







# PRESENT THE 2023 EARLY DETECTION OF CANCER CONFERENCE

10-12 October 2023

Conference venue

**CENTRAL HALL** STOREY'S GATE LONDON SW1H 9NH

Wednesday 11 October

Wednesday evening conference dinner

Imperial War Museum Lambeth Rd London SF1 6H7

This conference will use an online question submission system. To participate, go to Slido.com and enter the code: edxconf23

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### Welcome from the scientific committee Introducing our scientific committee **Agenda**

#### Speaker and Session Information

- Keynote: Cracks, leaks and waste in the cancer biomarker pipeline
- Inequalities in cancer detection and diagnosis
- Lightning talks: Inequalities in cancer detection and diagnosis
- The Great Debate: We need to shift early detection of cancer out of the medical system and deliver it in the community
- Understanding pre-cancers to enable early detection
- Lightning talks: Understanding pre-cancers to enable early detection
- The Great Debate: All cancer screening must be reserved for 'high- risk' population
- A conversation with Antonis Antoniou and Sapna Syngal: 'Can data revolutionise our approach to early detection?'
- Lightning talks: Risk stratification to inform early detection
- Risk stratification to inform early detection
- Panel: Why haven't the technological and regulatory advances from our learnings of the pandemic accelerated research in the cancer early detection research field?
- Keynote: Integration of imaging and biomarkers for the early detection of cancer
- Panel: How can we integrate information coming from traditional imaging with molecular biomarkers and clinical information to aid the early detection of cancer?
- Networking session
- Multicancer early detection beyond ctDNA
- Lightning talks: Multicancer early detection beyond ctDNA
- Panel: Introducing Patient and Public Involvement in your Early Detection Research - Starting the conversation
- Panel: The health economics of early detection
- Keynote: Stem Cell Pathways, Aging and Pre-Cancer Evolution

#### **Don Listwin Award**

An international collaboration

Funding opportunities in early detection research

**Organising institutions** 

**Sponsors** 

**Conference organisers** 

**Poster Menus** 

Attendee List



On behalf of Cancer Research UK (CRUK), the Canary Center at Stanford and the OHSU Knight Cancer Institute, we welcome you all to London for the eighth Early Detection of Cancer Conference.

# WELCOME

Early detection is one of the most powerful ways in which we can improve cancer survival. Improving the early detection of lethal cancers is fundamental to treating patients more effectively. However, this is a very complex field. Early detection is multi-disciplinary, requires long-term evidence to prove success and may require entirely new approaches to tackling disease. For these reasons, Cancer Research UK, the Canary Center at Stanford and the OHSU Knight Cancer Institute have joined forces to address these challenges and accelerate progress.

CRUK and OHSU's first conference brought together 120 world-leading scientists in June 2016 in Portland, Oregon. In 2017, we held another conference of 160 attendees together in Cambridge, UK. These meetings were designed to stimulate creative thinking, build relationships across the globe, and assess the state of the art in the early detection field. In 2018, the Canary Center at Stanford for Cancer Early Detection joined us as a third partner. Together, we are building on our meeting histories to explore the current state of the early detection field and help define key challenges through a wide range of presentations and discussions.

As leaders in your fields, you have much to contribute to this conference. We want to unite world-leading scientists from multiple disciplines, and create a global network of experts dedicated to advancing this field. Collaboration is key to making this happen, so we ask you to take advantage of the discussions and networking opportunities to develop and share ideas and identify ways of driving the field forward.

We look forward to a lively and thought-provoking conference, and to hearing from you about how we tackle this important problem. Thank you for participating to the fullest!

#### Fiona Walter

Director of the Wolfson Institute of Population Health, **Professor of Primary Care** Cancer Research Queen Mary University of London

#### Julia Maxson

Associate Professor Knight Cancer Institute, Oregon Health & Science University

#### Ramasamy Paulmurugan

Professor of Radiology Stanford University

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# OUR SCIENTIFIC COMMITTEE



**Fiona Walter** Queen Mary University of London

Fiona Walter is Director of the Wolfson Institute of Population Health, one of six Institutes at Queen Mary University of London's Faculty of Medicine and Dentistry. The Institute has six centres, and she contributes to leadership of the Centre for Cancer Screening, Prevention & Early Diagnosis. Fiona joined Queen Mary in April 2021 as Professor in Primary Care Cancer Research. After serving as Reader in Primary Care Cancer Research at the University of Cambridge. She also worked as a GP in the NHS over more than three decades.

Fiona's research focuses on developing and evaluating new diagnostics and diagnostic approaches to all aspects of prevention, early detection, and diagnosis of cancer in primary care. She co-led the CanTest Collaborative

Cancer Research UK's first Catalyst award, focussing on the transformative implementation in primary care of tests to support early detection of cancer, and delivering an annual CanTest International School for Cancer Detection Research in Primary Care. Fiona is also co-investigator on the NIHR Policy Research Unit in Cancer Awareness, Screening and Early Diagnosis. Current UK research leadership roles include deputy-Chair for Cancer Research UK's Early **Detection and Diagnosis** committee. Fiona contributes to cancer research in Europe and the US and co-leads an NIHR Global Research Group 'Advancing Early Diagnosis of Cancer across Southern Africa'. Her international work is marked by an honorary academic role at the University of Melbourne, Australia.



Julia Maxson Knight Cancer Institute, Oregon Health & Science University

Dr. Maxson is an associate professor at the Knight Cancer Institute with a passion for translational leukemia research. Her laboratory focuses on uncovering how genomic changes manifest at the cellular level to promote cancer formation and progression. She has a particular interest in understanding how

epigenetic and transcriptional dysregulation in the preleukemic state sets the stage for oncogenic transformation. Her long-term goal is to use this mechanistic understanding to develop lifesaving treatments for patients with myeloid malignancies.

# OUR SCIENTIFIC COMMITTEE



Ramasamy Paulmurugan Stanford University

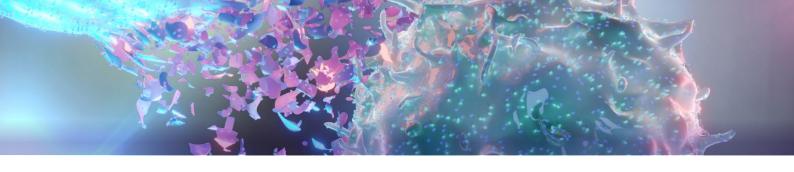
Dr. Ramasamy Paulmurugan is a Professor in Radiology at Stanford University School of Medicine. He received his Masters in Biomedical Genetics and PhD in Molecular Virology from the University of Madras, India. After serving as a scientist for four years, he ioined the School of Medicine at University of California, Los Angeles (UCLA) as a visiting scientist. In 2003, he moved to Stanford as a Senior Research Scientist.

Since 2009, he has been with the Department of Radiology at Stanford University under the Molecular Imaging Program (MIPS) and Canary Center for Cancer Early Detection. He is a pioneer in developing split-reporter protein complementation systems for different reporter genes (luciferases, fluorescent proteins, and thymidine kinase), and has been using them for imaging cellular protein-protein interactions in living animals.

Currently, his lab (Cellular Pathway Imaging Laboratory (CPIL)) is working on the application of different imaging strategies to evaluate the therapeutic role of ERb, another important estrogen receptor, which is recently identified as one of the major players in estrogen

biology. Other applications where his lab currently applying these assays include studying protein-protein interactions involved in estrogen receptor signaling, Nrf2-mediated antioxidant signaling in chemoresistance, p53-sumoylation mediated chemotherapy responses in cancer, NFkB mediated cytokine signaling in cancer, and signaling mechanisms associated with APP and Tau protein sumovlations in Alzheimer's disease.

In cancer therapy, his lab established microRNA-based reprogramming approaches to sensitizing drug-resistant cancers. In synthetic biology, his lab recently invented the application of a highpressure microfluidic system in the reconstruction of biomolecules derived from cells (proteins and lipids) along with synthetic sources (phospholipids, polymers, and surfactants) to develop self-assembled nano- and micro-structures that mimic biological membranes for drug and microRNA delivery applications. As part of this process, his group developed biomimetic microbubbles (biMBs) and nanobubbles (biNBs) using tumor cell derived exosomes (TDEs) for cancer immunotherapy and imaging.



# CONFERENCE AGENDA

### **Monday 9 October**

18:00 – 21:00 Trainee networking event

#### **Tuesday 10 October**

08:00 – 09:00 Registration and poster set-up

09:00 - 09:05 **Day 1 opening remarks** 

Fiona Walter, Queen Mary University of London

09:05 - 09:50 Cracks, leaks and waste in the cancer biomarker pipeline

Patrick Bossuyt, Amsterdam University Medical Centers,

University of Amsterdam

09:50 – 12:10 Inequalities in cancer detection and diagnosis

Chairs: Kate Brain, Cardiff University

Carmen Guerra, Perelman School of Medicine, University of

Pennsylvania

Speakers: Steven Patierno, Duke Cancer Institute

Manali Patel, Stanford University School of Medicine and VA Palo

Alto Health Care System

Katie Robb, University of Glasgow Jamil Rivers, The Chrysalis Initiative

30-minute session break and poster session from 10:30 – 11:00

12:10 – 12:40 **Lightning talks** 

Speakers: Nathan Thompson – Establishing Rapid Cancer Diagnostic

Services (RCDS) in Scotland

Mao Mao – A panel of seven protein tumour markers for effective and affordable multi-cancer early detection by

artificial intelligence

Sisse Njor – How do organisational and socioeconomic factors affect the adherence to colonoscopy surveillance adherence in the Danish FIT-based colorectal cancer screening program.

Haleema Aslam – How to improve uptake of breast cancer screening and access to breast cancer services for South Asian and African and African – Caribbean women in Leicester.

12:40 - 13:40	Networking lunch and poster session		
13:40 - 14:15	The Great Debate: We need to shift early detection of cancer out of the medical system and deliver it in the community		
	Chair:	David Crosby, Cancer Research UK	
	Debaters:	Clare Turnbull, The Institute of Cancer Research	
		Peggy Hannon, University of Washington	
14:15 – 16:50	Understanding pre-cancers to enable early detection		
	Chairs:	Sam Janes, University College London	
		Irene Ghobrial, Dana-Farber Cancer Institute	
	Speakers:	Trevor Graham, The Institute of Cancer Research	
		Margarete Fabre, AstraZeneca	
		Adam Pennycuick, University College London	
		Laura DeLong Wood, Johns Hopkins University School of Medicine	
	*30-minute session break and poster session from 15:10 – 15:40		
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16:50 – 17:20	*30-minut	te session break and poster session from 15:10 – 15:40	
16:50 – 17:20	Lightning	te session break and poster session from 15:10 – 15:40	
16:50 – 17:20	Lightning	talks  Emmanouela Mitta – Towards A Physiologically Relevant Lung	
16:50 – 17:20	Lightning	talks  Emmanouela Mitta – Towards A Physiologically Relevant Lung In Vitro Model for Early Cancer Biomarkers  Harmeet Dhani – Proteomic Expression Using Exosomes in Intraductal Papillary Mucinous Neoplasms (IPMN) Patients to	
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#### **Wednesday 11 October**

12:50 - 14:00

07:45 - 08:45Registration and poster set-up 08.45 - 08.50Opening remarks Julia Maxson, Knight Cancer Institute, Oregon Health & Science University 08:50 - 09:25The Great debate: All cancer screening must be reserved for 'high- risk' population Chair: David Crosby, Cancer Research UK Debaters: Fiona Gilbert, University of Cambridge Hilary Robbins, International Agency for Research on Cancer 09:25 - 09:55A conversation with Antonis Antoniou and Sapna Syngal: 'Can data revolutionise our approach to early detection?' Speakers: Antonis Antoniou, University of Cambridge Sapna Syngal, Dana-Farber Cancer Institute 09:55 - 10:25 Lightning talks Speakers: Xiaoshuang Feng – A modeling study for eligibility criteria of national lung cancer screening in France Samantha Ip – Integrated Dynamic Early Detection Models for CRC: A Prospective Study of the General Populations and Symptomatic Cohorts in UK Biobank Suzanne Scott – Future cancer risk after urgent suspected cancer referral when cancer was not found Paul Barber – Multi-modal Signatures for Enhanced Lung Cancer Detection and Interpretability 10:25 - 10:55Networking break and poster session 10:55 - 12:50Session: Risk stratification to inform early detection Chairs: Yoryos Lyratzopoulos, University College London Sapna Syngal, Dana-Farber Cancer Institute Speakers: Rosalind Eeles, The Institute of Cancer Research Angela Wood, Health Data Research UK / University of Cambridge Brian Nicholson, University of Oxford Michael Rosenthal, Dana-Farber Cancer Institute and Brigham and Women's Hospital Helen White. Patient Advocate

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Networking lunch and poster session

14:00 – 14:45	Panel: Why haven't the technological and regulatory advances from our learnings of the pandemic accelerated research in the cancer early detection research field?  Chair: Jon Emery, University of Melbourne  Panelists: Chris Whitty, UK Government  Alexander David Borowsky, UC Davis School of Medicine  Lisa Lacasse, American Cancer Society Cancer Action Network		
14:45 – 15:20	Keynote: Integration of imaging and biomarkers for the early detection of cancer  Edward Patz, Duke University School of Medicine and Grid Therapeutics		
15:20 – 15:55	Panel: How can we integrate information coming from traditional imaging with molecular biomarkers and clinical information to aid the early detection of cancer?		
	Chair: Cristian Tomasetti, City of Hope		
	Speakers: Edward Patz, Duke University School of Medicine and Grid Therapeutics		
	Caroline Dive, CRUK Cancer Biomarker Centre, University of Manchester		
	Shonit Punwani, University College London		
15:55 – 16:25	Networking break and poster session		
16:25 – 17:25	Networking session		
17:25 – 17:30	Closing remarks  Julia Maxson, Knight Cancer Institute, Oregon Health & Science University		
17:30 – 18:30	Networking drinks and poster session		
18:30 – 19:00	Shuttles to The Imperial War Museum. Attendees to make there way to the entrance of Central Hall. Staff will be onsite to direct you.		
	Traders will be onsite from 7pm to serve food.		
20:30-21:00	Don Listwin Award presentation		
21:00 – 23:30	Band performance, networking and opportunity to explore WW1 gallery		
23:30	Shuttles back to Central Hall		

#### **Thursday 12 October**

08:30 - 09:00 Registration

09:00 – 09:05 **Opening remarks** 

Ramasamy Paulmurugan, Stanford University

09:05 – 11:40 Session: Multicancer early detection – beyond ctDNA

Chairs: Matthew Thompson, Google LLC

Claude Chelala, Queen Mary University of London

Speakers: Søren Brunak, Novo Nordisk Foundation Center for Protein

Research, University of Copenhagen

Paul Brennan, University of Edinburgh / NHS Lothian

Garth Funston, Wolfson Institute of Population Health, Queen

Mary University of London

Francesco Gatto, Elypta

\*30-minute session break from 10:00 – 10:30

11:40 – 12:10 **Lightning talks** 

Speakers: Jose Montoya Mira – A rapid and low-volume protease

activity assay for the early detection of Pancreatic Ductal

Adenocarcinoma

Taylor Cavazos – Detection of early-stage cancers and tissue of

origin using circulating orphan non-coding RNAs

Evelyn Fitzsimons – Integration of innate and adaptive immune

signatures for early detection of cancer

Franco Faucher – Protease Activated Real-Time Ratiometric Imaging for Early Cancer Detection in Surgical and Diagnostic

**Applications** 

12:10 – 12:45 Panel: Introducing Patient and Public Involvement in your Early Detection

Research – Starting the conversation

Chairs: Fiona Walter, Queen Mary University of London

Jamil Rivers, The Chrysalis Initiative

Speakers: Richard Stephens, Patient advocate

Angela King, Independent Patient advocate

12:45 – 13:45 Networking lunch

13:45 - 14:20	Chair:	health economics of early detection  Larry Kessler, University of Washington  Bethany Shinkins, University of Warwick  Natalia Kunst, University of York  Stuart Wright, University of Manchester
14:20 – 15:05	Keynote: Stem Cell Pathways, Aging and Pre-Cancer Evolution Catriona Jamieson, Stanford Stem Cell Institute	
15:05 - 15:15	Poster prize winners	
15:15 – 15:20	Closing rer	marks Paulmurugan, Stanford University

## SPEAKER AND SESSION INFORMATION TUESDAY 10 OCTOBER

### **KEYNOTE:** Cracks, leaks and waste in the cancer biomarker pipeline



**Patrick Bossuyt** Amsterdam University Medical Centers, University of Amsterdam

Patrick M. Bossuyt is the professor of Clinical Epidemiology at the Amsterdam University Medical Centers, where he leads the Biomarker and Test Evaluation (BiTE) research program.

The BiTE program aims to appraise and develop methods for evaluating medical tests and biomarkers, with an emphasis on clinical performance, and to apply these methods in relevant clinical studies. In doing so, the program wants to strengthen the evidence base for rational decision-making about the use of tests and testing strategies in health care. Dr Bossuyt spearheaded the STARD initiative for the improved reporting of diagnostic test accuracy studies.

Dr Bossuyt has authored and co-authored several hundred publications in peer reviewed journals and serves on the editorial board of a number of these, including Radiology and Clinical Chemistry. He acted as chair of the Department of Clinical Epidemiology & Biostatistics at his university, chaired the Division of Public Health, and was Dean of Graduate Studies. For 10 years, Dr Bossuyt also chaired the Scientific Advisory Committee of the Dutch Health Insurance Board, which oversees the health care benefits covered in the national health insurance program.

#### Session 1:

#### Inequalities in cancer detection and diagnosis

There are significant disparities in rates of early detection and diagnosis of cancers between numerous parts of society, including between groups separated by ethnicity, gender, socioeconomic status and geography. This session will explore the reasons for and mechanisms of these differences, their impact on timeliness of detection and interventions to ameliorate these inequities.



Chair: **Kate Brain**Cardiff University

Kate Brain is a Professor of Health Psychology at Cardiff University School of Medicine. Her research focuses on behavioural aspects of cancer screening, prevention and early diagnosis, with a particular emphasis on addressing socioeconomic inequality.

Since 2015, Kate has led a programme of behavioural science research spanning the Wales Cancer Research Centre and Primary and Emergency Care Research Centre, funded by Health and Care Research Wales. Kate is Associate Director of Population Health in Cardiff University's College of Biomedical and Life Sciences.

She is a member of Cancer Research UK's Early Detection and Diagnosis Research Committee and advises NHS England on the Targeted Lung Health Check programme. In 2022, Kate joined the Multi-Cancer Early Detection Consortium as UK Deputy Chair of the Health Equity work group.

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ACENIDA



Chair: Carmen Guerra Perelman School of Medicine, University of Pennsylvania

Dr Carmen Guerra is the Ruth C. and Raymond G. Perelman Professor of Medicine at the Perelman School of Medicine at the University of Pennsylvania. Dr Guerra is a general internist and cancer equity researcher. She is also the Vice Chair of Diversity and Inclusion for the Department of Medicine and the Associate Director of Diversity and Outreach for the Abramson Cancer Center.

Dr Guerra's research has focused on developing and evaluating interventions to increase the participation of underrepresented populations in cancer screenings and cancer clinical trials. She developed and evaluated several cancer screening patient navigation programs and programs to increase participation of Black patients in cancer clinical trials including a Cancer Clinical Trials Ambassador Program and a financial reimbursement program for out-of-pocket costs for patients participating in cancer treatment trials.

Dr Guerra serves as the U.S. Deputy Chair for the health equity workgroup of the Multicancer Early Detection Consortium. Dr Guerra co-chaired the American Society of Clinical Oncology-Association of Community Cancer Centers workgroups that developed an unconscious bias training specifically for cancer research teams, "Just Ask"; an equity, diversity and inclusion site self-assessment for cancer research teams to identify best practices; and the ASCO-ACCC joint research statement "Increasing Racial and Ethnic Diversity in Cancer Clinical Trials." She also is member of the American Cancer Society (ACS) National Board of Directors and a member of the ACS Clinical Guidelines Development group. Dr Guerra is an author of the ACS colorectal, cervical and HPV clinical practice guidelines which widely influence clinical practice.

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**Jamil Rivers**The Chrysalis Initiative

Jamil Rivers is a leading advocate for people of colour (POC) with cancer. As a pioneering activist for equitable care in cancer — and through the organisation she founded — she has helped thousands of patients overcome disparities in cancer care and aided cancer centres in identifying race-based gaps in services.

As CEO of The Chrysalis Initiative, Jamil leads a team of experienced cancer coaches delivering enhanced navigation to patients and equity specialists helping healthcare providers to erase race-based shortcomings in care that result from conscious and unconscious bias.

A finance graduate of Rutgers University, with an MBA from Arcadia University and finance master's from Southampton University,

Jamil has additional certifications in such areas as leadership, IT, and compliance and ethics, including through the Wharton School, U.C. Berkely, and Villanova University.

Jamil has affiliations, trainings and advocacy activities with Susan G. Komen; Living Beyond Breast Cancer; and her initiative's partners in the pharma/biomedical industries. She has spoken at many national conferences. Good Morning America and People magazine have featured Jamil's own personal story of cancer survival and the success of her nonprofit organisation in supporting justice in cancer care.



**Steven Patierno**Duke Cancer Institute

Steven R. Patierno, PhD serves as the Charles D. Watts Distinguished Professor of Medicine, Professor of Pharmacology and Cancer Biology and Professor of Family and Community Medicine at the Duke University School Medicine, and as Deputy Director of the Duke Cancer Institute (DCI). He earned a Bachelor of Science in Pharmacy from the University of Connecticut, a PhD in molecular pharmacology from the Graduate School of Biomedical Science, University of Texas Health Science Center-MD Anderson Cancer Institute in Houston Texas, and did postdoctoral training at the University of Southern California (USC) Norris Comprehensive Cancer Center in molecular oncology and carcinogenesis.

