

NCRI Colorectal Clinical Studies Group

Introduction

The past year has seen the successful opening of 4 major new trials: EnROL, New EPOC, and CReST and ISAAC.

The Group successfully obtained funding and collaboration with Astra Zeneca as part of the NCRN industrial partnership initiative to design at least two studies in advanced disease. The Group held a highly successful annual trials meeting which was fully subscribed and set about addressing the suggestions made at the previous three yearly peer reviews.

Membership and structure

Professor John Scholefield stepped down as Chair of the CSG in July 2008 to be replaced by Professor Will Steward. Professor Jim Cassidy, Dr Astrid Mayer and Dr Simon Gollins, joined the Group. Several existing members were reappointed. Professor David Kerr and Professor Shirley Hodgson stepped down from the Group. The Adjuvant Subgroup was dissolved and, in future, adjuvant treatments will be discussed as an item in the main Group meetings. Specifics of therapy may be included as an agenda item in subgroup meetings. Dr Richard Wilson took over the chairmanship of the Advanced Disease Subgroup during the second quarter of 2009 from Professor Tim Maughan.

Portfolio and accrual

The Colorectal trial portfolio continues to expand with 4 trials opened during the last year. A further 7 trials are in set-up; EXCITE, Curcumin Study, FOXFIRE, Iron Deficiency Anaemia, ARISTOTLE, FOCUS 3 and an industry study. A list of trials currently in the portfolio can be found in Table 1 below.

The Group had a number of funding/endorsement application successes during the year. FOCUS 3 was funded by the MRC, ARISTOTLE by CTAAC; PuLMICC (Pulmonary Metastasectomy in Colorectal Cancer.), TREC (transanal endoscopic microsurgery and radiotherapy in early rectal cancer), ISAAC (a randomised trial of Initial Surgery in Advanced Asymptomatic Colorectal cancer patients receiving chemotherapy for metastatic disease) and a randomised phase II study of Irinotecan, 5-Fluorouracil and Folinic Acid (FOLFIRI) with or without the addition of an endothelin receptor antagonist in patients with metastatic colorectal cancer after failure of Oxaliplatin-containing chemotherapy by FSC. TRICC approved the (Trans EPOC) and (FOxTROT Trans) applications and a full proposal was requested for an Investigation of biomarkers of response to the specific COX-2 inhibitor rofecoxib (Vioxx™) in colorectal cancer patients.

Accrual to Colorectal cancer trials is among the highest of some of the CSGs and included 3496 patients recruited to studies in 2008-9. The overall recruitment represented 10.2% of incidence cases. 4.2% of incidence cases were recruited into RCTs AND 5.9% into non RCTs. Recruitment to the advanced disease studies was temporarily halted and subsequently slowed by the observation of the need to undertake k-ras testing for patients receiving modulators of the EGF pathway.

Table 1: Colorectal CSG portfolio

Acronym	Title	PI(s)	Status
ACT II	A second UK phase III anal cancer trial: A trial of chemoradiation and maintenance therapy for patients with anal cancer	Professor Roger James	Closed
Big ET Study	Endothelin levels in patients with Colorectal Cancer	Mr David Hemingway	Closed
CAPP2 Study	A randomised controlled trial of colorectal polyp and cancer prevention using aspirin and resistant starch in carriers of HNPCC (Lynch Syndrome)	Professor John Burn	Closed
CAPP-IT	A randomised placebo controlled study evaluating the role of pyridoxine in controlling capecitabine induced hand-foot syndrome.	Dr Pippa Corrie	Closed
CHRONICLE	Chemotherapy or no chemotherapy in clear margins after neoadjuvant chemoradiation in locally advanced rectal cancer: A randomised phase III trial of control vs capecitabine plus oxaliplatin	Dr Rob Glynne-Jones	Closed
CLASICC	Conventional versus Laparoscopic-Assisted Surgery in Colorectal Cancer	Professor PJ Guillou	Closed
CLOCC	Randomised phase III study of the local treatment of liver metastases by radiofrequency combined with chemotherapy versus chemotherapy alone in patients with colorectal liver metastases.	Professor Jonathan Ledermann	Closed
COIN	A phase III trial comparing either COntinuous chemotherapy plus cetuximab or INtermittent chemotherapy with standard continuous palliative combination chemotherapy with oxaliplatin and a	Professor Tim Maughan	Closed

