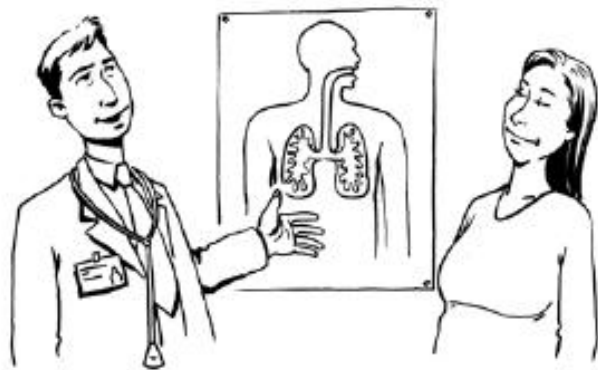
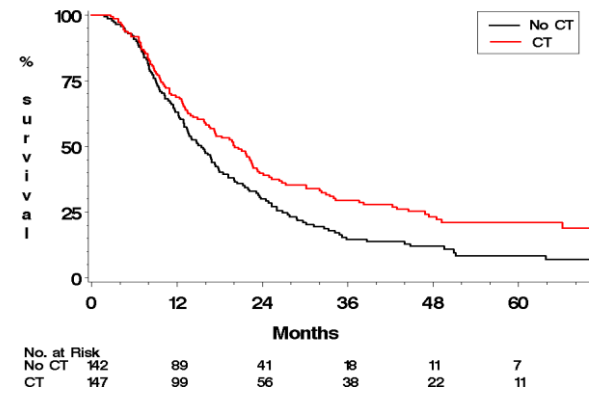


**Use of informatics systems to link laboratory with clinical data and ensure GCP compliance**



**2x2 Factorial: Survival by Adjuvant Chemotherapy**





Sample



Sample and  
clinical data

The value of a sample is dependent on the data attached to it

# Biobank data

When storing or moving

Location

Where can I put it?  
Where did I put it?

Dates and times

When collected?  
When processed?  
When transported?  
When received?  
When stored?

Nature of sample

Protocol for collection

Who?

Who consented, took, processed, stored etc.

History

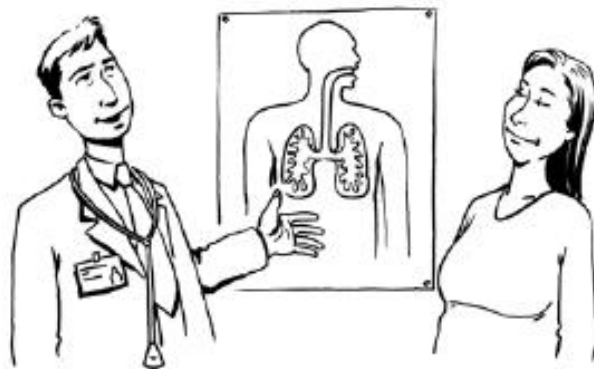
How did it get here?  
What happened since it arrived?  
Adverse events?

Aliquots

What happened to the “children”?

Quantity

How much is there?  
How much was there?



# Regulatory Framework

## Translational work

EU Directives 2001/20/EC and 2005/28/EC  
Passed into UK law as statutory instruments

SI 1031, 1928, 2984, 2031

(EU Clinical trial regulations)

England and Wales Human Tissue Act 2004

Scotland Human Tissue Act 2006

Data protection act (1988)

(EU Data protection regulations)

Mental Capacity Act 2005, Access to Health Records Act 1990,  
Health and Social Care Act 2001, Children Act 2004

# **What is sufficient consent?**

**Patients have the right to approve of what is done to their samples**

**In EXCEPTIONAL circumstance the scope of the research may go beyond the original consent obtained, in which case re-consent should be considered**