He was the Vivian Gill Distinguished Professor of Oncology, and Professor of Pharmacology, Physiology and Urology at the GWU School of Medicine and Health Sciences, and served as Executive Director of The George Washington University Cancer Center for ten years prior to moving to Duke in 2012. Dr Patierno's translational research laboratory has been funded continuously for nearly 30 years. He is internationally recognised for research on molecular oncology, the genomics of cancer disparities, and for his pioneering work addressing the multi-level drivers of cancer disparities. He help found the AACR Science of Cancer Disparities Annual Conference now its 18th year. He received the AACR 2019 Distinguished Cancer Disparities Research Award was recognised as a Distinguished Alumnus of the University of Texas MD Anderson Cancer Institute, by Duke University for his extensive work in cancer health equity, and by numerous organisations for impactful community engagement.



Katie Robb University of Glasgow

Professor Katie Robb leads the Cancer Behaviour Research Group at the University of Glasgow. She is passionate about reducing inequalities in cancer and her research focuses on optimising early detection and diagnosis behaviours. Her research includes advancing

the co-design of interventions to improve access to cancer screening for all. Katie has an MA in Psychology from the University of St Andrews and an MSc and PhD in Health Psychology from University College London.



Manali Patel Stanford University School of Medicine and VA Palo Alto Health Care System

Dr Manali Patel is an Associate Professor at Stanford University in the Division of Oncology and a Staff Thoracic Oncologist at the Veterans Affairs Palo Alto Health Care System.

She is a health services researcher and directs research programs at both Stanford and the VA that focuses on improving equitable delivery of cancer care. She uses principles of community-based participatory research in her work and is the principal investigator of multiple externally funded awards, such as the California Initiative to Advance Precision Medicine, the Patient Centered outcomes Research Institute, and the National Institutes of Health.

Dr Patel serves on several national committees focused on improving cancer care delivery and value-based care. She is the past chair of the American Society of Clinical Oncology (ASCO) Health Equity Committee, the ASCO Serving the Underserved Taskforce, and serves on the ASCO Government Relations Committee. She earned her medical degree and Masters in Public Health at the University of North Carolina at Chapel Hill, followed by Internal Medicine Residency, Hematology and Oncology Fellowship and several research fellowships. in addition to obtaining a Masters in Health Services Research at Stanford.

#### Lightning talks:

### Inequalities in cancer detection and diagnosis



Nathan Thompson University of Strathclyde

Nathan Thompson is a Research Associate in Management Science at the University of Strathclyde in Glasgow. Nathan has a BSc (hons) in Mathematics & Statistics (The Open University) and an MSc in Statistics (The University of Sheffield), as well Postgraduate Certificates in Machine Learning (The Universities of both St Andrews and Aberdeen). Previous to his current appointment, Nathan worked as a Statistician / Operational Research analyst in the nuclear industry, applying a range of modelling techniques to research problems.

Nathan's current research focuses on healthcare modelling, including health analytics and health economics. Together with colleagues from the University of Strathclyde, Nathan is working on several projects relating to the early detection of cancer. One of these projects concerns the quantitative and qualitative evaluation of recently established Rapid Cancer Diagnostic Services (RCDS) in Scotland. These are person-centred fast-track diagnostic pathways for patients with non-specific symptoms, such as unintended weight-loss, that are suspicious of cancer. Nathan is predominantly involved in the quantitative element of this work, using Discrete-event simulation to conduct an health-economic evaluation.

Another project, in close collaboration with a team of cancer specialists from the University of Liverpool, analyses the cost-effectiveness of an innovative biomarker signature for patients with new onset diabetes who are considered to be at heightened risk for pancreatic cancer, using Markov state transition modelling.



**Mao Mao** SeekIn Inc

Dr. Mao Mao is Founder and CEO of SeekIn Inc, a biotech company focusing on cancer early diagnosis and care management. He is a member of patient advocacy group Inspire2Live and also Adjunct Professor of Yonsei University. He was CSO of BGI Genomics responsible for R&D pipeline and oncology business. He was Senior VP for in vitro diagnostics (IVD) product development and clinical lab service at WuXi AppTec. He was President of Asian Cancer Research Group (ACRG), a non-profit focusing on the genomic research of the prevalent

cancers in Asia. He held several senior positions at Pfizer and Merck in the past. He also practiced as obstetrician/gynecologist and genetic consultant. As one of the founding members of the National Human Genome Center in Shanghai, he established the first high-throughput DNA sequencing facility and pioneered genome research in China. He published 110+ articles in the peer-reviewed journals including Nature, Cell, and Nature Genetics. He is a strong advocate of advancing equitable cancer care through innovation.



Sisse Njor Vejle Hospital, University Hospital of Southern Denmark

Sisse Nior leads a research group at Veile Hospital, University Hospital of Southern Denmark, Denmark and was appointed Associate Professor at Aarhus University in 2018. Sisse Nior holds a Master of Science in Statistics and Computer Science and a PhD in epidemiology. Her research focus is on how to maximise the citizens' benefits of cancer screening and minimise the harm. Her research career started in 2001 where she focused on the benefits and harm of mammography

screening. Since then her research focus has expanded to benefits and harms of colorectal cancer screening and cervical cancer screening. Her research is mainly quantitative and concentrates on how to use healthcare data from registers to estimate the benefits and harm of cancer screening. She has 86 articles in PubMed and an H-index of 23 (Scopus). She is currently collaborating with researchers from the UK, Australia, Belgium, Finland, Ireland, Norway, Spain and Sweden.



Haleema Aslam De Montfort University

Haleema Aslam is a final year doctoral student at De - Montfort University Leicester, based in the Mary Seacole Research Centre. She is currently completing her PhD thesis, funded by Leicestershire based, "Hope Against Cancer", on "Improving access to breast cancer screening and treatment for minority ethnic women in Leicester".

Haleema specialises in qualitative research with patients, service users from minority ethnic communities and people living with disabilities. She has enhanced her research skills through her PhD journey by developing skills in critical thinking, using NVIVO software for analysis and understanding philosophies. She has contributed actively to postgraduate activities through her PhD, via participation in conferences, seminars, training, and participation, and by being nominated as a finalist for the "three minute thesis".

Prior to this Haleema worked in the charity sector, specialising in patient involvement, and improving access to health and empowering both individuals and organisations in her roles at Action for Blind People (RNIB) and Healthwatch Nottingham.

Haleema's interest in learning about different subjects enabled her to complete and MBA Ethnic Minority voluntary sector organisations at the University of East London, and also a MSC in Social Research from the University of Leicester.

Haleema enjoys spending time with friends and her 15-year-old son.

#### The Great Debate 1:

# We need to shift early detection of cancer out of the medical system and deliver it in the community

This debate will focus on the proposition that early detection of cancer should be moved away from medical practices and hospitals and into the community. This lively discussion session will explore the potential benefits and challenges associated with hospital and community-led cancer detection.



Chair: **David Crosby**Cancer Research UK

David Crosby is Head of Prevention and Early Detection Research at Cancer Research UK, a fundraising research charity and the world's second largest non-commercial funder of cancer research, after the US government.

David began life as a baby, before becoming a pharmacologist, completing a PhD studying cell signalling in platelets. He spent time in academia, lecturing in clinical pharmacology. He moved into industry, identifying and evaluating new clinical development opportunities for Linde Gas Therapeutics, the world's largest medical gases company. He then moved into the public sector, joining the UK government research funding agency, the Medical Research Council,

where he oversaw various science areas and research funding programmes (including inflammation, cardiovascular and respiratory research), leading the MRC-NIHR methodology research programme, and MRC's strategy and investments in experimental medicine.

He is now developing and implementing a new strategy and programme of research investments at CRUK, which aims to accelerate progress towards earlier detection and prevention of cancer through an integrated multidisciplinary approach, driven by equitable improvements in health outcomes. He also works part-time for the UK government, advising the Office for Life Sciences on the UK's Cancer Mission.

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Clare Turnbull The Institute of Cancer Research

Clare's research team focuses on statistical. population and public-health-related analyses to best leverage cancer susceptibility genetics for risk stratification, cancer early diagnosis and prevention. She is currently leading three multi-centre CRUK-funded research programs focused on cancer susceptibility gene testing pathways (BRCA-DIRECT), variant interpretation (CanGene-CanVar) and functional inference from high throughput assays (CG-MAVE). Working with the NHSE Cancer Program, she is leading two implementation programs using high-throughput pathways to scale genetic testing in the NHS, including an SBRI-funded initiative for using digital platforms for BRCA-testing in women diagnosed with breast cancer. She has led genome-wide association studies in breast and testicular cancer, as well as evaluations of polygenic risk prediction in these and other cancers. She is also an

honorary consultant in Public Health Medicine with NHS Digital/NHSE, working together on amalgamation of genomic data from across the national NHS Genomic Laboratory hubs.

From 2014 to 2020, Clare worked as Clinical Lead for Cancer Genomics for the Genomics England 100,000 Genomes Project. Having trained as a Clinical Geneticist, her clinical work at The Royal Marsden NHS Foundation Trust focuses on management of patients and families with genetic susceptibility to cancer.

Clare undertook her preclinical training in Cambridge and qualified in medicine from Oxford University. She completed a Masters in Epidemiology at the London School of Hygiene and a PhD in Genetic Epidemiology at The Institute of Cancer Research, London.



**Peggy Hannon** University of Washington

Peggy Hannon, PhD, MPH is a professor in the Department of Health Systems and Population Health at the University of Washington School of Public Health and Director of the Health Promotion Research Center, a CDC Prevention Research Center. She also co-leads the Optimizing Implementation in Cancer Control (OPTICC) Center, an NCI Implementation Science Center for Cancer Control. She completed her training in public health and social psychology at the University of North Carolina at Chapel Hill, and completed a postdoctoral fellowship at the University of Washington and Fred Hutchinson Cancer Center.

Dr Hannon's research focuses on dissemination and implementation research, with an emphasis on cancer screening, workplace health promotion and communities experiencing health disparities. She develops and tests interventions in partnership with community-based organisations, the Centers for Disease Control and Prevention, and state and local departments of health to disseminate and implement evidence-based practices with workplaces, federally qualified health centers and other community settings.

#### Session 2:

#### Understanding pre-cancers to enable early detection

This session aims to discuss the detection, characterisation, and biological understanding of progression of pre-cancers to inform early detection. The session will explore how we can go about detecting pre-cancerous lesions or changes (in both solid and haematological conditions) to intercept and prevent progression to malignancy.



Chair: **Sam Janes**University College London

Sam is the Director of Medicine at University College London, a division within the Faculty of Medical Sciences that encompasses eight departments, over 20 centres and around 100 principal investigators across three campuses.

His laboratory research, funded by Medical Research Council and Cancer Research UK programme grants, focuses on the airways and examines both normal homeostasis and the earliest development of cancer. Major contributions include defining that normal airway homeostasis is governed by stochastic division of basal cell; showing that airways genetically damaged by smoking can resolve on quitting; mapping the molecular architecture of pre-cancerous Squamous cell lesions and identifying the immunological abnormalities that allow precancerous lesions to progress to cancer.

These achievements were recognised with his election to the Academy of Medical Sciences in 2021. He is the chief investigator of several trials ranging first-in-man trials of cell and gene therapies emanating from his own lab to SUMMIT, the largest lung cancer screening

trial in Europe recruiting over 13000 people. He works across the University, UCL Hospitals, the UCLH Biomedical Research Centre and interacts closely with industry, again ranging from trial delivery through to venture capital funded drug discovery programmes.

He works as a respiratory consultant at UCLH with a particular interest in lung cancer, mesothelioma, interventional and diagnostic bronchoscopy and early lung cancer detection. He has been Head of UCL Respiratory, Vice-Chair of the National 'Clinical Expert Group' on Lung Cancer and the Faculty of Medical Science Vice-Dean of Research at UCL.

CONTENTS

ACENIDA .



Chair Irene Ghobrial Dana-Farber Cancer Institute

Dr Ghobrial completed her MD at Cairo University and a residency in internal medicine at Wayne State University in Detroit, Michigan, then trained as a hematology/oncology fellow at the Mayo Clinic in Rochester, Minnesota. She is currently Professor of Medicine and the Lavine Family Chair for Preventative Cancer Therapies at Dana-Farber Cancer Institute, Harvard Medical School. She is the Director of Translational Research in the Department of Multiple Myeloma, Director of the Center for Prevention of Progression diseases (CPOP), and co-leader of the Lymphoma and Myeloma Program at Dana-Farber. She is the co-leader of the Stand Up to Cancer Myeloma Dream Team—the first Dream Team award for blood cancer, the recipient of the Claire W. and Richard P. Morse Research Award, the Jan Gosta Waldenstrom Award, and the William Dameshek Prize given annually by The American Society of Hematology (ASH) to an individual, younger than 50, who has made outstanding contributions in hematology.

Her research focuses on identifying and developing effective therapeutic interventions for precursor conditions of myeloma (monoclonal gammopathy of undetermined significance (MGUS) and smoldering multiple myeloma (SMM)). The focus of her research is to identify novel biomarkers of disease progression and develop potentially curative therapies in the pre-malignant phase that exploit the immune microenvironment in the bone marrow. She developed a large, patient-empowering observational study for these precursor conditions, the PCROWD study. She is also the PI of the first screening study for multiple myeloma in the US, the PROMISE study, which is currently screening 30,000 high-risk individuals, including those of African descent or with a family history of blood cancer.



**Trevor Graham** The Institute of Cancer Research

Prof Trevor Graham is director of the Centre for Evolution and Cancer at The Institute of Cancer Research in London, UK. His interdisciplinary Genomics and Evolutionary Dynamics lab combines wet-lab molecular biology (mainly genomics) with expertise in bioinformatics and mathematical modelling to measure somatic evolutionary dynamics, with a particular interest in colorectal cancer and pre-malignant conditions in the colon. Trevor was elected a Fellow of the Academy of Medical Sciences in 2022 for his work on cancer evolutionary genomics.



Margarete Fabre AstraZeneca

Margarete is the Oncology Lead in the Centre for Genomics Research at AstraZeneca, and an Honorary Consultant Haematologist at Addenbrooke's Hospital in Cambridge.

Following her medical training at Oxford, she trained as an academic haematologist in London and Cambridge, focussing on haematopoietic ageing and the pre-clinical evolution of cancer. She co-leads the NHS Clonal Haematopoiesis Clinic in Cambridge, with the goal of preventing myeloid malignancies.

She joined AstraZeneca in 2022, where she leads the oncology research and development at the Centre for Genomics Research in Discovery Sciences.



Adam Pennycuick University College London

Adam is a medical oncologist and NIHR Clinical Lecturer at UCL. His research uses bioinformatic and computational techniques to study the earliest stages of lung carcinogenesis. Interrogation of multi-omic data from preinvasive lung lesions has elucidated the timing of critical cancer hallmarks including chromosomal instability and immune evasion, generated powerful predictors of progression to cancer and suggested novel targets for cancer interception.

Adam completed a Masters in mathematics and physics at Warwick and worked as an aerospace engineer before training in Medicine at King's College London. During postgraduate clinical academic training, he applied his mathematical background

to learn bioinformatic and computational techniques in biology. He undertook a Wellcome-funded PhD fellowship with Sam Janes at UCL, where his work on preinvasive lung cancer has defined our understanding of how this cancer develops. His current work combines in-vitro and in-silico techniques to further probe the very first steps in cancer development and find ways to prevent them.



### Laura DeLong Wood Johns Hopkins University School of Medicine

Laura D Wood. MD. PhD is an Associate Professor and Director of the Division of Gastrointestinal and Liver Pathology in the Department of Pathology at the Johns Hopkins University School of Medicine. She is also Co-Leader of the Cancer Invasion and Metastasis Program in the Sidney Kimmel Comprehensive Cancer Center and Deputy Director of the Sol Goldman Pancreatic Cancer Research Center.

Dr Wood received her BS in Biology from the College of William & Mary, graduating Summa Cum Laude with membership in Phi Beta Kappa. She then went on to earn both her MD and PhD from The Johns Hopkins University School of Medicine, with membership in Alpha Omega Alpha. She completed her PhD research in the laboratory of Dr Bert Vogelstein, where she led the first whole exome sequencing studies in human cancers.

Dr Wood then went on to complete residency in Anatomic Pathology (serving as Chief Resident in her final year) and fellowship in Gastrointestinal and Liver Pathology at The Johns Hopkins Hospital.

Now, she leads her own translational research laboratory focused on molecular characterisation of pancreatic neoplasms. Her laboratory leverages next generation sequencing to characterise genetic heterogeneity and clonal evolution in precancerous pancreatic lesions. In addition, her group employs three-dimensional organoid culture models to interrogate the molecular drivers of pancreatic cancer invasion, and they are developing tools to transform human pancreatic pathology from two to three dimensions. In addition to her research program. Dr Wood signs out clinical specimens on the Gastrointestinal Pathology service.

### Lightning talks: Understanding pre-cancers to enable early detection



**Emmanouela Mitta** University of Manchester

Emmanouela Mitta is a final year PhD student in the Henry Royce Institute at the University of Manchester under the supervision of Professor Sarah Cartmell. She completed her BSc in Biological Sciences at the University of Leicester and MRes in Translational Medicine at the University of Manchester. Since her undergraduate degree she undertook wet lab and computational projects in cancer research in the fields of colorectal, pancreatic and lung cancer. Her research interests include soft tissue engineering and lung tumourigenesis and has experience in molecular and cell biology techniques as well as biomaterial development. She has been selected to present posters and

give lightning talks and oral presentations in several conferences including the Early Detection of Cancer Conference, the CRUK Lung Cancer Conference, the Tissue and Cell Engineering Society (TCES) and TERMIS-EU Chapter Conference from which her abstract was published in Tissue Engineering Part A journal. Outside of her PhD project she has gained experience as a graduate teaching assistant, participated in several science communication projects, acted as a member of the organising committee for a department showcase symposium and delivered a masterclass on biomechanical testing.



Harmeet Dhani Biological Dynamics

Dr. Harmeet Dhani is a surgeon scientist and is currently the Head of Medical Affairs and Medical Director at Biological Dynamics, an innovative liquid biopsy biotechnology company that uses extracellular vesicle (EV)-based protein biomarkers for early cancer detection. He is also the Principal Investigator for the ExoLuminate Study which aims to detect pancreatic ductal adenocarcinoma (PDAC) in high-risk patients, including those with pancreatic cystic lesions.

He completed his Medical Degree from St. George's University, went on to a General Surgery and Transplant/HPB Surgery

Sub-Specialty, including a research fellowship at Georgetown University where he has an accomplished track record in studying liver, intestinal disease and oncology-transplantation. He holds a Master's in Clinical Research (UCSD) and is currently earning his Executive MBA at University of California, San Diego. He previously held positions in the oncology division at Natera.



Matthew Ford Cancer Research UK, Cambridge Institute, University of Cambridge

Dr. Ford is a research associate in Professor James Brenton's group at the CRUK Cambridge Institute. He completed his PhD at the University of Edinburgh on the development of cell cycle biosensors, which are based on the FUCCI system for monitoring live cell cycle progression in mammalian development. Dr. Ford then undertook his postdoctoral work at McGill University, focusing on the development of the female reproductive

track and the design of ovarian cancer mouse models using in vivo gene manipulation. At the CRUK Cambridge Institute, his work now focuses on refining these models to understand the interactions between progressing premalignant lesions and the microenvironment in the fallopian tube. With the aim to develop new approaches for early detection and prevention strategies.



Rebekka Duhen Knight Cancer Institute, Oregan Health & Science University

Rebekka Duhen is a Senior Scientist at the Cancer Early Detection Advanced Research (CEDAR) Center, Knight Cancer Institute at OHSU in Portland, Oregon. Rebekka grew up in Germany, and received her PhD in Immunology from the University of Bern in Switzerland. After her PhD she went on to do a post-doctoral fellowship at the Benarova Research Institute in Seattle, focusing on the role of T cells in multiple sclerosis using both human samples and preclinical animal models. Prior to her current role at CEDAR, Rebekka spent several years at the Earle A Chiles Research Institute (EACRI) at the Providence Cancer Center, working on immunotherapy in head and neck cancer. As a true T cell immunologist, she strives to develop novel assavs to examine the role and function of T cells in human solid tumors. Her work on

tumor infiltrating lymphocytes has been published in high-impact journals and paved the way for a clinical trial. She is now pursuing a new goal of exploiting the immune system for early cancer detection. To accomplish this goal, she is using high-parameter flow cytometry, live-cell imaging and single-cell RNA sequencing approaches.

Rebekka is a curious, enthusiastic and powerful personality, and enjoys teaching and transmitting this passion to the new generation of scientists. Together with her French husband, an assistant member at the EACRI, they have three daughters and enjoy skiing, hiking and kayaking in the Pacific Northwest.

# SPEAKER AND SESSION INFORMATION WEDNESDAY 11 OCTOBER

#### The Great Debate 2:

#### All cancer screening must be reserved for 'high- risk' populations

This scientific debate centres around the proposition that all cancer screening should be exclusively reserved for high-risk populations. The debaters will discuss the benefits and challenges of focusing cancer screening efforts solely on individuals at high risk of developing cancer.



Chair: **David Crosby**Cancer Research UK

Please **click here** to view David Crosby's biography.



**Fiona Gilbert**University of Cambridge

Professor Gilbert, University of Cambridge is an honorary consultant radiologist working in the Cambridge Breast Unit. Her research is focused on technological assessment of new imaging techniques relating to breast cancer and screening. Previously she evaluated digital breast tomosynthesis and computer aided detection in the breast screening programme and is currently assessing impact of Al.

She undertakes research in risk adapted stratified breast screening using abbreviated MRI, tomosynthesis, whole breast ultrasound and contrast enhanced mammography. She is working in multimodal functional imaging with MRI and PET to explore the tumour environment using breast cancer as a model and correlating this with the tumour genetic profile.

Since 2012, Professor Gilbert has been awarded fifteen competitive grants worth over £20M.

She was a member of grant funding panels – NIHR HTA Board, the EME Board and is on a number of advisory panels. She was a previous associate editor of Clinical Radiology.

Professor Gilbert has over 260 peer reviewed publications, five book chapters and numerous conference abstracts. She is a regular speaker at international radiology conferences in Chicago and Vienna and was awarded honorary membership of the Radiological Society of North America in 2019, honorary fellowship of the American College of Radiologists, the Gold Medal from the European Society of Edinburgh in 2021 and fellowship of the Academy of Medical Sciences. She is immediate past President of the European Society of Breast Imaging.