	fluoropyrimidine in first line treatment of metastatic colorectal cancer		
COIN QoL Sub-Study	COIN Quality of Life Sub-Study	Professor Tim Maughan	Closed
COIN-B / CR11	A two-arm phase II randomised trial of intermittent chemotherapy plus continuous cetuximab and of intermittent chemotherapy plus intermittent cetuximab in first line treatment of patients with K-ras-normal (wild-type) metastatic colorectal cancer	Dr Harpreet Wasan	Open
Continuity of cancer care	Concern and continuity in the care of patients with cancer and their carers: A multi-method approach to enlightened management.	Professor Michael King	Closed
Coping with Cancer	Socio-economic status and coping with cancer – examining the experience of people recently diagnosed with cancer	Miss Alice Simon	Closed
Cost-effectiveness of pharmacogenetic testing for irinotecan	Cost-effectiveness of pre-prescription pharmacogenetic testing for irinotecan	Mr Dyfrig Hughes	Open
CR07	A randomised trial comparing pre-operative radiotherapy and selective post-operative chemoradiotherapy in rectal cancer	Professor Phil Quirke	Closed
CReST	The role of endoluminal stenting in the acute management of obstructing colorectal cancer	Mr James Hill	Open
Curcumin study	A pilot study of the administration of curcumin to determine colonic curcumin tissue levels in patients awaiting colorectal endoscopy or patients with colorectal cancer awaiting resection	Professor William Steward	in Set-up
Enhanced Recovery Trial	The development of a multi-modal care pathway for patients	Mr Robin Kennedy	Closed

	undergoing surgical resection for colorectal cancer		
EnROL	Conventional versus laparoscopic surgery for colorectal cancer within an Enhanced Recovery Programme	Mr Robin Kennedy	Open
EORTC QLQ-CR29	An international study to test the scale, structure, reliability and validity of the EORTC QLQ-CR29 in patients with colorectal cancer	Professor Jane Blazeby	Closed
EORTC/GITCCG 40983	Pre and Post operative chemotherapy with Oxaliplatin, 5FU/LV versus surgery alone in resectable liver metastases from colorectal origin	Tim Iveson	Closed
EXCITE	EXCITE: Erbitux, Xeloda, Campto, Irradiation Then Excision for locally advanced rectal cancer (North West Clinical Oncology Group-04 on behalf of the NCRI rectal cancer subgroup)	Dr Simon Gollins	in Set-up
EXPERT-C	A multicentre randomised phase II clinical trial comparing oxaliplatin (Eloxatin), capecitabine (Xeloda) and pre-operative radiotherapy with or without cetuximab followed by total mesorectal excision for the treatment of patients with magnetic resonance imaging (MRI) defined high risk rectal cancer	Professor David Cunningham	Closed
EXTRA	Evaluation of Xeloda Treatment with radiotherapy in Anal Cancer	Dr Rob Glynne-Jones	Closed
FAB2	The impact of folate and its interaction with riboflavin on biomarkers in colorectal cancer risk	Professor John Mathers	Closed
FACS	A randomised controlled trial to assess the cost-effectiveness of intensive versus no scheduled follow-up in patients who have undergone resection for	Professor David Mant	Open

