French national cohort of melanoma patients from the RIC-Mel network Implementation to valorisation

Poster #147

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Objective

With a high incidence, low survival rates and limiter availability of effective treatment, melanoma is one of the research priorities for health authorities and is considered as priority of public health (Figure 1). Optimizing the development of both academic and private research requires the availability of information on the characteristics of patients, clinical data and collected biological samples.

To meet this need, the French Multidisciplinary Melanoma Group (GMFMeI) in collaboration with INCa (French National Cancer Institute), the CeNGEPS (National Centre for Healthcare Products Trial Management) and the CIC-BT0503 from Nantes hospital (Biotherapy Clinical Centre of Investigation) has set up in April 2011 a Clinical Investigation network for melanoma called the CeNGEPS-GMFMel Network. Nowadays, the network is named:

RIC-Mel: network for Research and Clinical Investigation on Melanoma

Aims of our network are to promote translational research, to optimize the achievements of clinical trials and to support basic research. Figure 1: Primary To achieve these goals, the primary objective of our network was to set up a national database in order to make epidemiological studies tumour and to be able to have the best efficiency for participating to international clinical trials.



Method

All French centres treating melanoma patients were contacted to participate. Each participating centre filled in the database its active list of patients, for which data are treated confidentially. Database is available on the Internet at any given moment but each clinician have an exclusive access for his data. All patient included in the database had given its agreement to participate.

Collected data describes patient characteristics, disease history and progress until death and if biological samples are available (Figure 2). Consequently, our database gives a permanently updated mapping of melanoma treated in France with the key information needed for any research projects.

RIC-Mel Network		PARTI - Mandatory				PART II - Optional				
		Identity	Initials Birth date		Gender	Family history	Genetic investigation			Translational
Coordinators Pr B. Dréno and Pr C. Lebbé	RIC-Mel data base		Date of Type of surgery melanoma	Breslow Mitotic index	Ulceration Regression	Metastases	Type	Date of diagnostic	Presence	and basic research Epidemiological studies
Coordinating centre : CHU de Nantes		Primary tumour	Sentinel lymph node surgery	Date	Results	HLA type		Α	В	
			Lymph node removal	Number of invaded lymph node	Extracapsular extension	Sample collection	Type (skin, blood	CONGILION	Date	
Steering Committee Scientific Council		AJCC Stage at	Date of diagnosis	Details	For stage III only : if inoperable or not		Comments		Storage location	Partnership
Participating centres: University and Regional Hospital Centres, Cancer Centres		inclusion and evolution				Curative and investigational treatments	Dosage		Response	with ————————————————————————————————————
		Mutations Antigens Treatment	Type	Presence Date	Comments					companies
			Type	Presence Date	Comments	Adverse events (grade 3 and 4)		Action		
Enrolment of patients and			Type	Name Nature (adjuvant/curativ	Dates		Type Gra		Other action	Clinical trials
entry of data		Death	Yes/Non		Date					

Figure 2: RIC-Mel network key working

Results

entry of data

Nowadays, the RIC-Mel network includes 42 hospital's dermatology centres and 6 cancer centres located all over the country (Figure 3). The RIC-Mel database was launched in march 2012 and has been approved by French Health Authorities, both ethically and confidentiality of data. After just 3 years in existence, more than 13,000 patients were included (Figure 4), with the following distribution: 70 % of primary stages and 30 % of loco-regional/metastatic stages.

Industrial

Four pharmaceutical companies have expressed interest in our database (BMS, Roche, GSK and AMGEN). These companies have signed a partnership agreement to support prospective inclusions of patients as well as regular updating of the clinical data. Thanks to these support, two research projects has been achieved.

In 2013, a first company used data from 6,000 patients prior to the registration of a targeted therapy and to realize medico-economic modelling. In 2014, another company used epidemiological data from 12,000 patients to estimate the proportion of patients meeting the selection criteria for a clinical trial.