**Hilary Robbins** International Agency for Research on Cancer

Dr Hilary Robbins is an epidemiologist at the International Agency for Research on Cancer (IARC/WHO) in Lyon, France. Dr Robbins' work is focused on risk-tailored approaches to cancer screening, using tools such as risk prediction models and biomarkers. She co-leads the IARC Integrative Epidemiology Team, a group of 12 scientists, trainees, and staff from 12 different

countries, as well as the Lung Cancer Cohort Consortium (LC3). The current work of the LC3 aims to develop and validate a custom panel of protein biomarkers intended for use in lung cancer screening. Dr Robbins also studies biomarkers for early detection of HPV-related cancers.

### A conversation with Antonis Antoniou and Sapna Syngal: Can data revolutionise our approach to early detection?



**Antonis Antoniou** University of Cambridge

Professor Antoniou is a genetic epidemiologist and has made major contributions to the understanding of the genetic basis of common cancers and the development of cancer risk prediction models. Using innovative approaches to analyse data from large population-based and family studies, he has provided reliable estimates of cancer risks for carriers of mutations and BRCA1 and BRCA2 that are used every day in the clinic. His work showed that PALB2 was a high-risk breast cancer gene.

He leads the coordinating centre of the international Consortium of Modifiers of BRCA1/2 and has demonstrated the importance of genetic modifiers of cancer risk for BRCA1 and BRCA2 carriers and that these modifiers

lead to clinically important differences in cancer risk. He led the development of the BOADICEA model, a comprehensive risk prediction model that is used to predict breast and ovarian cancer risks using genetic and non-genetic factors.

BOADICEA is endorsed by clinical guidelines in several countries. His team implemented BOADICEA into the CanRisk (www.canrisk.org) online tool used by clinicians across the world to counsel thousands of patients daily, to guide decisions on screening and surgical and medical prevention of disease. In 2023, he was appointed as director of the Cancer Research UK, Cancer Data Driven (CD3) programme.

CONTENTS AGENDA



Sapna Syngal Dana-Farber Cancer Institute

Dr Sapna Syngal, MD, MPH is the Leader of the Cancer Risk, Prevention, and Early Detection Program in the Dana-Farber/Harvard Cancer Center, Director of Strategic Planning for Prevention and Early Cancer Detection at Dana-Farber Cancer Institute, Director of Research in the Division of Cancer Genetics and Prevention at Dana-Farber Cancer Institute, and Professor of Medicine at Harvard Medical School. She has established an internationally recognised clinical, research and educational program devoted to the genetics, early detection and prevention of cancer.

Dr Syngal's research interests began in the field of inherited gastrointestinal cancers, including Lynch syndrome and inherited pancreatic cancer, where her lab has made seminal contributions to identifying new methods of identifying individuals and families at high risk of cancer and screening for cancers at their earliest stages using novel technologies and biomarkers. A related focus of her work has been to increase access to genetic testing, with a focus on increasing testing and cancer screening among disadvantaged populations. She is the developer of the PREMM models, which are widely used for risk assessment for inherited cancer, the founder of the Lynch Syndrome Center at Dana-Farber Cancer Institute, and the Principal Investigator of the GENERATE study, funded as part of a Stand Up To Cancer and Lustgarten Foundation Pancreatic Cancer Interception Dream Team project.

Dr Syngal has served as part of numerous national and international committees including the US Multi-Society Task Force on Colorectal Cancer, an American Society of Clinical Oncology group that developed the Policy Statement Update on Genetic and Genomic Testing for Cancer Susceptibility and led the development and publication of the American College of Gastroenterology Clinical Guideline for Genetic Testing and Management of Hereditary Gastrointestinal Cancer Syndromes. She was elected to be a member of the Association of American Physicians in 2018 and the American Society of Clinical Investigation in 2009.

She was the recipient of the 2012 Lifetime Achievement Award from the Collaborative Group of Americas on Hereditary Colorectal Cancer. As a culmination of her career, Dr Syngal is now leading efforts across Dana-Farber and the Dana-Farber/Harvard Cancer Center to implement a paradigm shift in cancer care, with a focus on taking care of patients with premalignant conditions with interventions that lead to cancer interception.

### Lightning talks: Risk stratification to inform early detection



Xiaoshuang Feng International Agency for Research on Cancer

I'm Xiaoshuang Feng, I'm now working as a postdoctoral scientist in International Agency for Research on Cancer (IARC/WHO). My research mostly focuses on lung cancer screening and early detection. Based on the Lung cancer cohort consortium (LC3) and Integrative Analysis of Lung Cancer Etiology

and Risk (INTEGRAL) program, I have 1) studied proteomics on lung cancer early detection and prognosis and incorporated biomarkers into models to improve the efficiency of lung cancer screening; 2) evaluated high-risk population eligibility strategies among European and U.S. populations.



Samantha Ip University of Cambridge

Samantha Ip is a Research Associate in Health Data Science at the University of Cambridge, specialising in:

- 1. Predictive modelling for cancer and cardiovascular diseases,
- 2. Investigating the associations between COVID-19 infection/vaccination and cardiovascular diseases, and
- 3. Developing robust translatable methods and practices tailored to the nuances of health data, especially in the context of cancer risk prediction.

Before embarking on her journey in Health Data Science, she earned a PhD in Theoretical Cosmology from the Max-Planck-Institut für Astrophysik and completed her MMath degree at the University of Cambridge.



Suzanne Scott Queen Mary University of London

Suzanne Scott is Professor of Health Psychology & Early Cancer Diagnosis, at Queen Mary University of London, UK. Her research focuses on pathways to diagnosis, the psychology of symptom perception, and help-seeking behaviour, and uses this to

design and evaluate interventions to encourage timely healthcare use, prevention and early diagnosis of cancer. She is behavioural science lead on several international collaborations focussing on early detection of cancer.



**Paul Barber** King's College London

Paul Barber is a Senior Research Fellow at King's College London with interests in the application of machine learning and image processing in cancer research. He is focussed on extracting robust information from small but rich datasets, involving small numbers of patients (10s-100s) each with many measurements from multiple modalities (100s-1000s). Paul worked for several years on problems in fluorescence lifetime microscopy (FLIM) and is the author of the successful software package TRI2 that is used worldwide. He is a fellow of the Royal Microscopical Society (FRMS), member of the Institute of Physics (MPhys) and Chartered Physicist (CPhys) and has co-authored over 80 peer-reviewed research papers.

#### Session 3:

#### Risk stratification to inform early detection

This session will cover the latest developments in identifying, understanding and using at-risk populations in order to inform the development and support the implementation of early detection strategies.



Chair:
Yoryos Lyratzopoulos
University College London

Yoryos Lyratzopoulos is the Foundation Professor of Cancer Epidemiology at University College London, where he leads the ECHO (Epidemiology of Cancer Healthcare & Outcomes) Group. His research aims to contribute to global efforts to control cancer through improved understanding of: a) The risk of underlying cancer in patients who present with new onset symptoms (particularly non-specific symptoms) in primary care; b) Potentially avoidable delays in the diagnosis of symptomatic patients with underlying cancer, and related responsible mechanisms; c) Disparities in cancer diagnosis/detection and treatment, and their origins above/ beyond tumour factors; d) Organisational and international variation in diagnostic routes and treatment pathways.

To April 2023, he has published 226 research papers, >55% of which as first or last author. Having been awarded the Cancer Research UK Future Leaders Prize (2016), he has represented

his cancer epidemiology in the development of NICE's Suspecting Cancer in Primary Care guidelines (2012-2015), a milestone in early diagnosis policymaking. His research has received citations in key international and national policy documents, including: WHO's "Report on cancer" (2020); WHO's Report on the Global Burden of Diagnostic Errors in Primary Care (2016); CRUK's "Early Detection and Diagnosis Roadmap" (2020); CRUK's "Cancer in the UK: Socio-economic Deprivation" (2020); The State of the Nation Report on Cancer in the UK (2018); The Lancet Oncology Commission "The Expanding Role of Primary Care in Cancer Control" (2015); The US Institute of Medicine Report Improving Diagnosis in Health Care (2015); and The UK Government's "Cancer Strategy for England" (2015).



**Sapna Syngal**Dana-Farber Cancer Institute

Please click here to view Sapna Syngal's biography.



**Rosalind Eeles**The Institute of Cancer Research

Prof Eeles is a clinician scientist at The Institute of Cancer Research and Honorary Consultant at The Royal Marsden NHS Trust. She is an internationally recognised expert in genetic predisposition to prostate cancer, for which she was elected as a Fellow of the Academy of Medical Sciences in June 2012.

Her research programme links bench to bedside and involves identification of genetic variants which predispose to prostate cancer and their clinical application to targeted screening and prostate cancer care. She is the Genomics Champion for the Royal College of Radiologists (Clinical Oncology Faculty). She leads a research programme in the genetics of Prostate Cancer, spanning from identification of genetic predisposition to studies in applications to screening and treatment.

She jointly leads the Early Detection and Diagnosis virtual centre at The Royal Marsden Hospital and The Institute of Cancer Research.



**Angela Wood**Health Data Research UK / University of Cambridge

Angela Wood is Professor of Biostatistics and Health Data Science at the Department of Public Health and Primary Care, University of Cambridge. She holds leadership roles for major health data science initiatives, including BHF Data Science Centre Associate Director and Theme Lead for Population Data; co-Lead of the NIHR Cambridge BRC Data Science and Population Health theme; Regional co-Lead for Health Data Research UK Cambridge; Programme Leader in the NIHR Blood and Transplant Research Unit in Donor Health and Behaviour and co-Lead of the Data-Analysis Work-package in BigData@Heart. Her research focuses on the frontiers of big data and epidemiology, underpinned by major population resources and informed by applied questions of major population health. She has developed novel methods and applied them in the analysis of large, complex datasets (e.g., ~67M individuals in CVD-COVID-UK consortium; >3M participants in Emerging Risk Factors

Collaboration, EPIC-CVD and UK Biobank), providing new insights into chronic diseases, mainly cardiovascular disease, as well as COVID-19 and blood donation. With the BHF Data Science Centre and in partnership with NHS Digital, she has helped to establish access to the England-wide Electronic Health Record resource on >55M people and is developing innovative and principled methods for reproducible analysis of the resource. In biostatistics methodology research, she focuses largely on methods for utilising electronic health records to produce unbiased results for medical/epidemiological research, including handling measurement error, using repeated measures of risk factors, missing data problems, multiple imputation, risk prediction and meta-analysis.



**Brian Nicholson** University of Oxford

Brian is an academic GP working in the NHS and an Associate Professor in Primary Care working at the Nuffield Department of Primary Care Health Sciences at the University of Oxford. He works to improve the diagnostic process for patients with suspected cancer. This work focusses on understanding the evaluation of symptoms, appropriate test use, and clinical pathway development. He has focussed on the evaluation of patients with non-specific symptoms and the development of NHS Rapid Diagnostic Centres for patients with non-specific symptoms through the ACE programme and contributing to national guidelines on the use of Faecal Immunochemical Testing in primary care.

His cancer research group conducts research in four main areas: health records data; implementation science; diagnostic reasoning; and clinical trials. As the early detection lead for the CRUK Oxford Cancer Centre he investigates community-based multi-cancer early detection (MCED) testing including SYMPLIFY, the largest prospective MCED study in patients with symptoms of cancer. With colleagues at the Oncology Clinical Trials Office and Primary Care Clinical Trials Unit he is developing a portfolio of Precision Prevention and Early Detection studies as part of the newly formed CRUK Oxford Clinical Trials Unit with industry and academia.



Michael Rosenthal Dana-Farber Cancer Institute and Brigham and Women's Hospital

Dr Rosenthal is an Assistant Professor of Radiology at Harvard Medical School and Brigham and Women's Hospital, a Senior Physician at Dana-Farber Cancer Institute and a Fellow of the Society of Abdominal Radiology. His doctoral work in computer science focused on machine learning techniques for medical image analysis. He completed his MD-PhD work at the University of North Carolina at Chapel Hill, attended a radiology residency at Brigham and Women's Hospital, and completed a fellowship in cancer imaging at Dana-Farber Cancer Institute. He focuses his clinical work on the imaging of gastrointestinal cancers, most notably in pancreatic cancer.

Dr Rosenthal's current research uses artificial intelligence to improve the early detection of pancreatic cancer. His group has developed methods for automatically measuring body and fat mass from routine CT scans and has shown that these markers are early predictors of pancreatic cancer. His team is also developing screening methods to identify individuals at increased risk for pancreatic cancer using artificial intelligence analysis of electronic medical record data.



**Helen White** Patient advocate

Helen discovered she has Lynch syndrome following a diagnosis of endometrial cancer. This cancer diagnosis also led to Helen consenting to join the 100,000 Genomes Project, a pivotal moment that ultimately inspired her to join the Participant Panel at Genomics England and eventually become its Vice Chair for Cancer in 2023. Helen is a passionate advocate for people with gynaecological cancers and genetic cancer susceptibilities. She is a patient

representative for the endometrial cancer (formerly known as) Genomics England Clinical Interpretation Partnership domain, the CRUK-funded CanGene-CanVar programme, and the (former) NCRI Gynaecological Group. Moreover, Helen established and leads Peaches Patient Voices in partnership with Peaches Womb Cancer Trust to promote and facilitate involvement of people affected by womb cancer in research.

#### Panel:

## Why haven't the technological and regulatory advances from our learnings of the pandemic accelerated research in the cancer early detection research field?

This panel discussion will examine why the technological and regulatory advances that enabled accelerated development of innovations, fast-tracked implementation and greater data accessibility during the COVID-19 pandemic haven't improved the landscape for cancer early detection research and the development of cancer diagnostics as was thought possible or even likely a year or more ago.



Chair:

Jon Emery

University of Melbourne

Jon Emery is the Herman Professor of Primary Care Cancer Research at the University of Melbourne, and the Victorian Comprehensive Cancer Centre Primary Care Research and Education Lead. He is a National Health and Medical Research Council (NHMRC) Leadership Fellow, and Director of the Cancer Australia Primary Care Collaborative Cancer Clinical Trials Group (PC4).

Following his medical training at Cambridge and Oxford, he has followed a career in academic primary care, initially at Oxford, where he obtained his DPhil on cancer risk assessment tools, then as a Cancer Research UK Clinician Scientist at Cambridge before taking up a

Chair at the University of Western Australia. He was the Australian leader on the Cancer Research UK international CanTest programme on early cancer diagnosis.

His research has focused on the application of advances in genetic medicine, primary care oncology and the development and evaluation of complex interventions including computer decision support systems, and new cancer diagnostic and screening technologies. He is currently leading several trials related to risk-based cancer screening in primary care.



**Chris Whitty**UK Government

Professor Chris Whitty is Chief Medical Officer (CMO) for England, the UK Government's Chief Medical Adviser and head of the public health profession.

Chris is a practising NHS Consultant Physician at University College London Hospitals (UCLH) and the Hospital for Tropical Diseases, and a visiting professor at Gresham College.

Chris is an epidemiologist and has undertaken research and worked as a doctor in the UK, Africa and Asia. He was Professor of Public and International Health at the London School of Hygiene and Tropical Medicine (LSHTM) before becoming CMO and remains an honorary professor.

Chris was the Chief Scientific Adviser for the Department of Health and Social Care (DHSC)

from January 2016 to August 2021, with overall responsibility for the department's research and development, including being head of the National Institute for Health Research (NIHR), the government's major funder of clinical, public health, social care and translational research.

Chris was the interim Government Chief Scientific Adviser from 2017 to 2018, including during the Novichok poisonings. Before that, he was the Chief Scientific Adviser at the Department for International Development (DFID), which included leading technical work on the West Africa Ebola outbreak and other international emergencies.



**Alexander David Borowsky** UC Davis School of Medicine

Sandy Borowsky is Professor of Pathology and Laboratory Medicine at the University of California, Davis. He is a surgical and molecular pathologist with experience in experimental and clinical cohort science, and directs the Molecular Diagnostics Laboratory at UC Davis Health and the Center for Genomic Pathology. Additionally, he is the UC Davis Comprehensive Cancer Center co-Director of the Women's Cancers Program, the UC-wide Athena Breast Health Program site- PI and WISDOM Study co-PI, Program Leader of the Pathology workgroup, and the Diagnosis and Treatment Clinical Care and Research Team, and a member of the Executive Board, and co-Director of the Pathology team for the I-SPY 2 clinical trials network. He is Co-PI of the California Precision Medicine Consortium.

an All of US Healthcare Provider Organization and corresponding PI of the Nutrition for Precision Health All of US ancillary study, leading the California Partnership for Personalized Nutrition clinical centers. He is co-author of the California Cancer Plan, and a member of the HealthSperien MCED Consortium serving on the Clinical Utility task force. His laboratory focuses on experimental pathology including interpretation of animla models, cancer phenotypes, immunology, and functional imaging technology. Translational aspects include new clinical assay development and interpretation, radiologic-pathologic image registration, comparative analysis, immunohistochemistry, and molecular analyses.



Lisa Lacasse American Cancer Society Cancer Action Network

Lisa Lacasse is president of the American Cancer Society Cancer Action Network (ACS CAN), the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society (ACS). She leads ACS CAN's nationwide public policy advocacy agenda and oversees a team in Washington, DC, that empowers volunteers across the country to influence evidence-based policy change that impacts the cancer burden. Ms Lacasse is responsible for leveraging the organisation's unique power as the largest cancer patient advocacy organisation, with a presence in all 50 states, to achieve widespread impact for every person touched by cancer in every community, driving organisational strategy and overseeing all campaigns and operations.

Ms Lacasse also serves on the board for the Campaign for Tobacco Free Kids. Before joining ACS CAN, she was the chief financial officer at the National Institutes of Health (NIH) Clinical Research Center, Ms. Lacasse spent several years in senior management at the University of Maryland Medical System and began her career in the office of the Governor of the State of Maine. She received a Master of Business Administration degree from the Wharton School at the University of Pennsylvania and a Bachelor of Arts degree from the University of Vermont. Ms Lacasse shares her thoughts on patient advocacy, public policy, and ACS CAN's role in the fight against cancer on Twitter at @LLacasseACSCAN and on LinkedIn.

#### Keynote: Integration of imaging and biomarkers for the early detection of cancer



**Edward Patz** Duke University School of Medicine and Grid Therapeutics

Edward Patz, Jr, MD is the James and Alice Chen Distinguished Professor of Radiology and Professor in Pharmacology and Cancer Biology at Duke University. He is a clinician-scientist, with over 200 publications, and has participated in numerous clinical trials including the National Lung Cancer Screening Trial. He is the principal

investigator of a basic science laboratory that explores clonal evolution of tumours, biomarkers for early detection, and the role of inflammation in cancer. He is the 2022 recipient of the IASLC lifetime achievement Joseph W. Cullen Prevention/Early Detection Award.

#### Panel:

How can we integrate information coming from traditional imaging with molecular biomarkers and clinical information to aid the early detection of cancer?

This scientific panel discussion will explore strategies for effectively integrating information from traditional imaging techniques, molecular biomarkers, and clinical data to enhance early cancer detection.



Chair: Cristian Tomasetti City of Hope

By combining mathematical modelling, statistical analysis, and machine learning, with experimental, epidemiological, and DNA sequencing data, Dr Tomasetti has provided the first quantitative evidence for the large role in cancer causation played by the normal, ie endogenous, accumulation of somatic mutations in the cells of the human body.

As an applied mathematician, he currently leads the effort to develop classification algorithms for the early detection of cancer via a simple blood test.

His work is recognised internationally for his paradigm-shift contributions to the current understanding of cancer etiology and tumour evolution. He has published more than 40 papers, with several leading and corresponding author papers in Science, Nature, and the Proceedings of the National Academies of Sciences. Altmetric, a data science service that tracks where published research is mentioned online ranked three of his papers — all published in the journal Science — #4, #15, and #22 for the attention they received among any research paper published in any scientific field for the years 2015, 2017, and 2018, respectively.

Dr Tomasetti holds a PhD in Applied Mathematics from the University of Maryland, College Park (Dec. 2010).

Before joining City of Hope and TGen, he was an Associate Professor of Oncology and Biostatistics at Johns Hopkins University with appointments in the Division of Biostatistics and Bioinformatics, in both the Department of Oncology (Sidney Kimmel Comprehensive Cancer Center) and the Department of Biostatistics (Bloomberg School of Public Health). After his PhD, he was a Ruth L. Kirschstein National Research Service Award Postdoctoral Fellow in the Department of Biostatistics of the Harvard School of Public Health and in the Department of Biostatistics and Computational Biology of the Dana-Farber Cancer Institute (Jan 2011 – Jun 2013), after which he became a faculty member at Hopkins.



#### **Edward Patz** Duke University School of Medicine and Grid Therapeutics

Please click here to view Edward's biography.



Caroline Dive CRUK Cancer Biomarker Centre, University of Manchester

Upon completing her PhD studies, Professor Caroline Dive moved to Aston University's School of Pharmaceutical Sciences in Birmingham where she established her own group studying mechanisms of drug induced tumour cell death, before moving to The University of Manchester to continue this research. Caroline was awarded a Lister Institute of Preventative Medicine Research Fellowship before joining the Cancer Research UK Manchester Institute (CRUK MI) in 2003. Currently, she is Interim Director of the Institute and Director of the CRUK Cancer Biomarker Centre, with research spanning tumour biology, preclinical pharmacology, biomarker discovery, biomarker assay validation and clinical qualification to regulatory standards, bioinformatics, biostatistics and most recently, digital clinical trials.

Caroline was awarded the Pasteur-Weizmann/ Servier International Prize in 2012 for her Biomarker Research, the AstraZeneca Prize for Women in Pharmacology in 2016 and was presented with the 2019 Heine H. Hansen Lectureship Award by the International Association for the Study of Lung Cancer

(IASLC). She is an elected Fellow of the Academy of Medical Sciences (2015), Fellow of the British Pharmacological Society (2012) and Fellow of the European Academy of Cancer Sciences (2011). In 2017, Caroline was awarded Commander of the Order of the British Empire (CBE) for her services to cancer research. Most recently, she became an elected member of EMBO (2020), received the first inaugural Johann Anton Merck Award in recognition for exceptional contributions to the field of preclinical oncology (2020), and was the recipient of the Mary J. Matthews Pathology/ Translational Distinguished Service Award by IASLC (2021). Caroline was the President of the European Association for Cancer Research (2020 - 2022).