	colorectal cancer with curative intent		
FOCUS	A randomised trial to assess the role of irinotecan and oxaliplatin in advanced colorectal cancer	Professor Matt Seymour	Closed
FOCUS2	Drug treatment for bowel cancer: making the best choices when a milder treatment is needed.	Professor Matt Seymour	Closed
FOCUS 3	A study to determine the feasibility of molecular selection of therapy using K-ras and topo-1 in patients with metastatic or locally advanced colorectal cancer	Professor Tim Maughan	in Set-up
FOXFIRE	An open-label randomised phase III trial 5-Fluorouracil, OXaliplatin and Folinic acid +/- Interventional Radio-Embolisation as first line treatment for patients with unresectable liver-only or liver-predominant metastatic colorectal cancer	Dr Ricky Sharma	in Set-up
FOxTROT	Fluoropyrimidine, Oxaliplatin & Targeted Receptor pre-Operative Therapy for colon cancer. A randomised trial assessing whether preoperative chemotherapy and/or an anti-EGFR monoclonal antibody improve outcome in high-risk operable colon cancer.	Professor Richard Gray, Professor Dion Morton, Professor Matt Seymour	Open
Genetic Factors in Colorectal Cancer	The role of genetic factors in clinical outcome for colorectal cancer patients	Ms Angela Cox	Closed
Intermediate Adenomas	Frequency of follow-up for patients with intermediate grade colorectal adenomas	Professor Wendy Atkin	Closed
IRON DEFICIENCY ANAEMIA	Iron deficiency anaemia and delayed diagnosis of colorectal cancer	Professor Sue Wilson	in Set-up
Long Term Effects of Chemo on Bone	An investigation of the long term effect of chemotherapy on bone, particularly focusing on the	Professor Robert E Coleman	Closed

	incidence of osteoporosis in such patients		
MERCURY	Magnetic Resonance Imaging and Rectal Cancer European Equivalence Study.	Dr Gina Brown	Closed
MMP9 and FOBt	Establishing the added benefit of measuring MMP9 and FOBt as part of the colorectal cancer screening programme	Professor Sue Wilson	Closed
MMP9 UHB	A prospective study to assess the value of MMP-9 in improving the appropriateness of urgent referrals for colorectal cancer	Professor Sue Wilson	Closed
Molecular pathology of colorectal cancer	Molecular pathology of Colorectal Cancer: Investigating the the role of microRNA's and their molecular targets in Colorectal Cancer progression	Mr Alex Mirnezami	Open
NCRN030 - Industry study	NCRN030 - Industry study	Dr Charles Wilson	in Set-up
New EPOC	Peri-operative chemotherapy in patients with resectable colorectal liver metastases - does the addition of an anti-EGF receptor antibody improve progression free survival?	Professor John Primrose	Open
NSCCG	National Study of Colorectal Cancer Genetics	Professor Richard Gray, Professor Julian Peto, Dr Richard Houlston	Open
OxaliCap-RT	Integrating intravenous oxaliplatin plus oral capecitabine with pelvic radiation for rectal cancer.	Dr David Sebag-Montefiore Professor Matt Seymour	Closed
PACT	Patient preferences in adjuvant colorectal cancer therapy: a randomised crossover clinical trial comparing Bolus Fluorouracil/Leucovorin to Capecitabine as treatment for moderate to high risk resected colorectal cancer	Professor Matt Seymour	Closed
Patient	Patient experience of erectile	Professor Sue Wilson	Open

Experience of ED	dysfunction after pelvic surgery for colorectal cancer		
PERI	A randomised, controlled study of the psychoneuroimmunological effects of relaxation therapy and guided imagery, alone and in combination, in colorectal cancer	Professor Leslie Walker	Closed
PICCOLO	A randomised clinical trial of treatment for fluorouracil-resistant advanced colorectal cancer comparing standard single-agent irinotecan versus irinotecan plus panitumumab and versus irinotecan plus ciclosporin	Professor Matt Seymour	Open
Predicting weight loss	Predicting weight loss in people with cancer: Development of a screening tool.	Vanessa Halliday	Open
Public perceptions of bowel cancer screening	A Primary Care-based intervention for improving patient participation in bowel cancer screening (pilot study and RCT)	Mr Paul Hewitson	Open
Quality of Life in secondary liver tumours	(a) Development of an EORTC QoL questionnaire for patients with malignant carcinoid tumours.(now closed) (b)A study of the clinical and psychometric validation study of a disease-specific questionnaire module(QLQ-LMC21) in assessing the quality of life of patients(open)	ProfessorJane Blazeby, Dr John K Ramage, Mr Myrddin Rees	Closed
QUASAR	Quick and simple and reliable a study of colorectal cancer treatment	Ms Jenny Barnwell	Closed
QUASAR 2	Multicentre international study capecitabine +/- bevacizumab as adjuvant treatment of colorectal cancer.	Professor David Kerr	Open
RAACS	Rural accessibility and cancer survival	Dr Andy Jones	Closed
RICE	A phase I/II study of Radiotherapy, Irinotecan,	Dr Simon Gollins	Closed