**Donors have the right at any time to withdraw provision of samples**

# Biobank data

Need to know at point of use

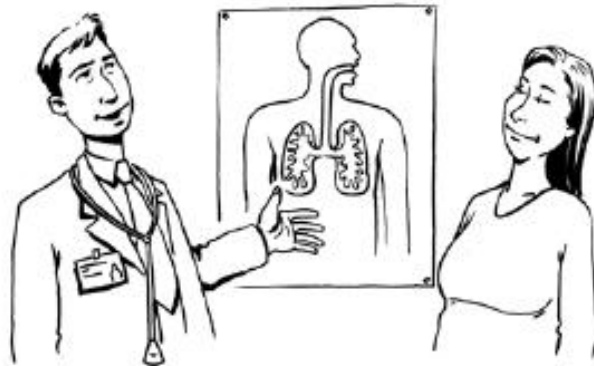
Can you use it? Nature of consent  
Is there enough left?

Should you use it? SOPs  
Adverse events

What data is already linked to the sample? Enough information and no more

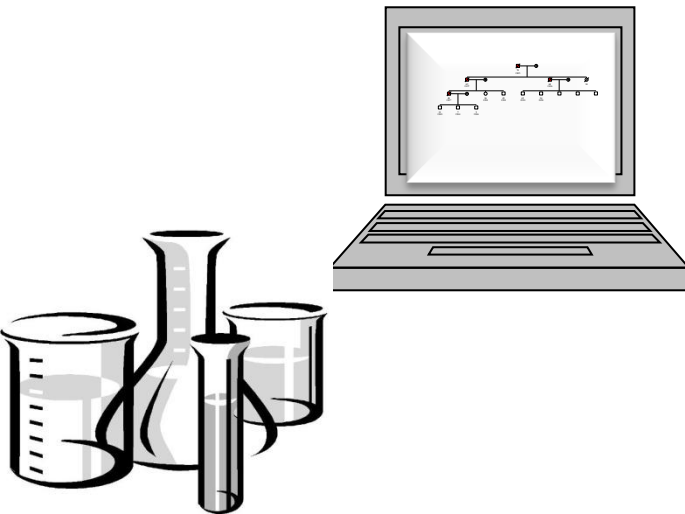
Log an audit of use

Store the data so it is attached to the sample and all related samples  
Increase the value of the sample



# Baseline sample data

Simple descriptive analysis of sample



**Quantitative**

Cell counts

[Protein, DNA, RNA etc]

**Qualitative**

Histochemistry

Cytochemistry

QC Protein, DNA, RNA etc

**Inclusion or exclusion**

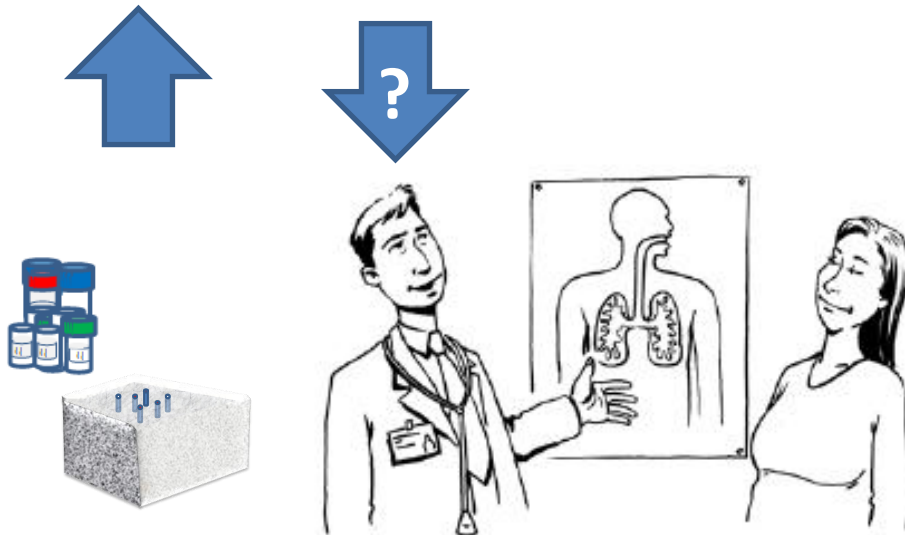
Established biomarkers:  
e.g Pancreatic lipase,  
triglyceride etc.