CONTENTS AGENDA



#### **Shonit Punwani** University College London

Shonit Punwani is Professor of Magnetic Resonance and Cancer Imaging and Consultant Radiologist at UCLH. His medical training, undertaken at UCL, was supplemented with a PhD in MRI Physics. He completed post-graduate training in Medicine at Northwick Park, before training as a radiologist at UCLH. He was awarded a Walport NIHR Clinical Lectureship, before being appointed as a Senior Lecturer at UCL and Consultant Radiologist at UCLH. In 2023, Professor Punwani received an NIHR Professorship Award.

He leads the 3T MRI research facilities that provide the infrastructure for imaging trials at UCLH. He is the research and development lead for radiology at UCLH, responsible for the provision of imaging services for clinical trials at UCLH. He is Director of Clinical Imaging at the UCLH Biomedical Research Centre (BRC) and also directs the BRC Medical Imaging Trials Unit (the first unit of its kind dedicated to the support of clinical trials involving new/novel imaging methods). He co-chairs the UCLH Cancer Collaborative Diagnostic Expert Reference Group with a remit to facilitate the spread of clinically proven imaging technologies within the region.

He has a specialist clinical and research interest in the application and development of local and whole-body quantitative and functional MRI methods for imaging prostate cancer.

## SPEAKER AND SESSION INFORMATION THURSDAY 12 OCTOBER

#### **Networking session**

In this networking session, participants will engage in small group discussions on a variety of topics. The session aims to foster meaningful conversations and promote collaborations among experts and stakeholders in the field of cancer early detection.

### Session 4: Multicancer early detection – beyond ctDNA

This session will cover the wide array of multicancer early detection tests in development beyond the tests based on cell-free tumour DNA in the blood.



Chair:

Matthew Thompson

Google LLC

Dr Thompson is a family physician and clinical researcher whose career over the past three decades has spanned the UK and the USA. In the UK he worked as a GP and academic researcher at the University of Oxford where his research was focused on improving diagnostic precision across a number of health care conditions in primary care, including children and adults with serious infections.

His research emphasis on diagnostics continued over the last 10 years at the University of Washington (UW) and has expanded to examine use of new diagnostic tests and technologies in ambulatory care settings or by patients themselves and closing gaps between technology developers and the primary care clinical and research communities. Recent research at the UW has used AI to extract symptom signatures of cancer from routine electronic health record data to identify individuals with possible cancer. He joined Google in 2022 where his research spans a number of technologies including smartphone and wearable sensors and AI, across a range of health conditions globally.



Chair: Claude Chelala Queen Mary University of London

Claude Chelala is Prof of Bioinformatics at Barts Cancer Institute. She is co-Lead for the Barts Life Sciences Precision Medicine programme aiming to unlock the longitudinal Electronic Health Record phenotype from multi-dimensional data. She leads the Health Informatics and Bioinformatics for two national biobanks (BCNTB and PCRFTB) creating an ecosystem with interlinking clinical, in vivo, in vitro and in silico resources to provide the

analytical means to harness clinical data and molecular findings. Her research in breast cancer focuses on using multimodal data to explore ancestry-associated differences as well as the clinical utility of field cancerisation and imaging free-text reports in predicting cancer recurrence. Her research in pancreatic cancer uses sequential, non-invasive liquid biopsies for tracking tumour dynamics.



Søren Brunak Novo Nordisk Foundation Center for Protein Research, University of Copenhagen

Dr Brunak is a professor and Research Director at the Novo Nordisk Foundation Center for Protein Research at the University of Copenhagen. He is a leading expert in bioinformatics, disease systems biology, and medical informatics through invention and introduction of new computational strategies for analysis and integration of biological and clinical data. Together with Professor Pierre Baldi he published the first textbook on bioinformatics and machine learning in 1998 (MIT Press).

In his research, the use of the patient trajectory concept is a major theme that exploits EHR and registry information on the patient-past in terms of prior diseases, comorbidities, prescriptions, lab values, omics data, wearable data, socio-economic data among other types of data. Dr Brunak's research combines scientific disciplines in novel ways, including computer technology (supercomputer

hardware, data protection techniques and software including machine learning techniques), biological, biomedical and biotechnological insights.

Dr Brunak has been chairing the Research and Infrastructure committee of the Danish National Genome Center, a state agency that manages a single, national repository where all whole genome sequencing data from the Danish healthcare sector by law is mandated to be kept for subsequent use within treatment and research. This repository can, when permissions are given, be linked to Danish EHR and registry data holding deep phenotyping information. Dr Brunak has been a member of the Royal Swedish Academy of Sciences since 2016, the Royal Danish Academy of Sciences and Letters since 2004 and the European Molecular Biology Organisation since 2009.



**Paul Brennan** University of Edinburgh / NHS Lothian

Paul Brennan is Reader, Honorary Consultant Neurosurgeon and Clinical Director of Neurosurgery at the University of Edinburgh and NHS Lothian. Paul's research spans the laboratory and the clinic, combining molecular, epidemiology and clinical investigation. He applies this strategy to improving diagnosis, treatment and outcomes for people with brain tumours. He is part of the CRUK Adult Brain Tumour Centre of Excellence, and the Tessa Jowell Brain Tumour Centre of Excellence.

The experience of many patients with a new brain tumour diagnosis is of weeks or months of diagnostic delay. Paul's research has described the pathways of adult brain tumour diagnosis in the UK, and used big data approaches to examine whether identifying symptom combinations can improve diagnostic accuracy in primary care. His team has demonstrated that the verbal fluency

(animal naming) test can enhance sensitivity of symptom-based diagnostic strategies. Clinical diagnostic strategies nevertheless fall short in terms of diagnostic efficiency and Paul has led a suite of clinical studies investigating application of a novel blood biomarker test in triage of symptomatic patients to prioritise them for gold-standard investigations, accelerating cancer diagnosis.

Collaborating over many years with Professor Matt Baker who developed the infrared spectroscopy-based serum biomarker test, (DxCover), Paul now leads a UK/European device registration study of test performance in brain cancer, ahead of its adoption into routine care. The platform spectroscopy technology has also been applied to diagnosis of other cancer types, and clinical efficacy assessed by Paul and his research team in the Edinburgh INFERENCE study.



**Garth Funston** Wolfson Institute of Population Health, Queen Mary University of London

Garth Funston is a GP and Clinical Senior Lecturer in Primary Care Cancer Research at the Wolfson Institute of Population Health. His research focuses on diagnostic test evaluation and the development and validation of prediction models using large healthcare datasets, with the aim of improving cancer detection in primary care and optimising diagnostic pathways.

Following Medical training at St Andrews and Cambridge, Garth undertook clinical academic training in Manchester. He completed a Cancer Research UK funded PhD at the

University of Cambridge, which focussed on the detection of ovarian cancer in primary care. He was lead author on the Royal College of General Practitioners Paper of the Year for Clinical Research (2021) and was awarded the World Ovarian Cancer Coalition Transformational Research Prize for his work on ovarian cancer detection.

Garth currently leads a portfolio of charity and government funded studies evaluating diagnostic tests and prediction models for a range of cancers including ovarian, prostate and gastro-intestinal cancer.



Francesco Gatto
Elypta

Francesco founded Elypta with his Ph.D. advisor Jens Nielsen in 2017 after spearheading the early entrepreneurial activities as interim CEO since 2015. As Chief Scientific Officer, he oversees the technical plan and leads all scientific projects at Elypta. He acts as deputy CEO. Francesco is also Visiting Researcher at Karolinska Institute, Sweden in Jonas Bergh lab.

Francesco obtained a B.Sc. and M.Sc. in Chemical Engineering from the University of Padova, Italy in 2011 and a Ph.D. in Systems Biology at Chalmers University of Technology, Sweden in 2015. In 2016, he was Visiting Scholar at the University of California, San Diego in Bernhard Palsson lab.

His research resulted in 4 patent families paving the way to the foundation of Elypta. He has authored 30 scientific papers on cancer research. He lectured in international advanced

courses in systems biology, co-organised 2 national conferences, contributed to the National Encyclopedia of Italy, and was an invited speaker in several congresses and symposia – including for the EU Joint Research Centre.

Francesco is a member of the American Association of Cancer Research, the European Association of Cancer Research, the European Association of Urology, the American Society of Clinical Oncology and the Aspen Institute (Italian Talents Abroad).

Francesco was enlisted in the MIT Technology Review 35 Under 35 (Europe) in 2018 and in the GEN A-List Top 10 Under 40 in 2019. He was the 2019 recipient for the Karin Markides Prize and for the 2019 National SKAPA Innovation Prize in Memory of A. Nobel.

### Lightning talks: Multicancer early detection – beyond ctDNA



**Jose Montoya Mira**Oregon Health and Science University

Jose Montoya Mira serves as a Research Engineer III at the Cancer Early Detection Advanced Research Center (CEDAR) at Oregon Health and Science University. With an academic background in Biomedical Engineering, he earned his Master's degree and pursued a Ph.D. focused on developing innovative biotechnological solutions for a myriad of applications. Jose has a track record of patenting novel technologies and publishing extensively, particularly in the fields of cancer

diagnostics, detection, treatment, and single-cell sequencing platform development. His current research is primarily centered on creating a cost-effective and highly accurate protease activity nanosensor for early cancer detection from a low volume of blood. This technology offers high-throughput capabilities and low cost, increasing the accessibility of early cancer detection testing, and allowing for the long-term monitoring of high-risk patients.



Taylor Cavazos Fxai Bio

Dr. Taylor Cavazos is a Staff Scientist in Computational Biology at Exai Bio, a liquid biopsy start-up focused on early cancer detection using small non-coding RNAs. Prior to joining Exai Bio, Dr. Cavazos earned her Ph.D. in Biological and Medical Informatics from the University of California, San Francisco and her B.Sc. in Bioengineering from the University of California, San Diego.



**Evelyn Fitzsimons** University College London

Evelyn Fitzsimons is a third year PhD student at the University College London Cancer Institute, supervised by Dr. Kevin Litchfield and Dr. James Reading. Her project focuses on harnessing the immune system for early cancer detection, and she is the leading laboratory scientist for the

Nodule Immunophenotyping Biomarker for Lung Cancer Early Diagnosis Study (NIMBLE), which recruits patients with indeterminate lung nodules and aims to develop an immunophenotyping signature of early lung cancer.



Franco Faucher Stanford University

Franco is currently in his fifth year of his PhD. studies in Chemical Biology at Stanford University in Professor Matthew Bogyo's lab. He is looking to graduate within the next year and start a career in industry. His work has focused on creating contrast agents for real-time fluorescence imaging for early

cancer detection in surgical and diagnostic applications. In this field, he has developed novel peptide based imaging agents that are published and patented. He looks forward to meeting and discussing contrast agents with you!

#### Panel:

### Introducing Patient and Public Involvement in your Early Detection Research – Starting the conversation

Involving patients and the public in the design of your early detection research is important and valuable – but knowing how you can go about it can be daunting. During this interactive panel session, come and talk to our patient and public advocates about integrating patient and public involvement in the work that you're doing, and hear how they can support you and be actively involved in the decisions made about the research.

We are excited to offer this opportunity to talk with experienced patient and public advocates from the UK and US who are passionate and committed to early detection research. The session will be a chance to ask your questions, pick up some free advice and top tips, and think about how you can best include valuable patient and public involvement in your research!



Chair: **Fiona Walter**Queen Mary University of London

Please click here to view Fiona Walter's biography.



Chair:

Jamil Rivers

The Chrysalis Initiative

Jamil Rivers is a leading advocate for people of colour (POC) with cancer. As a pioneering activist for equitable care in cancer — and through the organisation she founded — she has helped thousands of patients overcome disparities in cancer care and aided cancer centres in identifying race-based gaps in services.

As CEO of The Chrysalis Initiative, Jamil leads a team of experienced cancer coaches delivering enhanced navigation to patients and equity specialists helping healthcare providers to erase race-based shortcomings in care that result from conscious and unconscious bias.

A finance graduate of Rutgers University, with an MBA from Arcadia University and finance master's from Southampton University,

Jamil has additional certifications in such areas as leadership, IT, and compliance and ethics, including through the Wharton School, U.C. Berkely, and Villanova University.

Jamil has affiliations, trainings and advocacy activities with Susan G. Komen; Living Beyond Breast Cancer; and her initiative's partners in the pharma/biomedical industries. She has spoken at many national conferences. Good Morning America and People magazine have featured Jamil's own personal story of cancer survival and the success of her nonprofit organisation in supporting justice in cancer care.



**Richard Stephens** Patient advocate

Richard has been a patient advocate for over two decades and has sat on strategic groups in the UK and in Europe, as well as working on individual research studies as a patient partner. He was the patient co-author of the 2015 Cancer Strategy for England, and an advisor to the DHSC during the early stages of the COVID-19 pandemic. He is the Chair of the NCRI Advocates Forum and the former Chair of the Stakeholder Forum at BBMRI-ERIC (the European biobanking collaboration), and works with patient groups and advocates in Europe, Africa, Canada and the USA, and with Genomics England and industry, from start-ups to Big Pharma.

Richard has been working with Cancer Research UK since the charity was founded, has served on almost all its funding

committees, and has sat on the Cancer Grand Challenge Advocacy Advisory Panel and on a CGC project. He helped found the AllTrials campaign and useMYdata movement (which he currently also Chairs), and he is the founding co-Editor-in-Chief of the Journal of Research Involvement and Engagement.

Richard has so far survived two cancers and a heart emergency. He has continued co-morbidities and late effects. He has participated in four interventional studies and nine others, all spread over the past 25 years. His professional life has included careers in education, journalism and local government, and as a patient advocate he has been involved with over 50 research studies and programmes. Richard's ambition is to spend more time reading books on beaches.



**Angela King** Independent Patient advocate

An active patient advocate for over 30 years, including 20 years of Patient and Public Involvement (PPI) in health research, Angela has personal experience of long-term illnesses and cancer-related end of life caring.

Starting in the voluntary sector as helpline volunteer, Trustee and then CEO, her focus shifted to Patient and Public Involvement (PPI) in health research.

As well as serving on several advisory and commissioning boards/panels, she is involved in individual research studies (mostly cancer related), contributes to articles and papers, delivers workshops and lectures on PPI and carries out PPI advisory work.

A member of Independent Cancer Patients' Voice following attendance at its 2022 VOICE course, she also regularly works with Cancer Research UK.

#### Panel:

#### The health economics of early detection

In this panel discussion, experts will delve into the practicality and cost-effectiveness of early detection strategies. The discussion aims to shed light on the construction of health economic models for early detection and what the requirements are for an early detection test in order for it to be economically viable.



Chair: **Larry Kessler**University of Washington

Dr Larry Kessler serves as a Professor in the Department of Health Systems and Population Health, School of Public Health, University of Washington. He has over 40 years of experience in health services research. He previously served as director of the Office of Surveillance and Biometrics and Office of Science and Engineering Laboratories at the US FDA Center for Devices and Radiological Health. His work in cancer surveillance leading the Applied Research Branch (ARB) at NCI from 1984–1995 substantially changed the way the US performs cancer surveillance, with the Cancer supplements to the National Health Interview Survey, SEER-Medicare data system, Breast Cancer Screening Consortium, and the Breast Cancer Surveillance Consortium

His extensive research record in health services research includes more than 180 peer reviewed publications. As chair of the Department of Health Services (UW) from 2009-2015, he directed the teaching program of a department that included eight separate teaching programs at the master's and doctoral level. His recent work has concentrated on comparative effectiveness studies, developing solutions to improve the quality of life of patients with end stage kidney disease, and studies on the validity and reliability of cancer screening questionnaires, and on cost and cost-effectiveness of treatments for cystic fibrosis. He has a long-standing interest in cancer diagnostics and serves as Deputy Chair of the Multi-Cancer Early Detection Consortium.



**Bethany Shinkins** University of Warwick

Bethany has extensive experience in the evaluation of diagnostic and screening tests. As a member of Warwick Screening, she works on a wide portfolio of applied test evaluation projects spanning across many disease areas, including RCTs, comparative diagnostic accuracy studies, analyses of routinely collected data, and economic modelling studies.

She undertakes systematic reviews and decision analytic modelling on the clinical and costeffectiveness of medical tests for the NIHR Evidence Synthesis Programme on behalf of a range of policy makers, including the National Institute for Health and Care Excellence (NICE). She is also a member of the UK National Screening Committee.



Natalia Kunst University of York

Dr. Natalia Kunst is a Senior Research Fellow (Associate Professor) at the Centre for Health Economics at the University of York, with additional affiliations at the Yale University Schools of Public Health and Medicine and Harvard Medical School & Harvard Pilgrim

Health Care Institute. Dr. Kunst is a decision sciences and health economics researcher with interests in uncertainty and evidence in decision-analytic modelling and health economic evaluations, value of information analysis, and health disparities.



**Stuart Wright** University of Manchester

Dr Wright is a Research Fellow in Health Economics, based in the Manchester Centre for Health Economics, The University of Manchester. His primary research interests are in the evaluation of complex interventions while taking account of imperfect implementation and uptake. These issues are particularly pertinent for cancer screening programmes which rely on good uptake in populations and effective health service delivery to identify cancers at an earlier stage. To further his research Dr Wright was recently awarded a

Wellcome Trust Early Career Award for a project titled "Providing economic evidence to inform and improve the implementation of cancer screening programmes". This project will focus on alternative approaches to HPV sampling for cervical cancer screening and breast cancer risk-prediction in younger women. Dr Wright is also a member of the Adult Reference Group of the UK National Screening Committee, providing advice on health economics and modelling.

#### Keynote:

#### Stem Cell Pathways, Aging and Pre-Cancer Evolution



Catriona Jamieson Stanford Stem Cell Institute

Dr. Catriona Jamieson is a leading physician-scientist who discovered missplicing, RNA hyper-editing, and splice isoform switching as mechanisms governing human cancer stem cell maintenance in selective niches. This pioneering cancer stem cell research has transformed therapies, including JAK2 and sonic hedgehog-inhibitor trials for myeloproliferative neoplasms and leukemia stem cell targeting. Her research and efforts lead to the 2019 FDA approval of fedratinib for the treatment of adult patients with intermediate-2 or high-risk primary or secondary Myelofibrosis. She sent the first bioreactors with cancer organoids that detect activation of cancer stem cell properties in real-time into space on April 8, 2022, as part of the Integrated Space Stem Cell Orbital Research (ISSCOR) Program. The purpose is to identify biomarkers for early detection, and interventional leads and lay the

groundwork for future cancer stem cell research in space. She is a Professor of Medicine, Chief of the Division of Regenerative Medicine, the Koman Family Presidential Endowed Chair in Cancer Research, and the Director of the Sanford Stem Cell Institute at the University of California San Diego. Dr. Jaimeson received the 2017 MPN Hero's Award, the Moores Cancer Center Rell Sunn Award in 2020 (past awardees include Roger Tsien, Kary Mullis, Tony Hunter, Brian Druker, Carl June, J. Craig Venter), and the Top Doctor for the 10th consecutive year by Castle Connolly in 2021. Most recently, her visionary leadership resulted in the single largest gift in the history of UC San Diego, for \$150 million from T. Denny Sanford, resulting in the creation of the Sanford Stem Cell Institute.

### DON LISTWIN AWARD

#### For Outstanding Contributions to Cancer Early Detection



#### **ABOUT THE AWARD**

The Don Listwin Award for Outstanding Contributions to Cancer Early Detection recognises a sustained contribution to, or singular achievement in, the cancer early detection field. The award is named in honor of Don Listwin, founder and chairman of Canary Foundation.

#### 2023 Recipient: Peter Sasieni

Peter Sasieni is Professor of Cancer Epidemiology in the Wolfson Institute of Population Health, Queen Mary University of London. He co-leads the Centre for Cancer Screening, Prevention and Early Diagnosis and is Director of the Cancer Research UK Prevention Trials Unit at QMUL (CPTU).



Prof Sasieni read mathematics at Cambridge University and has a PhD in biostatistics from the University of Washington. He did his post-doctoral training at the Imperial Cancer Research Fund (later Cancer Research UK) in Jack Cuzick's "lab". The group moved to the Wolfson Institute of Preventive Medicine at QMUL where Sasieni became Professor of Cancer Epidemiology & Biostatistics. He joined King's College London as Academic Director of King's Clinical Trials Unit and Professor of Cancer Prevention in 2017 before returning to Queen Mary in 2023. Sasieni is a lead (or joint lead) investigator on several large grants including a CRUK programme in cancer screening and statistics, the NHS-Galleri trial, and the CRUK-NIHR funded BEST4 trial of screening with "a sponge on a string" to reduce mortality from oesophageal cancer. He chaired CRUK's Early Diagnosis Advisory Group, and NCRI's Screening, Prevention and Early Diagnosis Group, and was Vice Director of the NIHR Policy Research Unit on Cancer, Awareness, Screening and Early Diagnosis.

# AN INTERNATIONAL COLLABORATION

Cancer Research UK, the largest independent funder of cancer research globally, and the Knight Cancer Institute at Oregon Health & Science University, a leader in precision cancer medicine, formed an international collaboration in 2016 to accelerate research in the early detection of cancer. In 2018 they welcomed the Canary Center at Stanford to the partnership. The Canary Center was founded in 2009 as the first research center in the world entirely dedicated to cancer early detection.

The goal of this unique trans-Atlantic agreement is to find lethal cancers as they're forming so they can be treated more effectively. Survival increases significantly when the disease is treated at an early stage.

The collaboration also seeks to accelerate progress by breaking down barriers for scientists, including:

- A lack of cohorts of sufficient size and a shortage of clinical samples available for research
- Development and deployment of new technologies
- Lack of understanding of the biology of early cancer and technologies to detect its features

# FUNDING OPPORTUNITIES IN EARLY DETECTION RESEARCH

Cancer Research UK is happy to support international collaborations in early detection research through our Early Detection Research funding committee.