	Capecitabine then Excision for locally advanced rectal cancer		
SCOT	Short Course Oncology Therapy - A study of Adjuvant Chemotherapy in colorectal cancer by the CACTUS & QUASAR 3 Groups	Mr Jim Cassidy	Open
SIGGAR1	CT colonography, colonoscopy, or barium enema for diagnosis of colorectal cancer in older symptomatic patients.	Professor Steve Halligan	Closed
Sildenafil citrate study	A placebo controlled, flexible dose, randomised controlled trial to assess the efficacy of sildenafil citrate in men with erectile dysfunction after pelvic surgery for rectal carcinoma	Mr Tariq Ismail	Closed
The role of biofeedback in improving continence after anterior resection	The role of biofeedback in improving continence after anterior resection: A randomised controlled trial	Miss Sophie Pilkington	Closed
ukCAP	A multi-centre double blind randomised controlled trial of Aspirin and / or Folate supplementation for the prevention of recurrent colorectal adenomas		Closed
VICTOR	Phase III randomised double-blind placebo controlled study of rofecoxib (VIOXX) in colorectal cancer patients following potentially curable therapy.	Professor David Kerr Professor MJ Langman	Closed
W.O.R.M.S	Does intraoperative fluid volume optimisation using oesophageal Doppler cardiac output measurement improve patient outcome and reduce length of stay after major bowel surgery?	Dr Howard Wakeling	Closed
Wales Polyp Study	Wales Polyp Study	Dr Sunil Dolwani	Open
XERXES	Examining the role of early neoadjuvant and synchronous erbitux in preoperative chemo-	Dr Rob Glynne-Jones	Suspended

	radiotherapy using xeloda followed by excisional surgery.		
--	---	--	--

Trials in development

The Group has several trials being developed by each subgroup.

The Screening and Prevention Subgroup

The Screening and Prevention Subgroup is planning a large phase III study comparing the effects of two or three agents in patients found to have polyps in the Colorectal Screening Programme. A study has also been developed looking at lifestyle intervention and a funding application has been made.

The Rectal Subgroup

Trials in progress for Rectal Subgroup include:

- ARISTOTLE - in set up - aim to recruit first patient Jan 2010. 920 phase III CTAAC funded study in MRI defined locally advanced rectal cancer comparing capecitabine CRT versus irinotecan capecitabine CRT.
- BACCHUS - just approved by the FSC - so in set up. Randomised ph II study comparing oxaliplatin 5FU bevacizumab with oxaliplatin irinotecan 5FU bevacizumab in resectable rectal cancer with PET CT defined response assessment.
- Deferral of surgery study in patients with complete response to chemoradiotherapy for rectal cancer. - just approved by the FSC
- Copernicus - neoadjuvant chemotherapy combined with short course radiotherapy in resectable rectal cancer - under discussion

The Anal Cancer Subgroup

This subgroup is developing two trials in the anal cancer portfolio, possibly three. One is in more advanced anal cancer T3/T4 N0/N+ in which we are looking at the integration of biologicals.

The second question that we are asking is whether we can actually deliver less treatment to early cancers and get the same results without the same morbidity and we're exploring whether a field size change or a dose reduction or both are going to be feasible.