Recently, a new company expressed the wish to develop an e-CRF, only available on the database, for a post-ATU (Authorisation of Temporary Use) study. This e-CRF will be used to filled data specific to the study treatment, with patient characteristics and clinical data available in the database as well as for any patient.

Institutional

Several institutional projects were carried out in monocentric data for rational (review cases of discordant mutational statute or clinical response of patient subgroups regarding biological parameters...) and feasibility studies. Recently, the population of patients with stage IV and unresectable stage III with a mutated B-RAF statute has been analysed at the request of French National Authority for Health (HAS).

The RIC-Mel database is linked to the clinico-biologico-radiological database MELBASE, for patients with metastatic melanoma stage IV or unresectable stage III, setting up by Saint Louis hospital (Paris).

The RIC-Mel database is a pertinent way through which relevant clinical and biological information can be rapidly and accurately communicated for the development of melanoma research.

RIC-Mel network provides to researchers information key epidemiological and translational study.



Figure 3: Distribution of participating centres

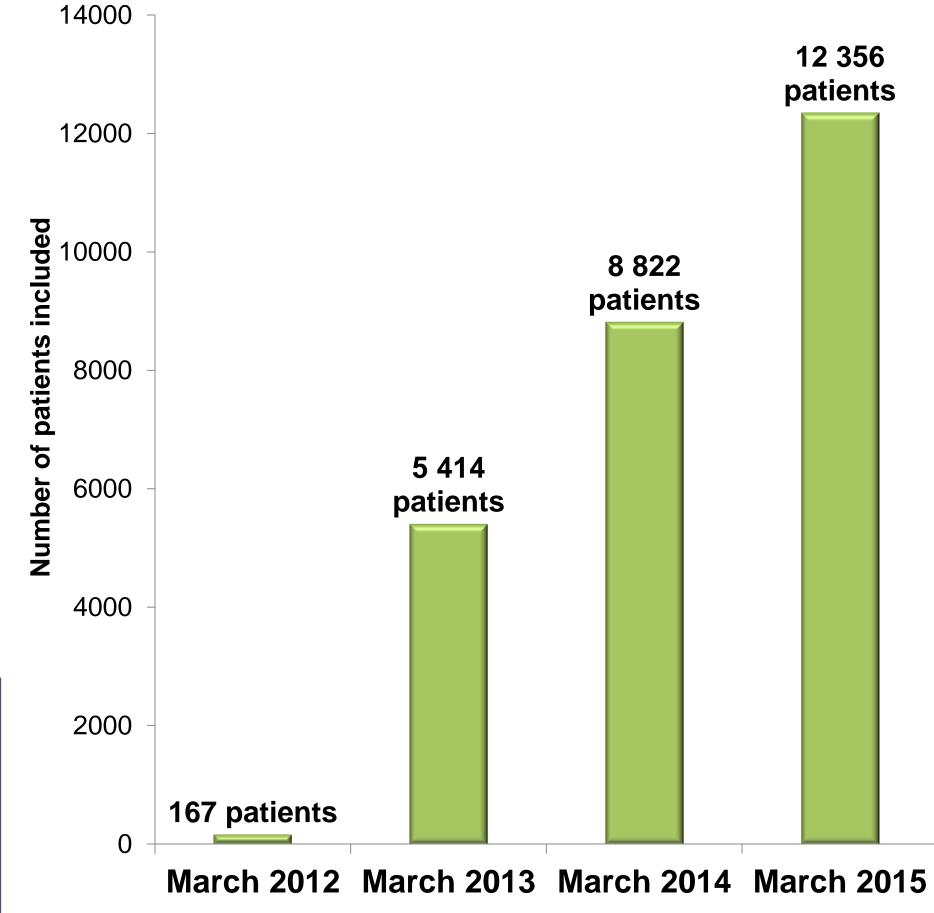


Figure 4: Annual evolution of inclusions in the database since its creation

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