We accept applications from UK-based lead researchers for Programme, Project and Primer Awards, which can include joint lead applicants and coinvestigators from outside of the UK. We can support running expenses and named research staff based at international institutions through these awards.

Please click here for more information.

For more information on these awards, please contact early.detection@cancer.org.uk

### ORGANISING INSTITUTIONS

#### **ABOUT CANCER RESEARCH UK**

Cancer Research UK is the world's leading cancer charity, dedicated to saving and improving lives with research, influence and information. Their vision is for a world where everybody lives longer, better lives, free from the fear of cancer.

Over the past 120 years, they have made discoveries about cancer that have saved countless lives and benefit millions each year, from discovering the link between tobacco and cancer to contributing to the development of the HPV vaccine.

They support research into all aspects of cancer through the work of over 4,000 scientists, doctors and nurses, based in CRUK Centres and Institutes across the UK.

#### **ABOUT THE CANARY CENTER** AT STANFORD

The Canary Center at Stanford is the first research center in the world entirely dedicated to cancer early detection.

It was founded in 2009 through a unique alliance between the Canary Foundation, the Department of Radiology at the Stanford University School of Medicine, and the Stanford Cancer Institute (a National Cancer Institute-designated Comprehensive Cancer Center).

Canary Center's mission is to discover and implement minimally invasive diagnostic and imaging strategies for the detection and localization of aggressive cancers at early curable stages.

Its multidisciplinary research teams integrate the development of in vitro diagnostic tests and in vivo molecular imaging approaches to identify and characterize early cancers.

#### **ABOUT THE** KNIGHT CANCER **INSTITUTE**

**The Knight Cancer Institute at Oregon Health** & Science University is a pioneer in the field of precision cancer medicine.

The institute's director. Brian Druker, M.D., helped prove it was possible to shut down just the cells that enable cancer to grow. This breakthrough has made once-fatal forms of the disease manageable and transformed how cancer is treated.

The OHSU Knight Cancer Institute is the only National Cancer Institute-designated Cancer Center between Sacramento and Seattle - an honor earned only by the nation's top cancer centers. It is headquarters for one of the National Cancer Institute's largest research collaboratives, SWOG, in addition to offering the latest treatments and technologies as well as hundreds of research studies and clinical trials.

### THANK YOU TO OUR SPONSORS

# GRAIL

**Official Platinum Sponsor** of the Early Detection of **Cancer Conference** 

GRAIL is a healthcare company whose mission is to detect cancer early, when it can be cured.

GRAIL is focused on alleviating the global burden of cancer by using the power of next-generation sequencing, population-scale clinical studies, and state-of-the-art machine learning, software and automation to detect and identify multiple deadly cancer types in earlier stages.

GRAIL's targeted methylation-based platform can support the continuum of care for screening and precision oncology, including multi-cancer early detection in symptomatic patients, risk stratification, minimal residual disease detection, biomarker subtyping, treatment and recurrence monitoring.

GRAIL is headquartered in Menlo Park, California, with locations in Washington, D.C., North Carolina and London, UK. GRAIL, LLC, is a subsidiary of Illumina, Inc. (NASDAQ:ILMN) currently held separate from Illumina Inc. under the terms of the Interim Measures Order of the European Commission.

#### **About Galleri®**

Galleri is the first-of-its-kind multi-cancer early detection (MCED) test that has demonstrated the ability to detect a shared cancer signal across more than 50 types of cancer through a routine blood sample. The Galleri test can improve the opportunity for asymptomatic early detection by screening for multiple cancers, most of which lack recommended screening tests.

Galleri has demonstrated a low false positive rate and high positive predictive value (the proportion of people with a positive screening

result who are diagnosed with cancer) in asymptomatic people at an elevated risk for cancer.1,2

The Galleri test uses next-generation sequencing and machine-learning algorithms to isolate cell-free DNA and analyse methylation patterns to detect if a cancer signal is present. If a cancer signal is detected, the Galleri test predicts the cancer signal origin, or the tissue or organ where the cancer signal originated, to help guide diagnostic evaluation.

#### About GRAIL's MCED clinical development programme

The Galleri clinical development programme consists of studies that collectively include more than 335,000 participants – and what is believed to be the largest linked datasets of genomic and clinical data in the cancer field. GRAIL's programme includes the foundational CCGA development and validation study, the interventional PATHFINDER and PATHFINDER 2 studies, the NHS-Galleri randomised, controlled trial, the STRIVE and SUMMIT observational studies, the SYMPLIFY study in symptomatic populations, and the REFLECTION real-world registry.

The largest of these, the NHS-Galleri trial, has enrolled 140,000 participants. The NHS-Galleri trial is a prospective, randomised, controlled trial to assess the performance and clinical utility of an MCED test for population screening in the UK when added to standard of care.

The trial is designed to establish if screening with the Galleri test reduces the incidence of late-stage cancer when used in an asymptomatic population in combination with existing NHS cancer screening programmes.

SYMPLIFY is the first large-scale evaluation of an MCED test in individuals who presented to primary care and were referred for diagnostic follow-up for suspicion of cancer. Recent clinical data presented at the 2023 ASCO Annual Meeting and subsequently published in the Lancet Oncology showed strong performance of GRAIL's MCED methylation-based platform in the symptomatic population of more than 6,000 patients in England and Wales. It demonstrated the feasibility of using an MCED test to assist clinicians with decisions around the route of referral from primary care.

For more information and important safety information, visit **GRAIL.com**.

CONTENTS AGENDA

<sup>&</sup>lt;sup>1</sup> Klein EA, et al. Clinical validation of a targeted methylation-based multi-cancer early detection test using an independent validation set. Ann Oncol. 2021;32(9):1167- 1177. doi: 10.1016/j. annonc.2021.05.806.

<sup>&</sup>lt;sup>2</sup> Schrag D, et al. PATHFINDER: a prospective study of a multi-cancer early detection blood test. Presentation at European Society of Medical Oncology (ESMO) Congress, 9-13 September 2022; Paris, France.

<sup>&</sup>lt;sup>3</sup> Neal RD, et al. Cell-free DNA-based multi-cancer early detection test in an asymptomatic screening population (NHS-Galleri): design of a pragmatic, prospective randomised controlled trial. Cancers. 2022; 14(19):4818. doi: 10.3390/cancers14194818

<sup>&</sup>lt;sup>4</sup> Nicholson BD, et al. Multi-cancer early detection test in symptomatic patients referred for cancer investigation in England and Wales (SYMPLIFY): a large-scale, observational cohort study. Lancet Oncol. 2023;24(7):733-743. doi: 10.1016/S1470-2045(23)00277-2.



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We are a biopharmaceutical company that is driven by science, united by science, and every day, we push the boundaries of science to deliver life-changing medicines.

In Oncology, we have a bold ambition to provide cures for cancer in every form. We are following the science to understand cancer and all its complexities to discover, develop and deliver life-changing treatments and increase the potential to save the lives of people around the world.

Our Oncology strategy is built with one goal in mind – to push the boundaries of science to change the practice of medicine and transform the lives of patients living with cancer. Our broad pipeline of next-generation medicines, together with our focus on excellence in execution, are aimed at expanding treatment options and improving outcomes for patients with solid tumours and haematological cancers.



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PacBio is a premier life science technology company that is designing, developing, and manufacturing advanced sequencing solutions to help scientists and clinical researchers resolve genetically complex problems. PacBio products and technology under development stem from two highly differentiated core technologies focused on accuracy, quality and completeness which include our existing HiFi long read sequencing and our emerging SBB® short read sequencing technologies. PacBio products address solutions across a broad set of applications including human germline sequencing, plant and animal sciences, infectious disease and microbiology, oncology, and other emerging applications. In cancer research and oncology, PacBio HiFi long-read technology provides a more complete view of the cancer genome and transcriptome, enabling discovery of novel variants in all variant classes including structural variants, isoforms, and fusions, while our emerging SBB® short read sequencing technology enables highly sensitive detection of ctDNA with reduced sequencing depth in liquid biopsy applications.



#### Official Trainee Dinner Sponsor

Natera<sup>™</sup> is a global leader in cell-free DNA testing, dedicated to oncology, women's health, and organ health. We aim to make personalized genetic testing and diagnostics part of the standard of care to protect health, and enable earlier detection and more targeted interventions that help lead to longer, healthier lives. Natera's tests are validated by more than 150 peer-reviewed publications that demonstrate high accuracy. Based on its deep expertise in cfDNA analysis, Natera is developing blood tests for both elevated risk multi-cancer early detection (MCED) detection and average risk colorectal (CRC) cancer detection. These assays analyze the methylation and mutation status in regions of cfDNA associated with cancer.

### biomodal

#### About biomodal

biomodal is an omics-based life sciences technology and analytics company delivering products that bring the dynamism of our ever-changing biology into focus. Our duet multiomics solution enables more epigenetic information from a single, low input DNA library without complex, resource intensive bioinformatics or harsh chemical treatment. Our single-base-resolution, phased sequencing approach unlocks the combinatorial power of genetic and epigenetic information in one workflow, elucidating greater biological insight within the fields of cancer, neurodegenerative disease, and ageing.

#### About duet multiomics +modC

One sample, one workflow, one solution for multiomic insights duet multiomics solution +modC simultaneously sequences genetics & epigenetics in a single workflow. See all four genetic bases (A-C-G-T) without ambiguity in C or T calls – plus modified cytosine (modC) using your existing next-generation sequencer, with results phased within a single read.

#### **Product Features:**

- Whole Genome Investigation: Get simultaneous whole genome sequencing results with standard SNP detection and epigenetic marks with improved sensitivity and specificity.
- Preserve Valuable Samples: Utilize samples as low as 10 ng of DNA for highly accurate modC.
- C-to-T Mutation Detection: Simultaneously detect the most common type of genetic mutation (C-to-T) in the human genome and cancer.
- Allele-specific methylation: Attain phased results for allele-specific methylation (ASM) without loss of even genomic coverage.
- Seamless Bioinformatics Integration: Gain a fully optimized bioinformatics pipeline using existing alignment and SNP calling, plus a proprietary module for epigenetic and ASM quantification.



Detection of solid tumours at the early stage is associated with a better possibility of cure and survival. In addition, minimally invasive cancer tests that provide patient-specific, comprehensive treatment options can bring meaningful outcomes for treating and monitoring advanced/refractory/rare cancers.

Datar Cancer Genetics UK Private Limited (DCG) has unique value portfolio that offers all of the above. Our liquid biopsy tests span across multicancer screening, early detection, comprehensive therapy recommendation, and cancer monitoring. These tests are performed in DCG UK's fully accredited and equipped laboratory space, needing clients only to send the blood samples in DCG-provided blood collection kits. We deliver the comprehensive results within 10-12 working days. Our tests are CE-marked, IVD regulated under directive 98/79/EC. Our laboratory facility is CAP and CLIA accredited, working under ISO15189 QMS and is located at the Surrey Research Park, Guildford, United Kingdom.

DCG UK offers innovative tests for screening and diagnosis of solid organ cancers cancer based on detecting the presence of Circulating Tumour Cells (CTCs). CTCs are malignant cells shed by tumours into the vasculature and are a potent analyte for non-invasive diagnosis of cancer. DCG has a novel approach for the negative enrichment of CTCs from peripheral blood samples with proprietary chemistry that selectively kills non-malignant cells to enrich the desired CTCs, enhancing the clinical sensitivity. We combine our propriety CTC based technology and the power of genomics to provide solutions to various stages of cancer diagnosis and management.

For more details on the technology and publications, please visit: **uk.datarpgx.com** 



Elypta is a Swedish cancer detection company focused on reducing cancer mortality by enabling earlier detection and improved monitoring.

The metabolism-based liquid biopsy platform in development measures a novel panel of biomarkers and utilizes machine learning algorithms to generate cancer-type specific GAGome scores.

Elypta is advancing a broad study program across different cancers, including multi-cancer early detection applications, with the first indication expected to be early detection of recurrence in renal cell carcinoma.

To learn more, see www.elypta.com.



At Roche UK, we focus our energy and investment in developing tests and treatments that change lives and give us more quality time with the people we love. And, together with others, we're solving healthcare's greatest challenges; helping to achieve better results by connecting early diagnosis to targeted treatment and ongoing support.

Healthcare matters to all of us. That's why we work hard to ensure that all our new medicines are made available to those who need them through the NHS – wherever they live, whatever their circumstances.

In 2020, more than 820 million Roche diagnostic tests were used to confirm, rule out or manage health conditions and over 712,000 patients benefited from our medicines and diabetes monitoring and insulin delivery system. During this period, we contributed £1.26 billion to the UK economy, supporting over 21,000 jobs.

Proud of what we do, we're here because we care. In the UK we employ over 2,000 brilliant specialists who work together to transform the lives of patients and their loved ones.

That's what makes us who we are. That's what makes us Roche UK. For more information, please visit www.roche.co.uk.



Olink offers an unmatched high-multiplex technique to identify actionable biomarkers, with a strong focus on the human plasma proteome. Using minimal sample volume we provide quantifiable results with high-throughput, exceptional sensitivity and specificity, with coverage across a broad dynamic range. Our mission is to accelerate proteomics together with the scientific community across multiple disease areas to enable new discoveries and better understand complex real-time human biology. We are committed to develop our offering and are continuously expanding our protein coverage for a growing number of biological processes and pathways.

Olink is well-established in Europe (HQ Uppsala, Sweden) and the USA (HQ Boston, MA), with a rapidly developing presence across Asia. We also work with a growing number of core labs around the world offering analysis and support to an expanding global customer base.

For more information, please visit www.olink.com

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DELFI Diagnostics ("DNA EvaLuation of Fragments for early Interception") is developing next-generation, blood-based cancer detection tests that are accurate, accessible and deliver a new way to detect cancer. DELFI tests are built to solve the highest-burden population health issues, including in historically underserved demographics. Our science is based on fragmentomics, the discovery that cancer cells are more disorganized than normal cells and, when they die, leave behind tell-tale patterns and characteristics of cell-free DNA (cfDNA) fragments in the blood. We combine advanced machine-learning with whole-genome sequencing data to accurately compare an individual's cfDNA fragments against populations with and without cancer. The DELFI platform uses these millions of data points to reliably identify individuals who may have lung cancer, including early stage disease.

DELFI's first product is a lung cancer detection test for screen-eligible individuals. Lung cancer remains the top cancer killer in the United States, with nearly 140,000 people dying from the disease each year. Low-dose CT scans have proven effective indetecting disease, yet 94% of eligible adults do not receive them. The DELFI test has a 99.7% negative predictive value, meaning that individuals who do not show signs of disease are not likely to have lung cancer found by LDCT.

### CONFERENCE STAFF ORGANISERS

While many individuals came together to make this conference possible, listed below are the main staff organisers of the 2023 conference:

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DAVID CROSBY Cancer Research UK

YAN PAN Cancer Research UK

KATIE PONTIUS Canary Center at Stanford

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Join the conversation: #EDxConf23

### POSTER MENU

#### **Tuesday 10 October**

	First Name	Surname	Organisation	Abstract Title
1	Abdullah	Alsalemi	University of Warwick	Early Detection of Head & Neck Pre-Cancerous Conditions from Clinical Images Using Artificial Intelligence
2	Adriana	Fonseca	Early Cancer Institute, University of Cambridge	Methylation dynamics in the decades preceding Acute Myeloid Leukaemia
3	Ahsen	Ustaoglu	University of Cambridge	Secretory Proteins for Early Detection of Barrett's Oesophagus: Looking Beyond the Cells
4	Alberto	Saiani	University of Manchester	Designing fully defined (animal free) 3D scaffolds for cancer early initiation models
5	Alexander	Davies	Oregon Health & Science University	Implementation of live-cell approaches to capture dynamical tumor-microenvironment interactions during cancer progression
6	Alexandra	Creavin	University of Bristol	Inequality in the uptake of bowel cancer screening since COVID-19: a cross-sectional study of 86,850 citizens
7	Alis	Hales	University of Manchester	Utilising A 3D Culture Model to Identify Key Signalling Pathways in Early Breast Cancer Initiation
8	Andrew	Blake	University of Manchester	Modelling the interface between the lung cancer and the immune system for early detection biomarkers.
9	Andrew	Gilmore	University of Manchester	Matrix stiffness drives genomic damage in mammary epithelial cells through reprogramming cell metabolism.
10	Anietie	Aliu	University of Surrey	A systematic review of the barriers to breast cancer screening and the effectiveness of interventions to address them, experienced by women of Black African and Black Caribbean descent in the UK.
11	Aysegul	Ors	Oregon Health & Science University	Deciphering Breast Cancer Heterogeneity: Transcriptional and Epigenetic Cell States in Breast Cancer identified by Multi-omic Single-Cell Sequencing Approaches
12	Aysha	Khan	University of Manchester	Interventions to facilitate breast mammography attendance in women from Black, Asian and Ethnic Minority communities living in high-income countries: a mixed method review of reviews.

	First Name	Surname	Organisation	Abstract Title
13	Breeana L.	Mitchell	Natera, Inc.	Incorporating perspectives from underserved communities to inform clinical trial design for early cancer detection studies
14	Caroline	Watson	Early Cancer Institute, University of Cambridge	Tracing the evolution of clonal hematopoiesis to acute myeloid leukaemia (AML) using longitudinal pre-diagnosis blood samples
15	Charles	Racz	Stanford University School of Medicine	Leveraging Machine Learning for Aggressive Prostate Cancer Early Detection with Flexible Screening
16	Chloe	Bowman	Oregon Health and Sciences University	Fibroblast PIN1 coordinates HGF- and lactate- mediated crosstalk that is required for the growth of a subset of pancreatic cancer cells
17	Chloe	McCoy	Queen's University Belfast	Endometrial Cancer and Prior Diagnosis of Endometrial Hyperplasia: A Population-Based Study
18	Chloe	Pacyna	Wellcome Sanger Institute	An MTOR mutation hitchhikes through embryogenesis, driving multifocal, multiphenotypic renal tumours
19	Chris	Estes	Exact Sciences	Estimated Impact of Adenoma and Colorectal Cancer Early Detection on Health Outcomes and Screening Effectiveness
20	Christine	Campbell	University of Edinburgh	Understanding ethnic variation in cervical screening participation in Scotland
21	Cristiane	Franca	Oregon Health & Science University	Modeling the spectrum of vascular changes occurring in healthy, pre-malignant, and early malignant cancers on-a-chip
22	Daniel	Munoz-Espin	Early Cancer Institute, University of Cambridge	Senescent macrophages promote early stage lung cancer onset
23	David	Osuna de la Pena	University College London	Intrinsic and extrinsic determinants of premalignancy in the airways
24	Dejana	Braithwaite	University of Florida	Patient-Provider Discussion about Lung Cancer Screening by Race and Ethnicity: Implications for Equitable Uptake of Lung Cancer Screening
25	Denitza	Williams	Cardiff University	Reducing cancer detection inequalities in cervical cancer: A novel decision SUpport intervention to support Choice in Cervical ScrEEning moDality (SUCCEED)
26	Diane	Primrose	Centre for Sustainable Delivery (CfSD)	Establishing Rapid Cancer Diagnostic Services (RCDS) in Scotland
27	Ece	Eksi	Oregon Health and Sciences University	Multiplex imaging of localized prostate tumors reveals changes in mast cell type composition and spatial organization of AR-positive cells in the tumor microenvironment
28	Emma	Wylie	University of Manchester	Exploring the Relationship between Ethnicity and Breast Density

	First Name	Surname	Organisation	Abstract Title
29	Emmanouela	Mitta	University of Manchester	Towards A Physiologically Relevant Lung In Vitro Model for Early Cancer Biomarkers
30	Eoghan	Mulholland	University of Oxford	Epithelial Grem1 drives ectopic stem cell niche formation through stromal remodelling and tissue co-evolution in intestinal dysplasia initiation
31	Evangelos	Katsampouris	Queen Mary University of London	How do healthcare professionals communicate and disclose pulmonary nodule findings to patients under surveillance following LDCT screening?
32	Flavia	Pennisi	Università Vita- Salute San Raffaele	Effects of mental health morbidity on help- seeking and diagnostic testing for possible cancer symptoms: a vignette study
33	Florian	Goncalves	Oregon Health and Sciences University	A phage display-developed senolytic peptide (SenC) for the targeting and removal of senescent cells
34	George	Atkinson	University of Oxford	Integrating digital pathology, mathematical modeling, and spatial analysis for enhanced detection and risk assessment
35	Haleema	Aslam	De Montfort University	How to improve uptake of breast cancer screening and access to breast cancer services for South Asian and African and African – Caribbean women in Leicester
36	Hana	Zahed	International Agency for Research on Cancer (IARC/ WHO)	Identification of 36 blood-based protein markers for early lung cancer detection – results from the Lung Cancer Cohort Consortium (LC3)
37	Hannah	Drysdale	King's College London	Cervical screening barriers and attitudes in previous non-attenders who returned a self-sample kit in the YouScreen study: preliminary findings from a cross-sectional survey
38	Hannah	Harrison	University of Cambridge	Implementation and External Validation of the Cambridge Multimorbidity Score in the UK Biobank cohort: including a software suite and codelists for cancer risk modelling studies
39	Harmeet	Dhani	Biological Dynamics	Proteomic Expression Using Exosomes in Intraductal Papillary Mucinous Neoplasms (IPMN) Patients to Inform Risk Stratification
40	Haylie	Helms	Oregon Health and Science University	Single Cell Bioprinting for the Systematic Assessment of Spatial Dynamics on Tumor Evolution
41	Helen	Jaques	GRAIL Bio UK Ltd	The Impact of Screening Participation on Modelled Mortality Benefits of a Multi-Cancer Early Detection Test by Socioeconomic Group in England