Thirdly, we have been looking at whether there is a role for sentinel node biopsy.

The Surgical Subgroup

At the last trials meeting in July it was proposed that the Surgical Subgroup would not be developing further trials independently. They are collaborating with the rectal subgroup on BACCUS and Copernicus.

There are:

- Foxtrot, Enrol and Crest open for recruitment.
- Isaac ready to open.
- TREC and Pulmicc just funded and pending opening.

These are complex trials and our focus is now on developing recruitment strategies in the surgical units to help these trials succeed.

The Translational Subgroup

Meetings

There have been two main meetings of the CSG and several meetings of its subgroups. The annual trials meeting was held in March and was attended by over 250 delegates from a range of professions involved in the treatment of colorectal cancer. Feedback was excellent and this meeting is clearly seen as being very valuable to those who treat and undertake trials in this disease.

Collaborations

Several studies within the Group involve international collaborators. QUASAR 2 recruits internationally. The newly opened FOXFIRE study is being undertaken in collaboration with centres in Australia. FOxTROT, PICCOLO and SCOT have all attracted international collaboration. The Group made a presentation to a meeting organised with AstraZeneca (arranged by NCRN). As a result two studies for patients with advanced disease will be developed using signal transduction inhibitors within the AstraZeneca portfolio. This collaboration could lead to further trials with novel agents in the future.

Other activities

In the past year, the Group has provided a significant input to NICE appraisals of new technologies. In particular this has involved analyses of data to inform decision making on the use of EGFR inhibitors. The Group has also been asked to have input to a government draft document on prevention of colorectal cancer.

Three year strategy

With the change in Chair and rotation of several subgroup chairs, the CSG held a two day residential meeting in May to discuss future strategies. Each subgroup met and decide on priority areas for development. These were then be presented to the whole Group and will inform future strategic planning. It is anticipated that there will be an expansion of studies by the Screening and Prevention Group and an increasing focus on the development of predictive markers of response to therapy. The overall strategy for the Group remains to:

- Be internationally recognised as a Group running cutting-edge trials answering important questions and advancing the care of patients with colorectal cancer.
- Be the first contact for pharmaceutical companies, government and charity funders looking for partners to perform clinical trials in any area of colorectal cancer care.
- Improve accrual to the trials in our portfolio year-on-year.
- Be seen nationally as a collaborative group prepared to help a small organisation to grow.
- Foster a spirit amongst younger researchers in colorectal cancer that their contribution and development is important to us.

Priorities for next year

The priorities for next year are to:

- Hold a two day meeting of senior members of the CSG to review strategy after meeting all the subgroups.
- Having closed the Adjuvant Chemotherapy subgroup, monitor effectiveness of inclusion of discussions of adjuvant therapy in the main CSG meetings with discussions in relevant sub-groups of Adjuvant Therapy as appropriate.
- Develop studies with new agents using impetus from collaboration with Astra Zeneca and the opening of at least two trials.

Professor William P Steward, Chair

Appendix 1

2008/9 Publications and abstracts

Adams RA, Meade AM, Madi A, Fisher D, Kay E, Kenny S, Kaplan RK, Maughan TS on behalf of the COIN trial TMG and investigators. Toxicity associated with combination oxaliplatin plus fluoropyrimidine with or without cetuximab in the MRC COIN trial experience. *Br J Cancer* 2009 100, 251 – 258

Adams R, Meade AM, Wasan H, Griffiths GG & Maughan TS, Cetuximab therapy in first line metastatic colorectal cancer and Intermittent Palliative chemotherapy: background and a review of the ongoing COIN trial *Expert Review of Anticancer Therapy*, 2008, 8(8), 1237-1245

Folprecht G, Seymour MT, Saltz L, Douillard JY, Hecker H , Stephens RJ, Maughan TS, Van Cutsem E, Rougier P, Mitry E, Schubert U, Köhne CH. Irinotecan/5-Fluorouracil Combinations in the First-Line Therapy of Older and Younger Patients with Metastatic Colorectal Cancer: Combined Analysis of 2691 Patients in Randomized Controlled Trials. *J Clin Oncol* 26:1443-1451.2008.