Somatic genetic markers:  
K-Ras , p53 etc.

Germline genetic markers:  
BRCA2, PRSS1, PSTI

**Outcome and Stratification**

PK and PD







Sample



Sample  
Diagnosis and demographics

# Patient data

Obtained at point of collection

Details of illness

Diagnosis

Aetiology

Stage, Grade etc.

Imaging data

Pathology reports

**BLOBS** or links

BLOBS (Binary Large Objects)

## Advantages:

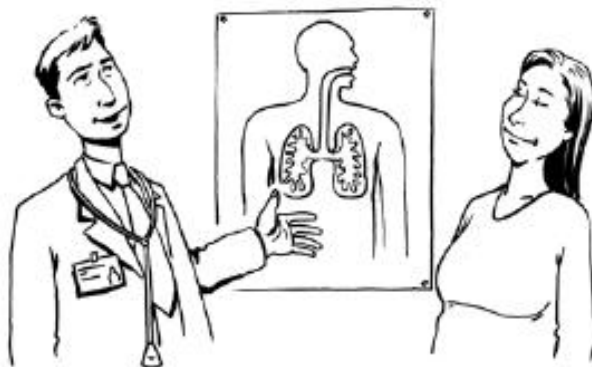
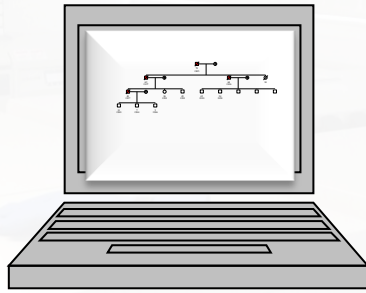
“Pictures don’t lie”

“A picture is worth a thousand words”  
(or a BLOB might actually be 1000 words)

## Disadvantages:

Difficult to search

Very difficult to audit



# Patient data

Obtained at point of collection

Details of illness

Diagnosis

Aetiology

Stage, Grade etc.

Imaging data

Pathology reports

BLOBS or **links**

Links (to another system or cloud)

## Advantages:

Saves a lot of space

Gives flexibility

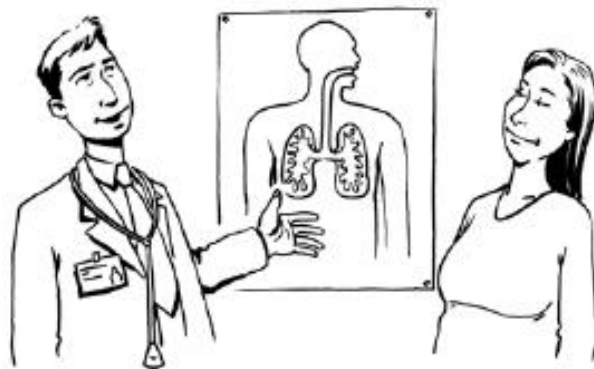
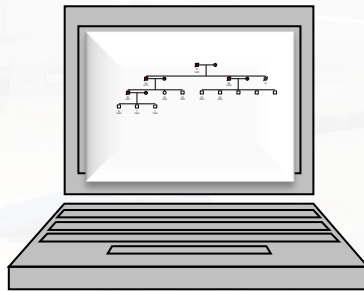
Single hub accessed from multiple spokes

## Disadvantages:

Dramatically reduced control

Data protection issues

Very difficult to audit



# Patient data

Obtained at point of collection

Details of illness

Diagnosis

Aetiology

Stage, Grade etc.

Imaging data

Pathology reports

BLOBS or links

Gender

Male, Female

Orientation?