	First Name	Surname	Organisation	Abstract Title
42	Hugh	Selway- Clarke	University College London	In Silico Testing of Hypotheses for the Effect of Smoking on Somatic Evolution in the Healthy Human Lung
43	James	Chettle	University of Oxford	The RNA binding protein LARP1 drives tumorigenesis and can be exploited for the early detection of ovarian cancer
44	John Lizhe	Zhuang	University of Cambridge, Early Cancer Institute	Comprehensive phenotyping of cellular landscape for early detection of cancer risk in Barrett's Oesophagus
45	Julia	Markus	University College London	An MR Core Lab to support validation and evaluation of quantitative MR imaging biomarkers for the detection of cancer.
46	Lauren	Gatting	Cancer Prevention Group, King's College London	Acceptability of Artificial Intelligence in breast screening: Focus groups with screening-eligible women in England
47	Lauren	Murphy	University of Oxford, WIMM	Platelets sequester extracellular DNA, capturing tumour-derived and free fetal DNA
48	Liz	Down	University of Exeter	Assessing ethnic differences in gastro- intestinal cancer incidence in patients with low haemoglobin: a retrospective primary care cohort study
49	Lucie	Gourmet	University College London	The temporal evolution of cancer hallmarks
50	Мао	Мао	SeekIn Inc	A panel of seven protein tumour markers for effective and affordable multi-cancer early detection by artificial intelligence
51	Marta	Canel	Cancer Research UK Scotland Centre, University of Edinburgh	Validating new models to investigate the impact of mutational heterogeneity in the early detection of pancreatic cancer.
52	Martyn	Stott	University of Liverpool	Lessons learnt from the UK Early Detection Initiative (UK-EDI) Study: developing a bespoke cohort to further the early detection of Pancreatic Cancer
53	Matthew	Ford	University of Cambridge	Identifying biomarkers of progression in genetically engineered mouse models of early ovarian cancer
54	Maya	Stibbards- Lyle	University of Calgary	Bioreactor-based modelling of the postpartum breast environment for the purposes of biomarker identification.
55	Melissa	Barlow	University of Exeter	The impact of patient ethnicity on ovarian cancer incidence following a CA125 test in primary care: an observational cohort study
56	Mette Kielsholm	Thomsen	Copenhagen University Hospital	Mental disorders and colorectal cancer screening

	First Name	Surname	Organisation	Abstract Title
57	Miriam	Dixon- Zegeye	University of Oxford	Trial in Progress: Cancer Precision Prevention Trial of Metformin in adults with Li Fraumeni Syndrome (MILI): embedding translational biology into clinical trials
58	Mohammed	Faruk	Ahmadu Bello University Zaria, Nigeria	Deciphering the role of HERV-R as biomarker for early detection of prostate cancer risk and prognosis in West African Black men from Nigeria using RNA-Seq and other molecular biology techniques
59	Nicholas	Cheng	Ontario Institute for Cancer Research	Leveraging population cohorts to profile cell-free DNA methylation and fragmentomic signatures in blood up to eight years prior to clinical detection
60	Nima	Nabavizadeh	Oregon Health & Science University	New community research review system tests feasibility of subsites to boost diverse recruitment to early detection trials
61	Nora	Pashayan	Knight Cancer Institute, Oregon Health & Science University	REPRESENT: A Community Engagement Roadmap to Improve Participant Representation in Early Cancer Detection Research
62	Ozge	Karanfil	Koç University	Case Study and Systems Model of PSA Screening for Early Detection of Prostate Cancer
63	Patricia	Lapitan	University of Manchester	Improving prostate specific antigen (PSA) uptake in a high-risk black population through increasing prostate cancer risk awareness
64	Patrick	Kierkegaard	CRUK Convergence Science Centre, Imperial College London	Incorporating intersectionality into the development of an equity-informed Target Product Profile for non-invasive biomarker tests tailored to support mobile testing outreach programmes
65	Pernille Thordal	Larsen	Randers Regional Hospital	titel Risk of post-colonoscopy colorectal cancer (PCCRC) within first surveillance interval for FIT positive screening participants, who will and will not be recommended colonoscopy surveillance in the future.
66	Pooyeh	Farahmand	University of Glasgow/Beatson Institute for Cancer research	Genetically Defined Mouse Models of Malignant Pleural Mesothelioma recapitulate human MPM phenotypes and response to therapy.
67	Rebecca	Newberry	Bayer AG	Clinical and economic benefits of supplemental screening for pre-cancerous and early-stage tumour detection, in women with dense breasts and average or intermediate cancer risk
68	Rebecca	Smittenaar	GRAIL Bio UK Ltd	The Impact of Screening Participation on Modelled Mortality Benefits of a Multi-Cancer Early Detection Test by Socioeconomic Group in England

	First Name	Surname	Organisation	Abstract Title
69	Rebekka	Duhen	Knight Cancer Institute, Oregan Health & Science University	Characterization of T cells subset in colorectal polyps, cancer and blood
70	Ruth	Evans	Queen Mary's University of London	Support after urgent suspected cancer referral when cancer is not found: survey of patients' preferences and perceived acceptability
71	Samuel	Gamble	UCL Cancer Institute	Early remodelling of peripheral CD4 T cell differentiation enables non-invasive early detection of lung squamous carcinogenesis.
72	Samuel	Merriel	University of Exeter Medical School	Exploring ethnic differences in the distribution of blood test results in healthy adult populations to inform earlier cancer detection: a systematic review
73	Shifra	Krinshpun	Natera, Inc.	Hereditary cancer testing across race and ethnicity: differences in patient characteristics and genetic test results
74	Silvana	Debernardi	Barts Cancer Institute	UroPanc Trial: a large prospective study for validation of urinary biomarkers for earlier detection of pancreatic adenocarcinoma
75	Siri H	Strand	Stanford University School of Medicine	Integrative analysis of breast ductal carcinoma in situ using scRNA-seq data identifies alterations in epithelial integrity
76	Sisse	Njor	Randers Regional Hospital	How do organizational and socioeconomic factors affect the adherence to colonoscopy surveillance adherence in the Danish FIT-based colorectal cancer screening program.
77	Sushant	Parab	University of Torino	Deciphering the Crosstalk within the Tumor Microenvironment of NSCLC by a virtual microdissection approach
78	Wendy	Alderton	Early Cancer Institute, University of Cambridge	Strategies to ensure diversity in recruitment to the ACED (Alliance for Cancer Early Detection) Cohort at The Early Cancer Institute, Cambridge University, UK
79	Sachini	Malaviarachchi	General Sir John Kotelawala Defence University Rathmalana	Analysis of Interleukins as Potential Biomarkes in the Diagnosis of Colorectal Cancers
80	Xubo	Song	Oregon Health & Science University	Feature Segmentation in High-Resolution Scanning Electron Microscopy for Characterization of Early-Stage Tumor Tissues
81	Xueke	Wang	Barts Cancer Institute, Queen Mary University of London	Platelet miRNAs as Potential Biomarkers in Prostate Cancer Detection: Highlighting Differential Expression of hsa-miR-627, hsa- miR-22, and hsa-miR-190
82	Yeuk Pin Gladys	Poon	University of Cambridge	Clonal evolution preceding cancer revealed using single-cell DNA sequencing and computational modelling

### POSTER MENU

#### Wenesday 11 October

	First Name	Surname	Organisation	Abstract Title
1	Adam	Brentnall	Queen Mary University of London	An optimisation framework to guide choice of thresholds for risk-based cancer screening
2	Adem	Yildirim	Oregon Health and Science University	Cancer Biomarker Amplification using Biodegradable Nanoparticles and Low-Intensity Focused Ultrasound
3	Alex	Sockell	PacBio	Improved liquid biopsy assay performance using sequencing by binding (SBB)
4	Alexander	Dudgeon	University of Exeter	Raman probes for early cancer detection (RESUBMISSION IN CASE SUBMISSION DIDNT GO THROUGH)
5	Alexander	Oldroyd	University of Manchester	Accurate Stratification of Cancer Risk in a Real-World Cohort Using the International Guideline for Idiopathic Inflammatory Myopathy- Associated Cancer Screening
6	Alice	Baggaley	Imperial College London	Real-world implementation of the Biomarker Toolkit: a tool to mediate the successful translation of biomarkers from lab to clinic: Case Studies
7	Ananya	Malhotra	London School of Hygiene & Tropical Medicine	Can we screen for pancreatic cancer? Identifying a sub-population of patients at high risk of subsequent diagnosis using machine learning techniques applied to primary care data
8	Anthony J.	Webster	University of Oxford	Multistage models for optimised risk-stratification using an "effective age"
9	Aula	Ammar	University of Glasgow	Assessment of CD3 infiltration in premalignant colonic adenoma improves prediction of patients at risk of developing metachronous disease.
10	Becky	White	University College London	Underlying cancer risk among patients with fatigue and other vague symptoms: a population-based cohort study in primary care
11	Benjamin	Jacob	RCSI University of Medicine and Health Sciences	An Investigation of the Completeness and Accuracy of Routine GP Data Used to Determine Eligibility for Lung Cancer Screening (ICARUS- Lung)
12	Carolyn	Hall	Exact Sciences	Evaluating the diagnostic burden of tumor localization strategies for multi-cancer early detection tests
13	Charlotte Kelley	Jones	King's College London	Acceptability of de-intensified screening for women at low risk of breast cancer: a randomised online experimental study in England
14	Chris	Boniface	Oregon Health & Science University	Mixed ctDNA dynamics and decreased detection rates in early-stage lung cancepatients during radiation treatment

Fir	rst Name	Surname	Organisation	Abstract Title
15 Ch	hristian	Hoerner	Stanford University	Utilizing the Platelet Transcriptome for EarLy dEteCTion of HeRedItary Renal Cancer (ELECTRIC)
16 Cr	raig	Smith	University of Glasgow	Epidemiology and Risk Prediction Modelling of Head and Neck Cancer
17 Dir	imitris	Vavoulis	University of Oxford	Multimodal cell-free DNA whole-genome analysis combined with TAPS reveals cancer signals in patients presenting with symptoms
18 Do	oreth	Bhairosing	Antoni van Leeuwenhoek – Netherlands Cancer Institute	Centre for early cancer detection (The Netherlands Cancer Institute). An initiative to link clinical practice and research
19 Ele	eanor	Roberts	University of Manchester	Breast cancer polygenic risk scores derived in White European populations are not calibrated for women of Ashkenazi Jewish descent
20 Eliz	izabeth	Bancroft	The Royal Marsden NHS Foundation Trust	Identification of men with a genetic predisposition to prostate cancer: targeted screening of BRCA1/2 mutation carriers and controls. The IMPACT study Quality of Life Study.
21 Eliz	izabeth	Dolan	University of Nottingham	Using loyalty card data to improve model predictions to aid early cancer diagnosis: An exploration of the value of shopping transactions in predicting ovarian cancer.
22 Ella	la	Stimson	Knight Cancer Institute, Oregon Health & Science University	Detection of Cancer-Associated Protease Activity Using Multi-Modal Electrokinetic Platform
23 Ello	len T.	Chang	GRAIL, LLC	Leveling the playing field when comparing multi- cancer early detection (MCED) tests: weighting by cancer type and stage
24 Eri	in B	McGrattan	Queen's University Belfast	'Burning matters': Differing characteristics of Barrett's oesophagus patients according to reflux symptoms has implications for early detection initiatives.
25 Eve	/elyn	Fitzsimons	University College London	Integration of innate and adaptive immune signatures for early detection of cancer
	ong Lien udrey	Kwong	University of Birmingham Centre	Investigating the psychological harms of testing for ovarian cancer in symptomatic women: a cohort study embedded in the multicentre, ROCkeTS prospective diagnostic study
27 Fra	anco	Faucher	Stanford University	Protease Activated Real-Time Ratiometric Imaging for Early Cancer Detection in Surgical and Diagnostic Applications
28 Gr	raham	Kibble	University of Cambridge/ Early Cancer Institute / ACED Clinical Research team	Investigating bladder cell mutational signatures from voided urine for determining environmental exposure and cancer risk stratification across multiple organ systems – a scoping review

	First Name	Surname	Organisation	Abstract Title
29	Henriette	Pedersen	University of Manchester	Plasma proteomics and machine learning for novel biomarker discovery in glioblastoma
30	Henson Lee	Yu	University of Cambridge	Epigenetic Biomarkers for Plasma-based Detection and Stratification of Prostate Cancer
31	Iñigo	Ayestaran	University of Cambridge	Neoantigen-specific T-cell Receptors for early detection of IDH1-mutant Glioma
32	Jane	Lange	Oregon Health and Sciences University	Modeling to generate realistic expectations for multi-cancer early detection screening trials
33	Jared	Fischer	Oregon Health and Science University	Dynamic Assembly of an Engineered Peptide with Endogenous Nanoparticles for Broad Spectrum Cancer Delivery
34	Jiannis	Ragoussis	PacBio	Improved detection of low frequency mutations in ovarian and endometrial cancers by utilizing a highly accurate sequencing platform
35	Jose Montoya	Mira	Oregon Health and Science University	A rapid and low-volume protease activity assay for the early detection of Pancreatic Ductal Adenocarcinoma
36	Justina Ucheojor	Onwuka	International Agency for Research on Cancer	Blood-based DNA methylation markers for lung cancer prediction
37	Kathryn	Young	Natera, Inc.	Blood-based early cancer detection screening for breast and ovarian cancer: Who should be tested?
38	Kirstie	McLoughlin	The Daffodil Centre	Microsimulation models for melanoma: a systematic review and protocol for development of a modelling platform for evaluating the benefits, harms, and cost-effectiveness of a melanoma screening program
39	Lecia V.	Sequist	Massachusetts General Hospital and Harvard Medical School	Sybil: A validated deep learning model to predict future lung cancer risk from a single low-dose chest CT.
40	Lucy	Oldfield	University of Liverpool	Deep proteomics identifies novel biomarker candidates and molecular pathways of pancreatic cancer-related diabetes
41	Madeline	Krieger	Oregon Health and Science University	A multi-omics Approach to Integrating Patient Data with Microbiome Observations: Preliminary Results from an Ongoing Study
42	Mariana Ferreira	Leal	Owlstone Medical	Evolution trial: Proof-of-mechanism for a diagnostic probe using an on-breath volatile reporter for lung cancer
43	Marilena	Hadjidemetriou	University of Manchester	Nano-omics: nanotechnology-enabled harvesting of blood-circulating biomarkers

	First Name	Surname	Organisation	Abstract Title
44	Masato	Inoue	Ludwig Institute for Cancer Research, University of Oxford	A human tissue atlas of DNA methylation and hydroxymethylation
45	Matthew	Barclay	University College London	Cancer incidence and competing mortality risk following 15 presenting symptoms in primary care: a population-based cohort study using electronic healthcare records
46	Meena	Rafiq	University College London	Predictive value of abnormal primary care blood tests for detecting cancer in patients with abdominal symptoms
47	Mehran	Karimzadeh	Exai Bio	Detection of early-stage cancers and tissue of origin using circulating orphan non-coding RNAs
48	Melissa	Wong	Oregon Health & Science University	Circulating Hybrid Cells Serve as Measures of Cancer Burden and Reflect Biology Underlying Metastatic Progression
49	Mercè	Marzo- Castillejo	Catalan Institut of Health	Evaluation of the capacity of Primary Care to identify and boost the participation of the at-risk population in lung cancer screening
50	Michael	Davies	University of Liverpool	Plasma Protein Biomarkers for Risk Stratification of Lung Cancer
51	Michael	Pavlides	University of Nottingham	The detection of Small Early Liver cancer with Natural history follow up (SELiNa)
52	Michelle	Gomes	Knight Cancer Institute, Oregon Health & Science University	Leveraging Glycosignatures in a Prostate Cancer Reflex Test
53	Mohammad Kaleem	Ahmad	King George's Medical University	Deciphering non-invasive biomarker potential of microRNA in Prostate cancer pathogenesis
54	Nadine	Zakkak	University College London	The presenting symptom signatures of incident cancer: evidence from the English 2018 National Cancer Diagnosis Audit
55	Niall	Mahon	University of Manchester	Designing a Peptide Hydrogel For Cancer Early Detection
56	Ninian	Schmeising- Barnes	King's College London	Acceptability of multi-cancer early detection blood tests as a population-based screening programme – a qualitative study in Great Britain.
57	Oleg	Blyuss	Queen Mary University of London	Updates from PANC-CYS-GAN project
58	Olga	Kostopoulou	Imperial College London	Algorithms and clinical judgement: impact of algorithm information, a social proof nudge, and explainability
59	Páidí	Creed	Biomodal	Refining liquid biopsy: Generating more information from cell free DNA

	First Name	Surname	Organisation	Abstract Title
60	Paul	Barber	King's College London	Multi-modal Signatures for Enhanced Lung Cancer Detection and Interpretability
61	Paul	Brennan	University of Edinburgh	International prospective clinical validation trial of a spectroscopic liquid biopsy for early detection of brain cancer
62	Peter	Donnelly	University of St Andrews	Great promise and big problems: applied epidemiology and the new diagnostics.
63	Peter	Sodde	ACED / University of Manchester	Cancer surveillance in high-risk hereditary cancer predisposition; the whole-body (WBMRI) experience in patients with Li Fraumeni Syndrome
64	Raff	Calitri	University of Exeter Medical School	Improving the clinical utility of platelet count in primary care with age- and sex-stratified threshold
65	Rasmus	Grønnemose	Odense University Hospital and Svendborg Hospital	Tracking Down Early Stage Cancer in Southern Denmark (TRADESCAN) -a retrospective cohort study of the Non-specific Symptoms and Signs of Cancer-Cancer Patient Pathway (NSSC-CPP) in the area of Funen from 2014 to 2021
66	Rose	McHardy	Dxcover / University of Strathclyde	Augmentation of FTIR Spectral Datasets Using Wasserstein Generative Adversarial Networks For Cancer Liquid Biopsies
67	Rowan	Callahan	Cancer Early Detection Advanced Research Center	Diagnostic utility of non-coding cell-free RNA in a high-risk Endoscopic ultrasound screening cohort
68	Ruggiero	Santeramo	Queen's Mary University / WMG (University of Warwick) / CRUK	MAMMA: MAmmography Multi-Modal Approach for Breast Cancer Risk Prediction using Deep Learning
69	Ruqayya	Awan	University of Warwick	Harnessing AI for Early Detection of Pleural Mesothelioma
70	Russell	Hung	Canon Medical Research Europe	Integration of Clinical and Transcriptomics Data for Metachronous Polyp Risk Prediction
71	Saleh	Alessy	King Faisal Specialist Hospital & Research Center	Sociodemographic and Clinical Characteristics of Persons Screened in the National Colorectal Cancer Early Detection Program in Primary Health Centers in Saudi Arabia between 2017- 2018
72	Sam	Ellis	Royal Surrey NHS Foundation Trust	Development and evaluation of an AI risk tool for predicting future breast cancer from negative screening mammograms
73	Samantha	lp	University of Cambridge	Integrated Dynamic Early Detection Models for CRC: A Prospective Study of the General Populations and Symptomatic Cohorts in UK Biobank
74	Sarah	Webb	Royal Marsden NHS FT	EVolution of a patiEnt-REported symptom- based risk stratification sySTem to redesign the suspected Head and Neck cancer referral pathway (EVEREST-HN)

	First Name	Surname	Organisation	Abstract Title
75	Seema	Rego	Exact Sciences	Outcomes in participants with a false positive multi-cancer early detection (MCED) test: Results from >4 years follow-up from DETECT-A, the first large, prospective, interventional MCED study
76	Shuping Joy	Li	Queen Mary University of London	Modelling the effect of a multi-threshold FIT regimen in Colorectal Cancer screening
77	Siobhan	Connal	Dxcover Ltd.	Earlier Detection of Cancers using Spectroscopic Liquid Biopsies: Serum or Plasma?
78	Stepan	Romanov	University of Manchester	Artificial Intelligence for image-based breast cancer risk prediction using attention
79	Stuart	Ibsen	Oregon Health & Science University	Differentiation of Pancreatic Cancer from Benign Pancreatic Disease using Cancer- Derived Nanoparticles Recovered using High Conductance Dielectrophoresis
80	Suraj	Pavagada	Early Cancer Institute, University of Cambridge	Bioelectronic platform for enrichment of selective cellular clusters enables point-of-care detection of Barrett's Oesophagus (BE)
81	Suzanne	Scott	Queen Mary University of London	Future cancer risk after urgent suspected cancer referral when cancer was not found
82	Thomas	Callender	University College London	Clinical risk prediction using privacy-preserving synthetic data
83	Tomasz M.	Beer	Exact Sciences	Long-term clinical outcomes of cancers diagnosed following detection by a blood-based multi-cancer early detection (MCED) test
84	Vasilis	Stavrinides	Vasilis Stavrinides	The histomorphological dynamics of MRI-progressing prostate cancer lesions.
85	Vineet	Datta	Datar Cancer Genetics UK Pvt Ltd	Circulating Tumor Cell (CTC) based non-invasive liquid biopsy for diagnosis of inaccessible Pancreaticobiliary Cancers (PBC).
86	Wei	Xu	University of Edinburgh	Development and Validation of Risk Prediction Models for Colorectal Cancer in Patients with Symptoms
87	Xiaoshuang	Feng	International Agency for Research on Cancer	A modeling study for eligibility criteria of national lung cancer screening in France
88	Zaed	Hamady	University Hospital Southampton NHS Trust, Southampton Clinical Trial Unit	SAFE-D - a prospective study for evaluating pancreatic cancer stage shift and resectability rate in patients with new onset diabetes.

