for initiating new oncology trials at your centre?

	Tick one
Yes	
No	Х
Unsure	

\* 2.IIIb If yes, please specify the regulatory challenges encountered:

* 2.IVa Have there been any notable changes in the regulatory reporting requirements for ongoing oncology trials post-BREXIT?
Yes Tick one
No No
Unsure x
* 2.IVb If yes, please elaborate on the changes and their impact on trial conduct:
* 2.Va Have there been any changes in the timeline for regulatory approvals post-BREXIT for initiating
new oncology trials?
Tick one
Yes
No
Unsure x
* 2.Vb If yes, please specify the nature of delays and their impact on trial initiation:
* 2.VI How has the communication and coordination with regulatory authorities changed post-BREXIT in the context of oncology trials?
Unknown as we have not sponsored oncology trials.
* 2.VIa Have there been any new documentation or compliance requirements introduced post-BREXIT for ongoing oncology trials?
Tick one Yes No Unsure x
* 2.VIb If yes, please provide examples of the additional documentation or compliance measures introduced:

Tick one Yes No x Unsure  * 2.VIIIb If yes, please specify the nature of changes and their impact on the informed consent process:  * 2.IX How has the interpretation and implementation of Good Clinical Practice (GCP) guidelines	* 2.VII How has the training and education of clinical trial staff in your centre been impacted by regulatory changes post-BREXIT?	
trials post-BREXIT?  Tick one Yes No x Unsure  * 2.VIIIb If yes, please specify the nature of changes and their impact on the informed consent process:  * 2.IX How has the interpretation and implementation of Good Clinical Practice (GCP) guidelines evolved post-BREXIT in your centre?  No.  * 2.Xa Where staff updated or educated on regulatory changes post- BREXIT?    Tick one   Yes   No   x	Not impacted.	
trials post-BREXIT?  Tick one Yes No x Unsure  * 2.VIIIb If yes, please specify the nature of changes and their impact on the informed consent process:  * 2.IX How has the interpretation and implementation of Good Clinical Practice (GCP) guidelines evolved post-BREXIT in your centre?  No.  * 2.Xa Where staff updated or educated on regulatory changes post-BREXIT?    Tick one   Yes   No   x		
* 2.VIIIb If yes, please specify the nature of changes and their impact on the informed consent process:  * 2.IX How has the interpretation and implementation of Good Clinical Practice (GCP) guidelines evolved post-BREXIT in your centre?  No.  * 2.XA Where staff updated or educated on regulatory changes post-BREXIT?    Tick one   Yes   No   x	* 2.VIIIa Have there been any changes in the requirements for informed consent processes for or trials post-BREXIT?	ncology
* 2.IX How has the interpretation and implementation of Good Clinical Practice (GCP) guidelines evolved post-BREXIT in your centre?  No.  * 2.Xa Where staff updated or educated on regulatory changes post- BREXIT?  Tick one Yes No x	Yes No x	
* 2.IX How has the interpretation and implementation of Good Clinical Practice (GCP) guidelines evolved post-BREXIT in your centre?  No.  * 2.Xa Where staff updated or educated on regulatory changes post- BREXIT?  Tick one Yes No x		
evolved post-BREXIT in your centre?  No.  * 2.Xa Where staff updated or educated on regulatory changes post- BREXIT?  Tick one Yes No x	* 2.VIIIb If yes, please specify the nature of changes and their impact on the informed consent pr	rocess:
evolved post-BREXIT in your centre?  No.  * 2.Xa Where staff updated or educated on regulatory changes post- BREXIT?  Tick one Yes No x		
* 2.Xa Where staff updated or educated on regulatory changes post- BREXIT?  Tick one Yes No x	* 2.IX How has the interpretation and implementation of Good Clinical Practice (GCP) guidelines evolved post-BREXIT in your centre?	
Yes No x	No.	
Yes No x	* 2.Xa Where staff updated or educated on regulatory changes post- BREXIT?	
* 2.Xb If yes, explain how:	Yes	
	* 2.Xb If yes, explain how:	
* 2.Xc If no, explain why not:	* 2.Xc If no, explain why not:	
n/a	n/a	

\* 3.I In each year, how many Phase 0 - IV clinical trials did you have to discontinue due to a lack of funding? Comment on the funding sources affected:

	Number of trials, n
	n/a as we have not sponsored oncology trials
2010	
2011	
2012	
2013	
2014	
2015	
2016	
2017	
2018	
2019	
2020	
2021	
2022	
2023	

\* 3.II Name all organisations, including your own, that sponsored and/or funded solid- cancer systemicanticancer therapy trials at your centre in each year:

	Sponsors/ funders
2010	S- University of Glasgow, The Royal Marsden
	F- NIHR, Cancer Research
2011	S- University of Glasgow, The Royal Marsden
	F- NIHR, Cancer Research
2012	S- University of Glasgow, The Royal Marsden
	F- NIHR, Cancer Research
2013	S- University of Glasgow, The Royal Marsden
	F- NIHR, Cancer Research
2014	S-Cambridge University, The Royal Marsden,
	F- NIHR
2015	S-Cambridge University, The Royal Marsden, University of Leeds, UCL