Age

Year of birth

Date of birth

BMI

Height

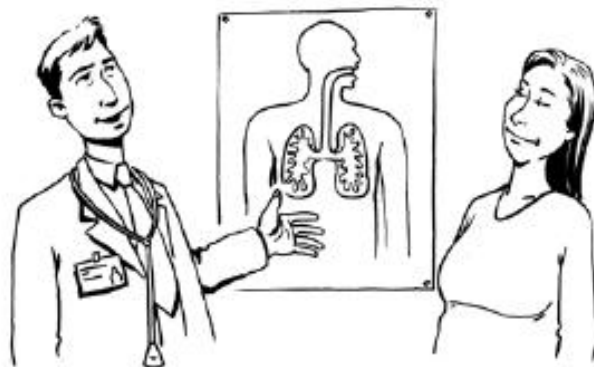
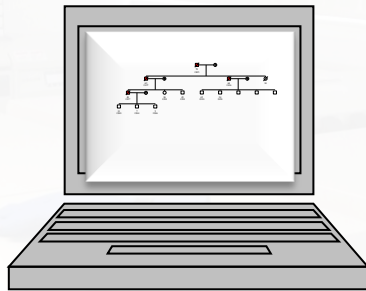
Weight – history?

Family history

Of disease

Of no disease

Family tree



# Polymorphisms

Hi	Lo
----	----

High risk allele: Low risk allele

Breast,  
ovarian,  
prostate



BRCA2 mutation carrier



Breast cancer



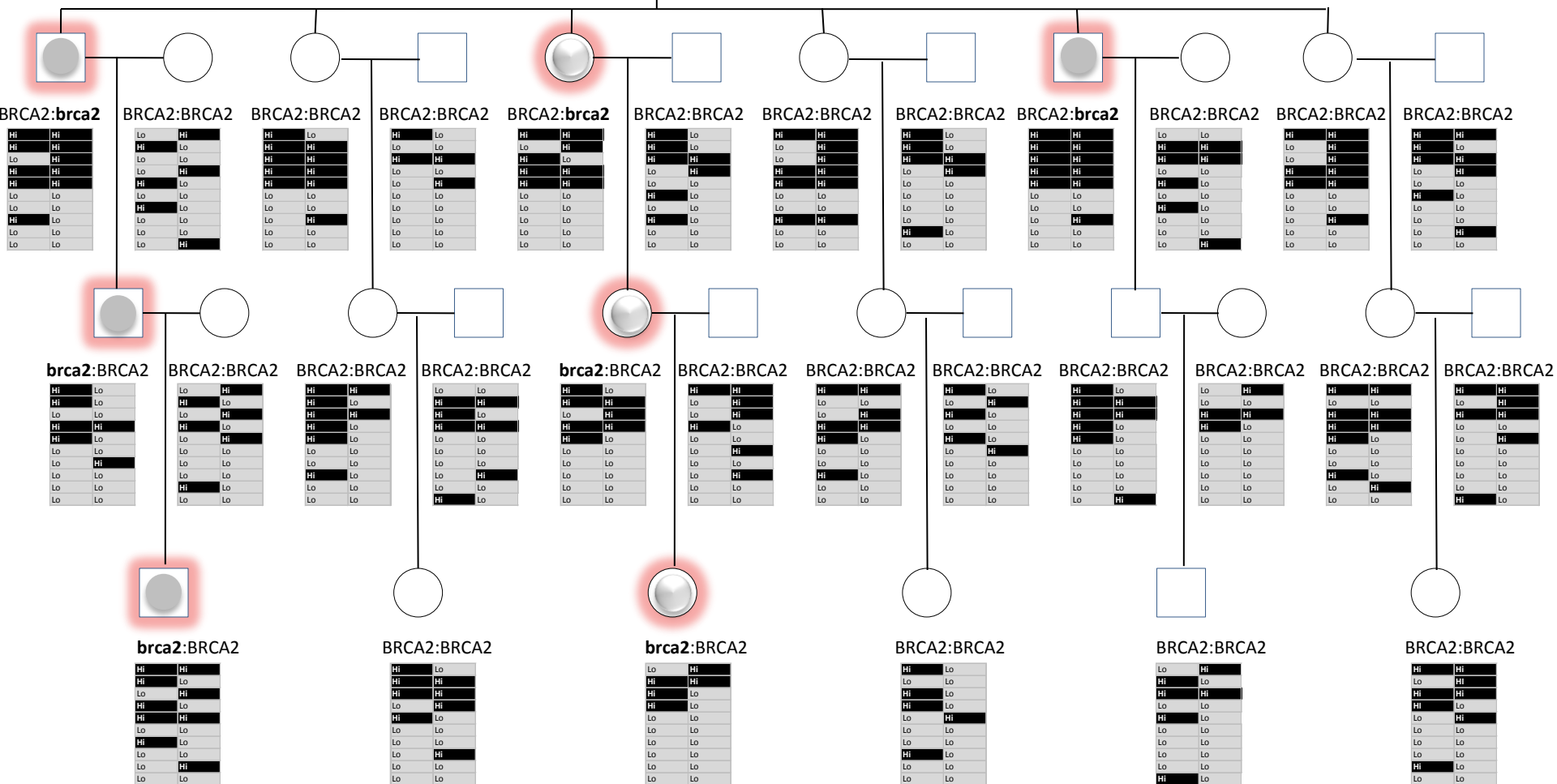
Prostate cancer

BRCA2:BRCA2

Hi	Hi
Hi	Lo
Lo	Hi
Hi	Hi
Lo	Lo
Lo	Lo
Hi	Lo
Lo	Lo
Lo	Lo
Lo	Lo

BRCA2:brca2

Lo	Hi
Hi	Hi
Lo	Hi
Hi	Hi
Lo	Lo
Lo	Lo
Lo	Lo
Lo	Hi
Lo	Lo
Lo	Lo



# Patient data

Obtained at point of collection

Details of illness

Diagnosis

Aetiology

Stage, Grade etc.

Imaging data

Pathology reports