## ATTENDEE LIST

First Name	Last Name	Job Title	Company
Maryam	Abdollahyan	Data Scientist	Barts Cancer Institute, Queen
			Mary University of London
Pilar	Acedo	Senior Research Fellow / Junior PI	University College London
Bartu	Ahiska	Ph.D.	University of Oxford
Mahjabin	Ahmed	Medical Student	King's College London
Tim	Aitman	Professor of Molecular Pathology and Genetics	University of Edinburgh
Yahya	Al Hamhoom	Associate Professor	King Khalid University
Wendy	Alderton	Early Cancer Institute and ACED Programme Manager	University of Cambridge
Saleh	Alessy	Assistant Professor	Saudi Electronic University
Kathy	Alexion	Professor	Fred Hutchinson Cancer Research Center
Nurshad	Ali	Post Doctoral Researcher	Barts Cancer Institute
Ahmeda	ALI	MD scholar	Royal College of surgeons Ireland
Anietie	Aliu	Post Graduate Researcher	University of surrey
Mahmood	Almashhadani	Assistant Professor	MBRU
Saleh	Algahtani	Professor	KFSHRC
Abdullah	Alsalemi	Research Fellow	University of Warwick
Aula	Ammar	Research Associate	University of Glasgow
Owen	Anderson	Reseach Engineer	Canon Medical Research Europe
Lesley	Anderson	Chair in Health Data Science	University of Aberdeen
Antonis	Antoniou	Professor of Cancer Risk Prediction Director, Cancer Data Driven Detection	University of Cambridge
Sophia	Apostolidou	Senior Research Fellow	UCL
Haleema	Aslam	Doctoral Researcher	De Montfort University
Susan	Astley	Professor of Artificial Intelligence	University of Manchester
George	Atkinson	Postdoctoral Researcher	University of Oxfrord Nuffield department of Medicine
Heidi	Auman	Scientific Program Manager	Canary Foundation
Philip	Awadalla	Director, Senior Principal Investigator	Ontario Institute for Cancer Research
Ruqayya	Awan	Research Fellow	University of Warwick
lñigo	Ayestaran	PhD student	Early Cancer Institute, University of Cambridge
Aygun	Azadova	PhD student	Essex University
Velicia	Bachtiar	DPhil, EMBA	University of Cambridge
Alice	Baggaley	Clinical Fellow / PhD Student	Imperial College London
Sarah	Bailey	Ass. Prof. Primary Care Diagnostics	University of Exeter
Matthew	Baker	Professor of Early Diagnostics & CTO	University of Central Lancashire & Dxcover Ltd
Liz	Bancroft	Nurse Consultant in Oncogenetics Research	The Royal Marsden NHS Foundation Trust
Rachael	Barber	Head of Strategic Partnerships	Cancer Research UK
Paul	Barber	Senior Research Fellow	King's College London

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First Name	Last Name	Job Title	Company
Matthew	Barclay	Senior Research Fellow – Statistician	UCL
Mel	Barlow	PhD student	University of Exeter
Ana	Barros	Research Communications and	Cancer Research UK
		Marketing Manager	
Shelley	Barton	Co-Director, CEDAR	Oregon Health and Science
Tomasz	Beer	VD & Chief Medical Officer MCED	University Exact Sciences
Michelle	Beidelschies	VP & Chief Medical Officer, MCED MCED Medical Affairs Director	Exact Sciences
Marta	Berglund	Research Assistant	UCL
Luiz	Bertassoni	Associate Professor	OHSU
Doreth	Bhairosing	Research Coordinator	Antoni van Leeuwenhoek Hospital
Paul	Billings	CEO & Director	Biological Dynamics, Inc.
Sarah	Blagden	Professor of Medical Oncology, OCTO lead	University of Oxford
Andrew	Blake	Manchester ACED PhD student	University of Manchester
Jamie	Blundell	Group leader	University of Cambridge
Oleg	Blyuss	Reader	Queen Mary University of
			London
Sarah	Bohndiek	Group Leader	CRUK CI
Martin	Bone	Manchester ACED Programme Manager	University of Manchester
Chris	Boniface	Postdoctoral Scholar	OHSU/Cam
Alexander	Borowsky	Professor of Pathology and Laboratory Medicine	UC Davis School of Medicine
Patrick	Bossuyt	Professor of Clinical Epidemiology	University of Amsterdam
Tiphaine	Boulin	Scientific Research Officer	Breast Cancer UK
Chloe	Bowman	Research Assistant	OHSU
Oisin	Brady Bates	GP Research Fellow	RCSI
Kate	Brain	Professor of Health Psychology	Cardiff
Dejana	Braithwaite	Associate Director of Population	University of Florida
		Science	
paul	Brennan	Reader, Hon Cons, Clinical Director, Neurosurgery	University of Edinburgh/NHS Lothian
Paul	Brennan	Reader and Honorary Consultant Neurosurgeon	The University of Edinburgh
Adam	Brentnall	Senior Lecturer In Biostatistics	QMUL
Vicky	Brewis	Managing Editor	Springer Nature
Robert	Bristow	Director of the Manchester Cancer Research Centre	University of Manchester
Alice	Brookes	Strategic Evidence Manager	Cancer Research UK
Karen	Brown	Professor of Translational Cancer Research	University of Leicester
Dan	Brudzewsky	Field Application Scientist	Biomodal
Søren	Brunak	Research Director	University of Copenhagen
Dan	Brunsdon	Research Assistant	University College London
Mai Ngoc	Bui	Research Fellow	University College London
Alice	Burke	Research Grants Manager	CRUK
Heather	Burns	Specialist in Public Health Medicine	Health Service Executive
Holly	Butterworth	Manchester ACED Project Manager	University of Manchester
Raff	Calitri	Hideko Walton Research Fellow	University of Exeter
Rowan	Callahan	Graduate Researcher	Oregon Health and Sciences University
Thomas	Callender	Clinical Research Fellow	UCL
	1		

First Name	Last Name	Job Title	Company
Christine	Campbell	Reader in Cancer and Primary Care	University of Edinburgh
Marta	Canel	Postdoctoral Research Scientist	Cancer Research UK Scotland
			Centre- University of Edinburgh
Olivier	Caron	Medical Geneticist	Gustave Roussy
Sara	Castro Devesa	Research Grants Manager	CRUK
Alexa	Caturay	Associate Medical Officer of Health	Toronto Public Health
Taylor	Cavazos	Staff Scientist	Exai Bio
Andrew	Chan	Professor of Medicine	Massachusetts General Hospital
Ellen	Chang	Principal Epidemiologist	GRAIL
Christopher	Chapman	Lecturer	Queen Mary University of
			London
Chrisoula	Chappell	Research Associate	University of Manchester
Tom	Charlesworth	Director of Market Strategy &	biomodal
Claude	Chelala	Corporate Development Professor of Bioinformatics	QMUL
Nicholas		Doctoral Candidate	
	Cheng Chettle		University of Toronto
James		Postdoctoral Researcher	University of Oxford
Kim	Chu	Statistician	QMUL
Ibrahim	Cicek	Field Applications Scientist	biomodal
Samuel	Cole	Director of Research & Partnerships	Cancer Research UK
Siobhan	Connal	PhD Researcher	Dxcover
Sarah	Cook	Senior Strategic Evidence Manager	Cancer Research UK
Eithne	Costello	Professor of Molecular Oncology	University of Liverpool
Páidí	Creed	Director of Market Strategy & Corporate Development	Biomodal
Tatjana	Crnogorac- Jurcevic	Professor of Molecular Pathology and Biomarkers	Barts Cancer Institute
Phil	Crosbie	PhD Student	University of Manchester
David	Crosby	Head of Prevention and	Cancer Research UK
	,	Early Detection Research	
Scott	Dashner	Senior Scientist	Natera
Alexander	Davies	Senior Scientist	OHSU
Kate	Davies	PhD Student	University College London
Michael	Davies	RCLCF Senior Research Fellow	University of Liverpool
Sarah	Day	Senior Clinical Trial Manager	GRAIL Bio UK Ltd
Hannah	Daybell	Research Assistant	University of Cambridge
Floris	De Jong	Sr Medical Director Pipeline International	Exact Sciences
Maxime	De Vrieze	PhD Student	German Cancer Research Center (DKFZ) – Heidelberg, DE.
Silvana	Debernardi	Senior Researcher	Barts Cancer Institute
Jon	Deeks	Professor of Biostatistics	University of Birmingham
Laura	DeLong Wood	Associate Professor of Pathology,	Johns Hopkins University
Emek	Demir	Oncology, & Medicine Associate Professor	School of Medicine OHSU
Lucy	Denly	DPhil student	The Jenner Institute, University
Christina	Derksen	PDRA in Health Psychology	Queen Mary University of
Ginny	Devonshire	Senior Bioinformatician	
Harmeet	Dhani	Medical Director	Biological Dynamics
Utkan Lucy Christina Ginny	Demirci Denly Derksen Devonshire	Prof./Interim Division Chief DPhil student  PDRA in Health Psychology  Senior Bioinformatician	Stanford University The Jenner Institute, Unive of Oxford Queen Mary University of London Early Cancer Institute

First Name	Last Name	Job Title	Company
Caroline	Dive	Director, Cancer Biomarker Centre	University of Manchester
Miriam	Dixon-Zegeye	DPhil Student – Clinical Research	Department of Oncology,
		Training Fellow	Univeristy of Oxford
Elizabeth	Dolan	PhD Candidate	University of Nottingham
Sunil	Dolwani	Professor of Gastroenterology	Cardiff University
Peter	Donnelly	Professor	University of St Andrews
Brian	Druker	Director	Oregon Health & Science
			University: Knight Cancer
Hannah	Drysdale	PhD Student	Institute King's College London
Alexander	Dudgeon	Research Fellow	University of Exeter
Rebekka	Duhen	Senior Scientist	CEDAR, Knight Cancer Institute,
	Durieri	Serior Scientist	OHSU
Tina Clarke	Dur	VP Epidemiology	GRAIL
Joanne	Edwards	Professor of Translational Cancer	University of Glasgow
-		Pathology	100
Ros	Eeles	Professor	ICR
Catherine	Elliot	Director of Research Funding Communications & Partnerships	Cancer Research UK
Libby	Ellis	Associate Director Epidemiology	GRAIL Bio UK Ltd
Sam	Ellis	Computer Scientist	Royal Surrey NHS Foundation
		·	Trust
Kyle	Ellrott	Associate Professor	OHSU
Mark	Emberton	Dean, Faculty of Medical Sciences	UCL
Jon	Emery	Herman Chair of Primary Care Cancer Research	University of Melbourne
Sadik	Esener	Director, CEDAR	Oregon Health and Science University
Chris	Estes	Data Scientist	Exact Sciences
Ruth	Etzioni	Professor	Fred Hutchinson Cancer Center
Ruth	Evans	Postdoctoral Research Assistant	Queen Mary University of London
Margarete	Fabre	Oncology Therapy Area Lead	AstraZeneca
Alice	Fan	Assistant Professor, Oncology	Stanford Canary Center
Pooyeh	Farahmand	Research Associate	University of Glasgow, Beatson Institute for Cancer Research
Franco	Faucher	Graduate Student	Stanford
Ziding	Feng	Professor	Fred Hutchinson Cancer Center
Xiaoshuang	Feng	Postdoctoral Scientist	International Agency for Research on Cancer
Mariana	Ferreira Leal	Lead Scientist	Owlstone Medical
Jared	Fischer	Assistant Professor	Oregon Health and Science University
Simon	Fisher	Scientist	Canon Medical Research Europe
Rebecca	Fitzgerald	Professor of Cancer Prevention, Director	Early Cancer Institute
Evie	Fitzsimons	PhD student	University College London
Adriana	Fonseca	PhD student	Early Cancer Institute,
Matthew	Ford	Research Associate	University of Cambridge Cambridge University
lain	Foulkes	Executive Director of Research	Cancer Research UK
IGIT	TOURICS	and Innovation & CEO of Cancer Research Horizons	Carreet Nescarett Off
Helen	Fowler	Research Fellow in Epidemiology	UCL

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First Name	Last Name	Job Title	Company
Jonathan	Fox	Public Affairs Manager	Roche Diagnostics
Cristiane	Franca	Research Assistant Professor	Oregon Health & Science University
Kyra	Fraser	PhD student	UCL
Zoe	Frazer	Laboratory Technician	UCL
Garth	Funston	Senior Clinical Research Fellow	University of Cambridge
Rhian	Gabe	Professor of Biostatistics & Clinical Trials	Queen Mary University
Emanuela	Gadaleta	Senior Bioinformatician	Barts Cancer Institute, Queen Mary University of London
Samuel	Gamble	PhD student	UCL Cancer Institute
Andrea Delgado	Garcia	Patient Advocacy Manager – Cancer Grand Challenges	Cancer Research UK
Lauren	Gatting	Researcher	Queen Mary University London
Francesco	Gatto	Founder, Chief Scientific Officer	Elypta
Aleksandra	Gentry-Maharaj	Principal Research Fellow	UCL
Irene	Ghobrial	Professor of Medicine	Harvard
Ghobrial			
Fiona	Gilbert	Professor of Radiology & Head of Department	University of Cambridge
Andrew	Gilmore	Senior Lecturer	University of Manchester
Andy	Glyde	Early Diagnosis Campaign Strategy Lead	Bowel Cancer UK
Michelle	Gomes	Scientist	Knight Cancer Institute, Oregon Health and Science University
Florian	Goncalves	Graduate student	OHSU
Claudia	Goncalves	Translation Executive	Translation Executive
Patrick	Goodley	Clinical PhD Student	University of Manchester
Victoria	Goss	Head of Early Diagnosis and Translational Group	University of Southampton
Lucie	Gourmet	ACED PhD student	UCL
Kate	Gowers	Research Project Manager	UCL
Trevor	Graham	Director of the Centre for Evolution and Cancer	The Institute of Cancer Research
Ewan	Gray	Associate Director of Health Economics	GRAIL Bio UK Ltd
Simon	Grieveson	Assistant Director of Research	Prostate Cancer UK
Anita	Grigoriadis	Professor of Molecular and Digital Pathology	King's College London
Rasmus	Grønnemose	Post.doc.	Diagnostic Center
Carmen	Guerra	Professor of Medicine	University of Pennsylvania
Toumy	Guettouche	Chief Scientific Officer	Mercy BioAnalytics
Tim	Gunn	Senior Officer (News and Content)	Cancer Research UK
Marilena	Hadjidemetriou	Lecturer	University of Manchester
Alis	Hales	Manchester ACED PhD Student	University of Manchester
Matt	Howard-Murray	Public Involvement Manager (Research Data Strategy)	Cancer Research UK
Nicky	Dixon	Research Events Manager	Cancer Research UK
Zaed	Hamady	Consultant Surgeon	University Hospital Southampton NHS FT
Peter	Hampson	Medical Manager	Roche Diagnostics
George	Hanna	Head of Department of Surgery and Cancer	Imperial College London

First Name	Last Name	Job Title	Company
Peggy	Hannon	Professor, Health Systems and Population Health	University of Washington
Fredrik	Härenstam	VP BD	Elypta
David	Harley	Strategic Director Europe	Olink Proteomics
Hannah	Harrison	Research Associate	University of Cambridge
Samantha	Harrison	Head of Strategic Evidence	Cancer Research UK
Ernest	Hawk	Vice President/Division Head	The University of Texas MD
		·	Anderson Cancer Center
Eltjo	Heddema	Programme manager	Inspire2Live
Haylie	Helms	PhD Candidate & ACED Pre-Doc Scholar	OHSU
Sara	Hiom	VP, NHS Implementation & External Affairs	GRAIL Bio UK Ltd
Matt	Hoare	Assistant Professor of Hepatology	Early Cancer Institute, University of Cambridge
Christian	Hoerner	Senior Research Scientist	Stanford School of Medicine
Robert	Hollifield	Clinical Scientist	Datar Cancer Genetics
Liz	Holmes	Snr Medical Director	GRAIL Bio UK Ltd
Sharon	Hori	Instructor	Stanford University
Paul	Howard	Assistant Director, Research Operations	OHSU
Jake	Howden	Partnerships Manager	Cancer Research UK
Françoise	Howe	Scientific Coordinator	University of Oxford
Sacha	Howell	Senior Lecturer & Consultant in	University of Manchester
		Medical Oncology	3
Sharon	Hulley	Macmillan Rapid Diagnosis Clinical Nurse Specialis	Cardiff and Vale University Local Health Board
Russell	Hung	Research Engineer	Canon Medical Research Europe Ltd.
Nadeem	Hussein	Researcher	University of Oxford
Stuart	Ibsen	Assistant Professor	Oregon Health and Science University
Masato	Inoue	PhD student	Ludwig Institute for Cancer Research, University of Oxford
Samantha	lp	Research Associate	University of Cambridge
Jesus	Izaguirre Carbonell	Senior Manager Clinical Operations	Biological Dynamics
Ben	Jacob	SPHeRE PhD Scholar	RCSI University of Medicine
Catriona	Jamieson	Director	and Health Sciences Sanford Stem Cell Institute
Sam	Janes	Professor of Respiratory Medicine	UCL UCL
loanna	Janus	and Vice-Dean Research	Cancer Research UK
Joanna Helen	Janus	Research Programme Manager Senior Science Communications	GRAIL Bio UK Ltd
	Jaques	Manager	
Mattias	Johansson	Scientist	International Agency for Research on Cancer (IARC/WHO)
Peter	Johnson	National Clinical Director for Cancer	NHS England
David	Jones	DPhil	University
Peter	Kapitein	Patient Advocate	Inspire2Live
Siddhartha	Kar	Group Leader	Early Cancer Institute, University of Cambridge
Ozge	Karanfil	Assistant Professor	Koç University

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First Name	Last Name	Job Title	Company
Evangelos	Katsampouris	Postdoctoral Research Fellow	Queen Mary University of
			London
Kirren	Kaur	Sequencing Application Sales	PacBio
Dan	Kelberman	Specialist ACED Programme Manager	UCL
Charlotte	Kelley Jones	Post-graduate researcher	King's College London
	Kessler	Professor	University of Washington
Larry Yarunnessa	Khan	Senior Research Manager	Pancreatic Cancer UK
Aysha	Khan	ACED PhD Student	University of Manchester
Chuen Ryan	Khaw	PhD Student	
Graham	Kibble	Research Nurse	University of Carebridge
Patrick		Research Fellow	University of Cambridge
	Kierkegaard		Imperial College London GRAIL Bio UK Ltd
Laura	King	Director, External Affairs	GRAIL BIO UK LTG
Angela	King	Patient advocate	C D 1 1 1 1 1 1 1
Anne-Sophie		Patient Involvement Manager	Cancer Research UK
Madeline	Krieger	Postdoctoral Scholar	OHSU
Agne	Krilaviciute	Postdoc	DKFZ
Shifra	Krinshpun	Genetic Counselor, Medical Affairs	Natera
Karolin	Kroese	ACED Programme Manager	Cancer Research UK
Harpal	Kumar	President, BioPharma Business & Europe	GRAIL Bio UK Ltd
Natalia	Kunst	Senior Research Fellow	University of York
Evelyn	Kurotova	Research Technician	Barts Cancer Institute
Lisa	Lacasse	President	the American Cancer Society
			Cancer Action Network (ACS CAN)
Emily	Lane	Statistician	QMUL
JANE	LANGE	Scientist	Oregon Health And Sciences University
Ellen	Langer	Assistant Professor	Oregon Health & Science University
Marvin	Langston	Assistant Professor	Stanford University School of Medicine
Patricia	Lapitan	Medical Student	University of Manchester
Natalie	Lau	Global Medical Affairs Lead	Roche
Soren	Laursen	Senior Consultant	Danish Cancer Society
Richard	Lee	Consultant Respiratory Physician	The Royal Marsden Hospital
Henson	Lee Yu	Research Associate	Early Cancer Institute,
110113011	Lee Tu	Tresedient Associate	University of Cambridge
Simon	Leedham	Professor	University of Oxford
Katie	Lees	Programme Analyst	West Yorkshire & Harrogate Cancer Alliance
Juliette	Lewis	Consultant Physician	Cardiff and Vale University
Joy	Li	Statistician	Local Health Board  Queen Mary University
Wei	Liang	Biostatistical Director	GRAIL Bio UK Ltd
Volker	Liebenberg	CMO	Elypta
Paul	Limburg	Chief Medical Officer, Screening	Exact Sciences
Don	Listwin	CEO CEO	
			Canary Foundation
Kevin	Litchfield	Group Leader	UCL Stanford University
Kevin	Liu Lizha Zhuang	PhD Student	Stanford University
John	Lizhe Zhuang	Research Associate	Early Cancer Institute, University of Cambridge

