

Blood cancer patients are dying while potentially life-saving drugs sit on the shelf

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A national blood cancer charity today launches a unique network of clinical trial centres with access to up to £50 million worth of new life-saving drugs, in response to current poor survival rates for many types of leukaemia, lymphoma and myeloma; the hub of which will be Birmingham.

The University of Birmingham will be home to a clinical trials unit which will coordinate the 13 centres in the national network, set up by the charity Leukaemia & Lymphoma Research. Central to the charity's vision to deliver 'Tomorrow's Treatments Today', the network will provide blood cancer patients access to millions of pounds worth of life-saving drugs.

Leukaemia & Lymphoma Research says that the number of people dying from blood cancers, which have traditionally been seen as rarer cancers, is now slightly higher than breast and prostate cancer. Blood cancers are the most common cause of cancer deaths in the under 35s, with new figures released by the charity showing that over 12,000 people still die of blood cancers each year. With some notable exceptions, survival rates have improved very little for most forms of blood cancer in the last decade.*

There are so many different blood cancers that it has often been seen as uneconomical to develop drugs for many types. When new drugs are available, often clinical trials are not set up because of the difficulties of recruiting enough patients at a single hospital to make them workable. Those that do get off the ground can take as long as ten years to complete. A team is already in place at Birmingham to manage and coordinate world class trials that will speed delivery of new treatments to blood cancer patients.

Leukaemia & Lymphoma Research Clinical Trials Adviser, Professor Charlie Craddock, Director of the Centre for Clinical Haematology run by the University of Birmingham and University Hospitals Birmingham NHS Trust, said: "Every doctor will tell you that they are routinely turning down promising new drugs because they don't have the resources to conduct early stage clinical trials. We have a moral case for getting new drugs out there as soon as possible – if you have a relative with a blood cancer, you don't want life-saving treatment available in ten years, you want it now.

"Being part of this clinical trials network will increase the access of blood cancer patients in Birmingham to potential life-saving drugs and treatments. It offers hope to those patients who do not respond to current treatments."

Queen Elizabeth Hospital will be allocated a trial coordinator to help recruit patients who are not responding to current treatment. They will also deal with the time-consuming paper work associated with setting up clinical trials for promising new drugs.

Because trials in Birmingham will be linked up to other hospitals in the new national network, individual patients with even very rare blood cancers will now be able to be treated with new drugs at the Queen Elizabeth Hospital, rather than having to travel to get on a clinical trial suited to them. The first trials are expected to be entered into the network by the end of the year.

In a move that exemplifies the 'Big Society', Leukaemia & Lymphoma Research has provided a strategic solution to the problem by investing £2.3million in the innovative clinical trials network, which will see trials completed within two years of being given funding. Leukaemia & Lymphoma Research are working with pharmaceutical companies and NHS hospitals to bring up to £50 million of promising new drugs to patients over the next two years through the network, which will create up to 500 jobs. The first trials are expected to be entered into the network by the end of the year. It is hoped that it will also provide a model for improving treatment for other rarer diseases and cancers.

Cathy Gilman, Chief Executive of Leukaemia & Lymphoma Research, said: "Thanks to 50 years of investment in research by Leukaemia & Lymphoma Research, a lot is known about the basic biology of blood cancers. We are now in a better position than ever to accelerate the translation of this wealth of knowledge from the laboratory to the bedside. The clinical trial process currently lacks a systematic national approach. Our investment will set in place a unique infrastructure to co-ordinate world class trials and deliver 'Tomorrow's Treatments Today' - giving more blood cancer patients a future."

Dr Russell Hamilton, Department of Health Director of Research & Development, said "The goal of delivering the newest and most promising blood cancer treatments to patients faster is something that we strongly support. Leukaemia & Lymphoma Research's clinical trials network is a great model for the sort of partnership between charities and the NHS which can lead to real improvements in treatment. The NIHR Clinical Research Network will provide the required NHS support for this research."

Ex-England and Crystal Palace footballer Geoff Thomas, who himself was diagnosed with leukaemia in 2003, has been campaigning with Leukaemia & Lymphoma Research's to set up the network. Thomas, who has been in remission after a bone marrow transplant performed by Professor Charlie Craddock and his team, said: "I was incredibly lucky, but many of the people I met in hospital did not survive. There are still far too many young people dying from blood cancers while life-saving drugs sit on the shelf. This new network is a major step towards beating blood cancers."

For further information, please contact Henry Winter at Leukaemia & Lymphoma Research Press Office on 020 7269 9019, 07824 375880 or email: hwinter@beatbloodcancers.org (<mailto:hwinter@beatbloodcancers.org>).

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