J Rodger and R J C Steele, Telephone assessment increases uptake of colonoscopy in a FOBT colorectal cancer-screening programme

Phil Quirke, Robert Steele, John Monson, Robert Grieve, Subhash Khanna, Jean Couture, Chris O’Callaghan, Arthur Sun Myint, Eric Bessell, Lindsay C Thompson, Mahesh Parmar, Richard J Stephens, David Sebag-Montefiore, Effect of the plane of surgery achieved on local recurrence in patients with operable rectal cancer: a prospective study using data from the MRC CR07 and NCIC-CTG CO16 randomised clinical trial on behalf of the MRC CR07/NCIC-CTG CO16 trial investigators and the NCRI colorectal cancer study group

David Sebag-Montefiore, Richard J Stephens, Robert Steele, John Monson, Robert Grieve, Subhash Khanna, Phil Quirke, Jean Couture, Catherine de Metz, Arthur Sun Myint, Eric Bessell, Gareth Griffiths, Lindsay C Thompson, Mahesh Parmar, on behalf of all the trial collaborators, Preoperative radiotherapy versus selective postoperative chemoradiotherapy in patients with rectal cancer (MRC CR07 and NCIC-CTG C016): a multicentre, randomised trial

Mowat, J A Wilson, M Kenicer, F A Carey and C G Fraser, R J C Steele, P L McClements, G Libby, R Black, C Morton, J Birrell, N A G, Results from the first three rounds of the Scottish demonstration pilot of FOBT screening for colorectal cancer i:10.1136/gut.2008.162883 *Gut* 2009;58;530-535; originally published online 26 Nov 2008

C G Fraser, C M Mathew, K McKay, F A Carey and R J C Steele. Automated immunochemical quantitation haemoglobin in faeces collected on cards for screening for colorectal cancer doi:10.1136/gut.2008.153494 *Gut* 2008;57;1256-1260; originally published online 8 May 2008;

Sebag-Montefiore D, Stephens R, Steele R, Monson J, Grieve B, Khanna S, Quirke P, Couture J, de Metz C, Myint S, Bessell E, Griffiths G, Thompson L, Parmar M. A randomised trial comparing pre-operative radiotherapy and selective post-operative chemo-radiotherapy in rectal cancer. Results from the Medical Research Council CR07 and National Cancer Institute of Canada Clinical Trials Group C016 trial. *Lancet* 373:811-20, 2009

Quirke P, Steele R, Monson J, Grieve R, Khanna S, Couture J, O'Callaghan C, Myint S, Bessell E, Thompson L, Parmar M, Stephens R, Sebag-Montefiore D. The impact of the plane of surgery achieved and short course pre-operative radiotherapy on local recurrence rates in patients with clinically operable adenocarcinoma of the rectum. Data from the MRC CR07/NCIC-CTG CO16 randomised clinical trial. *Lancet* 373:821-28,2009

D Sebag-Montefiore, P Quirke, R Steele, J. Couture, L Thompson, R Stephens. The impact of short course pre-operative radiotherapy on patients quality of life: data from the MRC CR07 / NCIC CO16 randomised clinical trial in patients with rectal cancer. *IJROBP* 72:1S Abstract 61 S28,2008

D Sebag-Montefiore, R Steele, J Monson, R Grieve, S Khanna, E Bessell, S Myint, Jean Couture, C de Metz, P Quirke, L Thompson, R Stephens. The impact of both surgery and pre-operative radiotherapy on patients quality of life: data from the MRC CR07 / NCIC CO16 randomised clinical trial in patients with rectal cancer. *NCRI Annual Conference Proceedings B137 p168,2008*