Jessica Lloyd Yong-Jie Lu  Fei Lu Oldfield Lucy Gerard Lynch Georgios Lyratzopoulos Chhavi Mahajan Niall Mahon Sachini Malaviarachchi  Ananya Mallick Viviana Mannella Mao Mao julia Markus Laura Marlow Richard Martin Megan Martin  Tanimola Martins  Mercè Marzo  Spyridoula Massia  Parker Mattson Julia Maxson  Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin Shannon McWeeney	Research Fellow  Associate Professor Translation Manager Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher  Research Assistant	Cancer Research UK Queen Mary University of London Natera University of Liverpool University of Glasgow UCL University of Manchester University of Manchester University Hospital Plymouth NHS Trust London School of Hygiene & Tropical Medicine Stanford University Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Fei Lu Oldfield Lucy Gerard Lynch Georgios Lyratzopoulos Chhavi Mahajan Niall Mahon Sachini Malaviarachchi Ananya Mallick Viviana Mannella Mao Mao julia Markus Laura Marlow Richard Martin Megan Martin  Tanimola Martins Mercè Marzo Spyridoula Massia Parker Mattson Julia Maxson Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McLoughlin	Senior Manager Postdoctoral Researcher Project Manaager Professor of Cancer Epidemiology PhD Student Manchester ACED PhD Student Consultant Clinical Oncologist Research Fellow Associate Professor Translation Manager Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher Research Assistant	London Natera University of Liverpool University of Glasgow UCL University of Manchester University of Manchester University Hospital Plymouth NHS Trust London School of Hygiene & Tropical Medicine Stanford University Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK University of Exeter Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Oldfield Lucy Gerard Lynch Georgios Lyratzopoulos Chhavi Mahajan Niall Mahon Sachini Malaviarachchi Ananya Malhotra Parag Mallick Viviana Mannella Mao Mao julia Markus Laura Marlow Richard Martin Megan Martin Tanimola Martins Mercè Marzo Spyridoula Massia Parker Mattson Julia Maxson Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Postdoctoral Researcher Project Manaager Professor of Cancer Epidemiology PhD Student Manchester ACED PhD Student Consultant Clinical Oncologist Research Fellow Associate Professor Translation Manager Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher Research Assistant	Natera University of Liverpool University of Glasgow UCL University of Manchester University of Manchester University Hospital Plymouth NHS Trust London School of Hygiene & Tropical Medicine Stanford University Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK University of Exeter Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Oldfield Lucy Gerard Lynch Georgios Lyratzopoulos Chhavi Mahajan Niall Mahon Sachini Malaviarachchi Ananya Malhotra Parag Mallick Viviana Mannella Mao Mao julia Markus Laura Marlow Richard Martin Megan Martin Tanimola Martins Mercè Marzo Spyridoula Massia Parker Mattson Julia Maxson Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Postdoctoral Researcher Project Manaager Professor of Cancer Epidemiology PhD Student Manchester ACED PhD Student Consultant Clinical Oncologist Research Fellow Associate Professor Translation Manager Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher Research Assistant	University of Liverpool University of Glasgow UCL University of Manchester University of Manchester University Hospital Plymouth NHS Trust London School of Hygiene & Tropical Medicine Stanford University Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK University of Exeter Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Gerard Lynch Georgios Lyratzopoulos Chhavi Mahajan Niall Mahon Sachini Malaviarachchi Ananya Malhotra Parag Mallick Viviana Mannella Mao Mao julia Markus Laura Marlow Richard Martin Megan Martin  Tanimola Martins Mercè Marzo Spyridoula Massia Parker Mattson Julia Maxson Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Project Manaager Professor of Cancer Epidemiology PhD Student Manchester ACED PhD Student Consultant Clinical Oncologist Research Fellow Associate Professor Translation Manager Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher Research Assistant	University of Glasgow UCL University of Manchester University of Manchester University Hospital Plymouth NHS Trust London School of Hygiene & Tropical Medicine Stanford University Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Georgios Lyratzopoulos Chhavi Mahajan Niall Mahon Sachini Malaviarachchi Ananya Malhotra Parag Mallick Viviana Mannella Mao Mao julia Markus Laura Marlow Richard Martin Megan Martin Tanimola Martins Mercè Marzo Spyridoula Massia Parker Mattson Julia Maxson Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Professor of Cancer Epidemiology PhD Student Manchester ACED PhD Student Consultant Clinical Oncologist Research Fellow Associate Professor Translation Manager Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher	UCL University of Manchester University of Manchester University Hospital Plymouth NHS Trust London School of Hygiene & Tropical Medicine Stanford University Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Chhavi Mahajan Niall Mahon Sachini Malaviarachchi Ananya Malhotra  Parag Mallick Viviana Mannella Mao Mao julia Markus Laura Marlow Richard Martin Megan Martin  Tanimola Martins  Mercè Marzo  Spyridoula Massia  Parker Mattson Julia Maxson  Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	PhD Student Manchester ACED PhD Student Consultant Clinical Oncologist  Research Fellow  Associate Professor Translation Manager Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher  Research Assistant	University of Manchester University of Manchester University Hospital Plymouth NHS Trust London School of Hygiene & Tropical Medicine Stanford University Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Niall Mahon Sachini Malaviarachchi Ananya Malhotra Parag Mallick Viviana Mannella Mao Mao julia Markus Laura Marlow Richard Martin Megan Martin  Tanimola Martins Mercè Marzo Spyridoula Massia Parker Mattson Julia Maxson Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McLoughlin	Manchester ACED PhD Student Consultant Clinical Oncologist  Research Fellow  Associate Professor Translation Manager Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher  Research Assistant	University of Manchester University Hospital Plymouth NHS Trust London School of Hygiene & Tropical Medicine Stanford University Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Sachini Malaviarachchi Ananya Malhotra  Parag Mallick Viviana Mannella Mao Mao julia Markus Laura Marlow Richard Martin Megan Martin  Tanimola Martins  Mercè Marzo  Spyridoula Massia  Parker Mattson Julia Maxson  Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Consultant Clinical Oncologist  Research Fellow  Associate Professor Translation Manager Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher  Research Assistant	University Hospital Plymouth NHS Trust London School of Hygiene & Tropical Medicine Stanford University Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK  University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Ananya Malhotra  Parag Mallick Viviana Mannella Mao Mao julia Markus Laura Marlow Richard Martin Megan Martin  Tanimola Martins  Mercè Marzo  Spyridoula Massia  Parker Mattson Julia Maxson  Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Research Fellow  Associate Professor Translation Manager Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher  Research Assistant	NHS Trust London School of Hygiene & Tropical Medicine Stanford University Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Parag Mallick Viviana Mannella Mao Mao julia Markus Laura Marlow Richard Martin Megan Martin  Tanimola Martins  Mercè Marzo  Spyridoula Massia  Parker Mattson Julia Maxson  Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Associate Professor Translation Manager Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher Research Assistant	Tropical Medicine Stanford University Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Viviana Mannella  Mao Mao julia Markus  Laura Marlow  Richard Martin  Megan Martin  Tanimola Martins  Mercè Marzo  Spyridoula Massia  Parker Mattson Julia Maxson  Joe Mays  Chloe McCoy  Erin McGrattan  Rose McHardy  Kate McLoughlin	Translation Manager  Member  Research Radiographer  Senior Research Fellow  Professor of Clinical Epidemiology  Research Funding Manager (Early Detection Research)  Lecturer in Postgraduate Education Research Fellow  Pfamiy Physician / Researcher  Research Assistant	Cancer Research Horizons Inspire2Live UCL King's College London University of Bristol Cancer Research UK University of Exeter Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Mao julia Markus Laura Marlow Richard Martin Megan Martin Tanimola Martins Mercè Marzo Spyridoula Massia Parker Mattson Julia Maxson Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McLoughlin	Member Research Radiographer Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher Research Assistant	Inspire2Live  UCL  King's College London  University of Bristol  Cancer Research UK  University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol  Early Cancer Institute,
julia Markus Laura Marlow Richard Martin Megan Martin  Tanimola Martins  Mercè Marzo  Spyridoula Massia  Parker Mattson Julia Maxson  Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McLoughlin	Research Radiographer  Senior Research Fellow  Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research)  Lecturer in Postgraduate Education Research Fellow  Pfamiy Physician / Researcher  Research Assistant	UCL King's College London University of Bristol Cancer Research UK University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Laura Marlow Richard Martin Megan Martin  Tanimola Martins  Mercè Marzo  Spyridoula Massia  Parker Mattson Julia Maxson  Joe Mays  Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Senior Research Fellow Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher  Research Assistant	King's College London University of Bristol Cancer Research UK University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Richard Martin  Megan Martin  Tanimola Martins  Mercè Marzo  Spyridoula Massia  Parker Mattson Julia Maxson  Joe Mays  Chloe McCoy  Erin McGrattan  Rose McHardy  Kate McKenzie  Kirstie McLoughlin	Professor of Clinical Epidemiology Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher Research Assistant	University of Bristol Cancer Research UK University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Megan Martin Tanimola Martins Mercè Marzo Spyridoula Massia Parker Mattson Julia Maxson Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Research Funding Manager (Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher Research Assistant	Cancer Research UK  University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Tanimola Martins  Mercè Marzo  Spyridoula Massia  Parker Mattson  Julia Maxson  Joe Mays  Chloe McCoy  Erin McGrattan  Rose McHardy  Kate McKenzie  Kirstie McLoughlin	(Early Detection Research) Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher Research Assistant	University of Exeter  Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Mercè Marzo  Spyridoula Massia  Parker Mattson Julia Maxson  Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Lecturer in Postgraduate Education Research Fellow Pfamiy Physician / Researcher Research Assistant	Catalan Intitut of Health / IDIAP Jordi Gol Early Cancer Institute,
Spyridoula Massia  Parker Mattson Julia Maxson  Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Pfamiy Physician / Researcher Research Assistant	Jordi Gol Early Cancer Institute,
Parker Mattson Julia Maxson  Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin		Early Cancer Institute,
Julia Maxson  Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin		University of Cambridge
Joe Mays Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Professor	OHSU
Chloe McCoy Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	Associate Professor	Knight Cancer Institute, Oregon Health & Science University
Erin McGrattan Rose McHardy Kate McKenzie Kirstie McLoughlin	CRUK GP	Cancer Research UK
Rose McHardy Kate McKenzie Kirstie McLoughlin	PhD student	Queen's University Belfast
Kate McKenzie Kirstie McLoughlin	PhD student	Queen's University Belfast
Kirstie McLoughlin	PhD Student	Dxcover
3	Product	Freenome
Shannon McWeeney	Research Fellow	Cancer Council NSW
	Chief Data Officer, OHSU Knight Cancer Institute	Oregon Health & Science University
Priscilla Meccheri	Student	King's College London
Usha Menon	Professor of Gynaecological Oncology	UCL
Sam Merriel	GP and NIHR Academic Clinical Lecturer	University of Manchester
Zach Miller	ACED Program Manager	OHSU
Gaby Mishev	Global Franchise Head of Early Cancers	Genentech/Roche
Bree Mitchell	Director, Translational Medicine	Natera
Michelle Mitchell	CEO	Cancer Research UK
Emmanouela Mitta	ACED PhD Student	University of Manchester
Suzanne Miyamoto	Research Scientist	UC Davis Cancer Center/U. Wash-SLU
Hisham Mohammed		

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First Name	Last Name	Job Title	Company
Faruk	Mohammed	Cancer Scientist	Ahmadu Bello University
			Zaria, Nigeria/ University of
7	h 4 . h 4:		Sunderland, England UK
Jose	Montoya Mira	Research Engineer	OHSU
Sarah	Moore	PhD student and GP	University of Exeter
Janet	Morgan	Head of Research Information, Communication & Engagement	Cancer Research UK
Eva	Morris	Professor of Health Data Epidemiology	University of Oxford
Sarah	Moseley	Head of Medical Affairs	GRAIL Bio UK Ltd
Ferenc	Mozes	Postdoctoral Researcher	University of Oxford
Toqir	Mukhtar	Advanced Research Fellow	Imperial College London
Eoghan	Mulholland	Research Fellow	University of Oxford
Daniel	Muñoz Espín	Group Leader	Early Cancer Institute, University of Cambridge
Anna	Munsey	Research Assistant	University of Cambridge
Lauren	Murphy	Student	University of Oxford, WIMM
Nima	Nabavizadeh	Director of Early Detection Clinical Research	Oregon Health & Science University
Nancy	Nazmi	VP, Marketing MCED	Exact Sciences
Rachael	Neale	Clinical Trial Manager	GRAIL Bio UK Ltd
Rebecca	Newberry	Associate	Wickenstones
Lisa	Newcomb	Canary PASS Deputy Director	Fred Hutch
Tony	Ng	Head of Comprehensive Cancer Centre	King's College London
Stephanie	Ng	Manchester ACED Project Manager	University of Manchester
Thuy	Ngo	Assistant Professor	Oregon Health and Science University
Brian	Nicholson	Associate Professor	University of Oxford
Claire	Nightingale	Senior research fellow	The University of melbourne
Sisse	Njor	Associate Professor	Vejle Hospital, University Hospital of Southern Denmark, Denmark
Elizabeth	O'Donnell	MD	Dana-Farber Cancer Institute
Callum	Oddy	PhD Student	UCL Cancer Institute
Alex	Oldroyd	Academic Clinical Lecturer	University of Manchester
Samuel	Olson	Research Engineer	Oregon Health and Science University
Aysegul	Ors	Associate Scientist	Oregon Health and Science University
Ruby	Osborn	Senior Research Interpretation Officer	
David	Osuna	Research Fellow	UCL
Chloe	Pacyna	PhD Student	Wellcome Sanger Institute
Yan	Pan	Research Communications and Marketing Executive	Cancer Research UK
Arnaud	Papin	Global Marketing Director, Early Cancer Detection	Merck Inc
Oriana	Papin-Zoghbi	CEO & Co-Founder	AOA Dx
Anbu	Paramasivam	Research Programme Manager	Cancer Research UK
Agapi	Parcharidou	Consultant	Northwick Park Hospital
Steve	Parr	Business Development	Datar Cancer Genetics
Vijay	Parthasarathy	ice President, Product Management	Exact Sciences
Nora	Pashayan	Professor of Applied Cancer Research	UCL

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First Name	Last Name	Job Title	Company
Manali	Patel	Associate Professor, Division of	Stanford University
Steven	Patierno	Oncology Deputy Director, Duke Cancer	Duke University Medical Center
		Institute	
Edward	Patz	Professor in Pharmacology and Cancer Biology	Duke University School of Medicine
Ramasamy	Paulmurugan	Professor of Radiology	Stanford University
Sarah	Pearsom	Trial Management Director	Oncology Clinical Trials Office, University of Oxford
Henriette	Pedersen	Research Associate	University of Manchester
Sofia	Pedersen	PhD	The Francis Crick Institute
Claudia	Peinador-Marin	PhD student	UCL
Flavia	Pennisi	Medical resident	Università Vita Salute San Raffaele
Adam	Pennycuick	Clinical Training Fellow in Medical Oncology	University College London (UCL)
Stephen	Pereira	Professor of Hepatology & Gastroenterology	University College London
Christopher	Peters	Clinical Senior Lecturer	Imperial College London
Freya	Pollington	PhD Student	UCL
Yeuk Pin Gladys	Poon	Postdoc	Department of Oncology
Anne	Powell	Programme Manager	Oxford University
Sarah	Price	Associate Professor	University of Exeter
Phil	Prime	Scientific Features Editor	Cancer Research UK
Shonit	Punwani	Professor of Magnetic Resonance	University College London
Talisia	Quallo	and Cancer Imaging	(UCL) Cancer Research UK
Charles		Research Programme Manager Research Assistant	
	Racz		Stanford University School of Medicine
Laszlo	Radvanyi	President & Scientific Director	Ontario Institute for Cancer Research
Meena	Rafiq	Academic GP / Clinical Research Fellow	UCL
Jiannis	Ragoussis	Professor	McGill University
Eun-Ang	Raiber-Moreau	Global Medical Affairs Leader	Astrazeneca
James	Reading	Group Leader	UCL Cancer Institute
patrick	redmond	Associate Professor in General Practice	RCSI University of Medicine & Health Sciences
Seema	Rego	Clinical Development Director	Exact Sciences
Suzanne	Renwick	Head of Clinical Practice Services	Myeloma UK
Cristina	Renzi	Principal clinical research fellow	Ucl
Katie	Reohr	Registered Nurse	OHSU
Sarah	Reynia	International Medical Affairs Director	Exact Sciences
Andrew	Reynolds	Senior Director Scientist	AstraZeneca
Susan	Richman	Lecturer in Pathology	University of Leeds
Jamil	Rivers	Founder and CEO	The Chrysalis Initiative
Katie	Robb	Professor of Behavioural Science and Health	University of Glasgow
Hilary	Robbins	Scientist, Genomic Epidemiology Branch	International Agency for Research on Cancer
Hanson	Robert	Trial Manager UK-EDI	University of Liverpool
Eleanor	Roberts	ACED PhD Student	University of Manchester

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First Name	Last Name	Job Title	Company
Tom	Rohan	Chairman, Epidemiology and	Albert Einstein College of
7		Population Health	Medicine
Joe	Rojas-Burke	science writer	OHSU Knight Cancer Institute
Stepan	Romanov	PhD Student	University of Manchester
Julia	Ronlov	Strategic Alliances	Knight Cancer Institute/OHSU
Michael	Rosenthal	Assistant Professor of Radiology	Harvard
Amit	Roshan	Group Leader	CRUK Cambridge Institute
Helen	Ross-Adams	Postdoctoral Researcher	Barts Cancer Institute QMUL
Poorwa	Roy	Snr Clinical Development Physician	GRAIL Bio UK Ltd
Helen	Ruane	Senior Research Practitioner	University of Manchester
Mahboobeh	Safaeian	Clinical Development Lead	Roche/Genentech
Nareh	Safieh- Garabedian	PhD student	UCL
Dr Atreyee	Saha	Senior General Manager	Datar Cancer Genetics
Alberto	Saiani	Professor of Molecular Materials	University of Manchester
Daniel	Salem	Director of Early Assay Development	Mercy BioAnalytics
Ruggiero	Santeramo	Post Doctoral Data Scientist	QMUL
Farook	Sarfraz	General Practition & Rapid Diagnosis Clinical Lead	Cardiff and Vale University Local Health Board
Bruce	Schaar	Deputy Director Canary Center	Stanford University
Ninian	Schmeising- Barnes	Research Assistant	King's College London
Anna	Schuh	Professor of Molecular Diagnostics	University of Oxford
Suzanne	Scott	Professor of Health Psychology & Early Cancer Dx	Queen Mary University of London
Hugh	Selway-Clarke	PhD Student	UCL
Lecia	Sequist	Professor of Medicine	Massachusetts General Hospital, Boston, USA
Beth	Shinkins	Professor of Health Economics, Diagnosis and Screening	University of Warwick
Robert	Sidlow	Attending Physician	Memorial Sloan Kettering Cancer Center
Valerie	Sills	Honorary Senior Research Fellow	Queen Mary University
Bruno	Simoes	Research Fellow	University of Manchester
Abigail	Siu	Research Assistant	University of Cambridge
Hayley	Smith	Research Fellow	UCL
Craig	Smith	Student	University of Glasgow Dental School
Robert	Smith	Senior Vice-President, Cancer Screening	American Cancer Society
Rebecca	Smittenaar	Principal Clinical Scientist	GRAIL Bio UK Ltd
Hayley	Snowden	Health Inequalities Programme Manager	West Yorkshire & Harrogate Cancer Alliance
Alex	Sockell	Manager, Oncology and Cancer Research	PacBio
Peter	Sodde	ACED Clinical PhD Student	University of Manchester
Xubo	Song	Professor	Oregon Health and Science University
Jake	Southworth	Clinical Trials Administrator	University of Manchester
Elias		Senior Research Assistant	OHSU
Luas	Spiliotopoulos	Serior Research / Issistant	01100
	Spiliotopoulos Staley	Senior Research Grants Manager	CRUK
Seth Laura			

First Name	Last Name	Job Title	Company
Abish	Stephen	Lecturer	Queen Mary University of
	'		London
Richard	Stephens	Patient advocate	
Maya	Stibbards-Lyle	Graduate Student	University of Calgary
Kate	Stirling	Manchester ACED Project Manager	University of Manchester
Martyn	Stott	Clinical Fellow	University of Liverpool
Siri	Strand	Research engineer	Stanford University
Lucy	Stuart	Senior Research Events Manager	Cancer Research UK
Professor Cathie Sudlow	Sudlow	Chief Scientist and Deputy Director of HDR UK	Health Data Research UK
Sudha	Sundar	Professor & Consultant in Gynaecological Oncology	Sandwell & West Birmingham Hospitals
Hye Youn	Sung	Research Professor	Ewha Womans University
Sapna	Syngal	Professor of Medicine	Harvard
Farbod	Tabesh	Postoctoral researcher	Stanford School of Medicine
Hui Zhen	Tam	Statistcian	QMUL
Yew Chung	Tang	Vice President-Medical Affairs	Mirxes
Kai	Тао	Research Engineer	OHSU-CEDAR
Danny	Temko	Research Associate	MRC Biostatistics Unit
Matthew	Thompson	Clinical Research Scientist	University of Washington
Nathan	Thompson	research associate	University of Strathclyde
Mette Kielsholm	Thomsen	Postdoctoral researcher	Copenhagen University Hospital, Denmark
Joanna	Thomson	CRUK GP and Primary Care Lead for SSCA	CRUK/SSCA
Sock Yue	Thong	AVP, Strategic Partnerships	Mirxes
Pernille	Thordal Larsen	PhD student	University Research Clinic of Cancer Screening, Randers Regional Hospital
Graeme	Thorn	Senior Bioinformatician	Barts Cancer Institute, Queen Mary University of London
Peter	Thye-Ronn	M.D.	Diagnostic Center
Cristian	Tomasetti	Director	Center for Cancer Prevention and Early Detection, City of Hope
lan	Tomlinson	Professor	University of Oxford
Stephanie	Torres	Knight Events Manager	OHSU
Richard	Turkington	Clinical Reader (Medical Oncology)	Patrick G Johnston Centre for Cancer Research
Clare	Turnbull	Professor of Translational Cancer Genetics in the Division of Genetics and Epidemiology	Institute of Cancer Research, London.
Dayem	Ullah	Senior Health Data Science Specialist	Barts Cancer Institute, Queen Mary University of London
Ahsen	Ustaoglu	Postdoctoral Research Associate	Early Cancer Institute
Bhamini	Vadhwana	General surgery registrar	Imperial College London
Dimitris	Vavoulis	Computational Biologist	University of Oxford
Jo	Waller	Professor of Cancer Behavioural Science	Queen Mary University of London
Victoria	Walker	Research Project Manager (Early Detection Research)	Cancer Research UK
Fiona	Walter	Director of the Wolfson Institute of Population Health, Professor of Primary Care Cancer Research	Queen Mary University of London

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First Name	Last Name	Job Title	Company
Jocelyn	Walters	Programme Manager	University of Southampton
Susan	Wan	Clinical Program Manager	GRAIL Bio UK Ltd
Xueke	Wang	Dr	Barts Cancer Institute
Erin	Watson	Research Intelligence Program Manager	OHSU
Caroline	Watson	Group Leader	Early Cancer Institute, University of Cambridge
Alexis	Webb	Research Programme Manager	Cancer Research UK
David	Wedge	Professor of Cancer Genomics and Data Science	University of Manchester
Mairi	Whiston	Early Diagnosis Senior Projects Officer	Myeloma UK
Katie-Lou	White	PhD student	University of Cambridge, Cancer Research UK
Becky	White	PhD student	UCL
Helen	White	Patient advocate	
Emma	Whitfield	PhD student	University College London
Sam	Wilding	Senior Medical Statistician (Scientific Lead)	University of Southampton
Simon	Wilkinson	Principal Investigator	University of Edinburgh
Ashley	Williams	Event Coordinator	Stanford University
Denitza	Williams	Lecturer	Cardiff University
Helen	Wilson	PhD	The University of Manchester
Fiona	Winwick	Research Events Executive	Cancer Research UK
Diana	Withrow	Senior Research Fellow	University of Oxford
Chris	Whitty	Chief Medical Officer for England	The Department of Health and Social Care
Melissa	Wong	Professor, Vice Chair	OHSU
Angela	Wood	Professor of Health Data Science	HDRUK/Cambridge
Emma	Woodward	Senior Lecturer & Consultant Clinical Geneticist	University of Manchester
Stuart	Wright	Research Fellow in Health Economics	University of Manchester
Emma	Wylie	Student	UoM PhD Student
Kati	Young	Senior Product Manager	Natera
Hana	Zahed	PhD student	International Agency for Research on Cancer (IARC/WHO)
Nadine	Zakkak	Research Assistant	University College London
Yin	Zhou	Clinical Senior Research Fellow	University of Cambridge
Hongpeng	Zhou	Research Fellow	University of Manchester