	F- NIHR, Pfizer, Cancer Research
2016	S- The Royal Marsden, University of Leeds, UCL
	F- Pfizer, Cancer Research
2017	S- The Royal Marsden, UCL, University of Leeds
	F- Pfizer, NIHR, Cancer Research
2018	S- The Royal Marsden, UCL
	F- Pfizer, NIHR, Cancer Research
2019	S- University of Oxford, UCL
2013	5 Offiversity of Oxiora, OCE
	F- Cancer Research, NIHR
2000	
2020	S- University of Oxford, UCL
	F- Cancer Research, NIHR
2021	S- University of Oxford, UCL, NHS Greater Glasgow and Clyde, Hoffman-La Roche
	F- Cancer Research, NIHR
2022	S- NHS Greater Glasgow and Clyde, The Institute of Cancer Research, UCL, Hoffman-La Roche
	F- Cancer Research, NIHR
2023	S- NHS Greater Glasgow and Clyde, The Institute of Cancer Research, UCL, University of Leeds,
2023	University of Oxford
	F- Cancer Research, NIHR

# $^{*}$ 3.III How has the funding landscape for oncology pharmaceutical trials at your centre changed post-BREXIT?

	Tick one
Increased funding opportunities	
Decreased funding opportunities	
No significant change	
Not Sure	х

* 3.IV If there has b availability:	een a change, p	please describe the main factors contributing to the shift in funding
* 3.V How has the cat your centre?	hange in fundir	ng impacted the continuity of ongoing oncology pharmaceutical trials
Unknown as we have not spo	nsored oncology t	rials.
		ials more affected by funding challenges (e.g., Phase 1, investigator- nti-cancer drugs, combination therapies, for certain tumour groups)
Unknown as we have not spo	nsored oncology t	rials.
* 3.VII How has the to support oncology trials?		rrounding BREXIT impacted the willingness of funding organisations
	Tick one	
Significantly impacted	TICK OHE	
Moderately impacted		
Minimally impacted		
No impact		
Not Sure	х	
* 3.VIII Answering of enhance funding opportur  Unknown as we have not spo	ities for oncolo	
* 3.IXa Have you ex challenges post-BREXIT?	plored alternat	ive funding sources or strategies to mitigate potential funding
Yes No x Unsure		
* 3.IXb If yes, please	e share details (	of any successful strategies or approaches implemented:

N/A as we have not sponsored oncology trials.		
	XIa Have there been any changes in the criteria or preferences of funding organisations when g proposals for oncology trials post-BREXIT?	
	Tick one	
Yes	TICK ONE	
No		
Unsure	x	
<u> </u>		
	I Comment on collaborative challenges that affected or caused disruptions in the initiation or solid-cancer systemic anti- cancer therapy drugs:	
	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
nning of	solid-cancer systemic anti- cancer therapy drugs:	
unning of	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012 2013 2014	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012 2013 2014 2015	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012 2013 2014 2015 2016	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012 2013 2014 2015 2016 2017	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012 2013 2014 2015 2016 2017 2018	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012 2013 2014 2015 2016 2017 2018 2019	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	
2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021	Solid-cancer systemic anti- cancer therapy drugs:  Collaborative Challenges –	

Yes	
No	
Unsure	Х

*	4 lib if you place	ise identify the main collaborative challenges faced:
	4.11b 11 yes, pied	se identify the main conaborative chanenges faced.
*	4.IIIa Have char	nges in regulatory requirements impacted international partnerships in oncology trials?
	Tick one	
Yes		
No		
Unsure	e x	
*	4 1111 15	
Τ	4.IIIb if yes, pie	ase elaborate on the specific regulatory aspects causing challenges:
*		perience, have collaborative challenges affected the timeline and efficiency of
oncolog	y trials?	
	T	1
V	Tick one	
Yes		
No Unsure	2 2	
Ullsule	e x	
*	4.IVb If ves. ple	ase provide examples or instances where collaboration challenges led to disruptions in
trial init	iation or conduc	
*	4.Va At your cu	rrent NHS hospital, have there been challenges in aligning international ethical

	Tick one
Yes	
No	Х
Unsure	

standards and practices for oncology trials post-BREXIT?

* 4.Vb If yes, please elaborate on the specific ethical challenges faced and their impact on collaborative efforts:
* 4.VI How has the exchange of trial-related data and information with international partners been affected post-BREXIT?
Not affected.
* 4.VIIa In your organisation's experience, have there been any challenges related to differences in patient populations across international sites in oncology trials?
Tick one Yes No Unsure x
* 4.VIIb If yes, please provide examples or instances where differences in patient populations posed challenges to collaborative efforts?
* 4.VIII How has the exchange of expertise and specialised resources with international collaborators been affected post-BREXIT?
Unsure as we have not sponsored oncology trials.
* 4.IX From your organisation's perspective, what strategies or initiatives could enhance international collaboration in oncology trials in the post-BREXIT era?
Our Trust is open to sponsor (collaborate on) oncology trials subject to funding and having a local clinician willing to be the CI.  The best way to seek sponsorship is to get in touch with us via research@mkuh.nhs.uk and a member from the sponsorship team will pick up the query. We have not sponsored oncology trials and so I am not sure what to suggest to facilitate sponsorship/collaboration at MKUH apart from funding and having a local clinician wanting to be the CI.

\* 5.Ia Have you become aware of or experienced any challenges related to the alignment of data privacy and protection regulations in international oncology trials post-BREXIT?

	Tick one
Yes	
No	х

Unsur	
*	5.lb If yes, please elaborate on the specific challenges faced and any measures

Thank you for taking the time to complete this survey.