Glynne-Jones R; on behalf of the Colorectal Cancer Consensus Steering Group UK Second National Colorectal Cancer Consensus Meeting 2007 *Clin oncol (R coll Radiol)*. 2008 June; 20(5): 365-368

Capirci C, Valentini C, Cionini L, De Paoli A, Roden C, Glynne-Jones R, Coco C, romano M, Mantello g, Palazzi S, Mattia FO, Friso ML, Genovesi d, Vidali C, Gambacorata MA, Buffoli a, Lupattelli M, Favretto MS, La Torre G. Prognostic Value of Pathologic Complete Response After Neoadjuvant Therapy in Locally Advanced Rectal cancer: Long-term Analysis of 566 ypCR Patients *Int J Radiat Oncol Biol Phys* 2008 72(1): 99-107

Rasheed S, Yap T, Zia A, McDonald PH, Glynne-Jones R. Chemoradiotherapy – An alternative to surgery for squamous cell carcinoma of the rectum. Report of six cases and literature review. *Colorectal Dis* 2009; 11(2): 191-7 May 3

Glynne-Jones R, Meadows H, Wan S, Gollins S, Leslie M, Levine E, McDonald AC, Myint S, Samuel L, Sebag-Montefiore D; National Cancer Research Institute Anal Sub-Group and Colorectal Clinical Oncology Group. EXTRA – A multicenter phase II study of chemoradiation using a 5 day per week oral regimen of capecitabine and intravenous mitomycin C in anal cancer. *Int J Radiation Oncology Biol. Phys.* 2008 71(1): 119-26

Glynne-Jones R, Mawdsley S, Anal Cancer: The end of the road for neoadjuvant chemoradiotherapy *J Clin Oncol* 2008 26: 3669-3671

Glynne-Jones R, Hoskin P. Effects of chemoradiation on tumour-host interactions: the immunologic side – Reply, *J Clin Oncol* 2008; 26: 1563-1563 (letter)

Van Cutsem E, Dicato M, Haustermans K, Arber N, Bosset JF, Cunningham D, De Gramont A, Diaz-Rubio E, Ducreux M, Goldberg R, Glynne-Jones R et al

The diagnosis and management of rectal cancer: expert discussion and recommendations derived from the 9th World Congress on Gastrointestinal Cancer, Barcelona 2007. *Ann Oncol* 2008; 19 Suppl.6: A11-A18

Kerr SF, Norton S, Glynne-Jones R. Delaying surgery after neoadjuvant chemoradiotherapy for rectal cancer may reduce postoperative morbidity without compromising prognosis *Br J Surgery* 2008;95:1534-1540

Wilke H, Glynne-Jones R, Thaler J et al, Cetuximab plus Irinotecan in heavily pretreated metastatic colorectal cancer progressing on Irinotecan: MABEL study. *J Clin Oncol.* 2008 26:933) 5335-43

Glynne-Jones R, Mawdsley S, Anal Cancer: is neoadjuvant cisplatin chemotherapy or chemoradiotherapy friend or foe? *Nat Clin Pract Oncol* 2008 :5(12) 692-3

Glynne-Jones R, Beaumont I, Why co-payment is a cop-out for us all *Clin Oncol* 2009 (R Coll Radiol) 2009: 21(1)

Glynne-Jones R, Anyamene N, Histologic response grading after chemoradiation in locally advanced rectal cancer: a proposal for standardised reporting. *Int J Radiat Oncol Biol Phys.* 2009 Mar 15; 73(4): 971-2

Glynne-Jones R; on behalf of the Colorectal Cancer Annual Consensus Meeting group. UK Third National Colorectal Cancer Consensus Meeting 2008 *Clin Oncol (R Coll Radiol)* 2009 Feb 14.

Cunningham D, Sirohi B, Pluzanska A, Utracka-Hutka B, Zaluski J, Glynne-Jones R et al, oxaliplatin in patients with metastatic colorectal cancer *Ann Oncol.* 2009 Feb ; 20(2): 244-50

Rasheed S, Harris AL, Tekkis PP, Turley H, Silver A, McDonald PJ, Talbot IC, Glynne-Jones R, Northover JM, Guenther T
Assessment of microvessel density and carbonic anhydrase-9 (CA-9) expression in rectal cancer. Two different first line 5-fluorouracil regimens with or without *Pathol Res Pract.* 2009; 205(1): 1-9

Braun MS, Richman SD, Adlard JW, Thompson L, Meade A, Parmar M, Allan JM, Quirke P, Seymour MT on behalf of the MRC CR08 (FOCUS) trial collaborators. Association of Molecular Markers with Toxicity Outcomes in a Randomized Trial of Chemotherapy for Advanced Colorectal Cancer (FOCUS Trial). [in press - *J Clin Oncol* - March 2009]

Sargent DJ, Köhne CH, Sanoff HK, Bot BM, Seymour MT, de Gramont A,

Porschen R, Saltz LB, Rougier P, Tournigand C, Douillard JY, Stephens RJ, Grothey A, Goldberg RM. Pooled Safety and Efficacy Analysis Examining the Effect of Performance Status on Outcomes in Nine First-Line Treatment Trials Using Individual Data From Patients With Metastatic Colorectal Cancer. *J Clin Oncol* 2009 Mar 2. [epub ahead of print]

Punt K and Seymour M. The CAIRO And FOCUS Studies: Which Lesson Is To Be Learned? *The Oncologist* 2009;14:192–3. [letter]

Chau I, Norman AR, Cunningham D, Oates J, Hawkins R, Iveson T, Nicolson M, Harper P, Seymour M, Hickish T. The impact of primary tumour origins in patients with advanced oesophageal, oesophago–gastric junction and gastric adenocarcinoma—individual patient data from 1775 patients in four randomised controlled trials. *Ann Oncol*. 2009 Jan 22. [Epub ahead of print]

Seymour MT and Punt CJA. Sequential Chemotherapy for Advanced Colorectal Cancer: Should We Ever Start With a Single Cytotoxic Agent? *Current Colorectal Cancer Reports* 2008, 4:130-8.

Seymour M. “Standing up for the sequential strategy”. Current and future approaches to palliative colorectal cancer care: Papers based on presentations at a European meeting held in January 2008. *EJC Supp* 2008; 6(13): 12-8.

Seymour MT, Trigonis I, Finan PJ, Halstead F, Dunham R, Wilson G, Farrugia D, Chester JD, King J, Brown CB, Slevin ML, Joel SP. A feasibility, pharmacokinetic and frequency-escalation trial of intraperitoneal chemotherapy in high risk gastrointestinal tract cancer. *Eur J Surg Oncol* 2008; 34: 403-9. [Epub 2007 Jul 2]

Allan JM, Shorto J, Adlard J, Bury J, Coggins R, George R, Katory M, Quirke P, Richman S, Scott D, Scott K, Seymour M, Travis LB, Worrillow LJ, Bishop DT, Cox A; UK NCRI Colorectal Clinical Studies Group. MLH1 -93G>A promoter polymorphism and risk of mismatch repair deficient colorectal cancer. *Int J Cancer* 2008; 123: 2456-9.

Braun MS, Richman SD, Quirke P, Daly C, Adlard JW, Elliott F, Barrett JH, Selby P, Meade AM, Stephens RJ, Parmar MK, Seymour MT. Predictive biomarkers of chemotherapy efficacy in colorectal cancer: results from the UK MRC FOCUS trial. *J Clin Oncol* 26: 2690-8, 2008. [Erratum in *J Clin Oncol* 2008; 26:4363. Comment in: *J Clin Oncol* 2008; 26: 2619-20].

Hennig IM, Naik JD, Brown S, Szubert A, Anthoney DA, Jackson DP, Melcher AM, Crawford M, Bradley C, Brown JMB, Seymour MT. Severe sequence-specific toxicity when capecitabine is given following fluorouracil and leucovorin. *J Clin Oncol* 26: 3411-17, 2008.