BLOBS or links

Gender

Male, Female

Orientation?

Age

Year of birth

Date of birth

BMI

Height

Weight – history?

Family history

Of disease

Of no disease

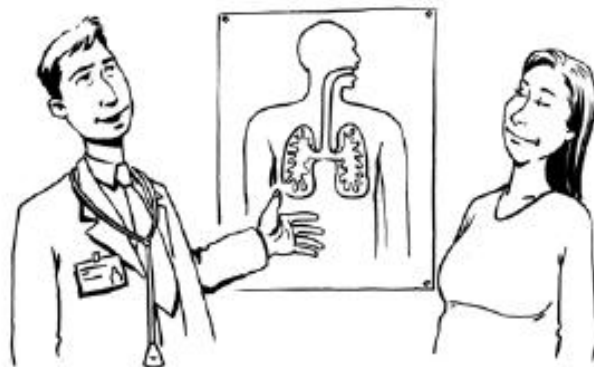
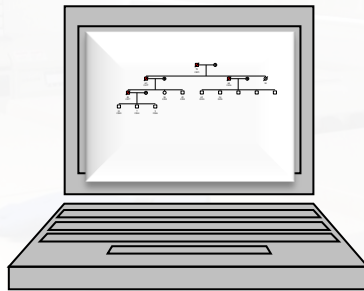
**Family tree**

Advantage:

Contextual data

Disadvantage:

Data protection issues



# Patient data

Obtained at point of collection

Details of illness

Diagnosis

Aetiology

Stage, Grade etc.

Imaging data

Pathology reports

BLOBS or links

Gender

Male, Female

Orientation?

Age

Year of birth

Date of birth

BMI

Height

Weight – history?

Family history

Of disease

Of no disease

Family tree

Lifestyle

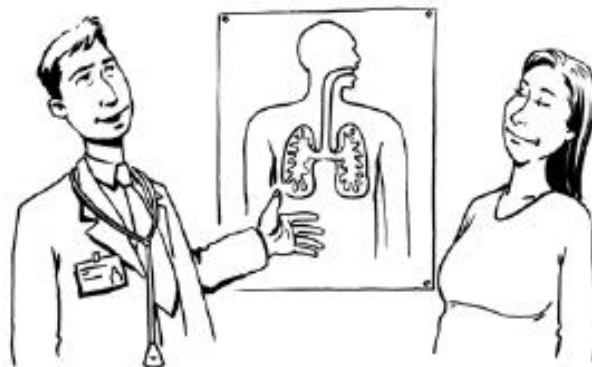
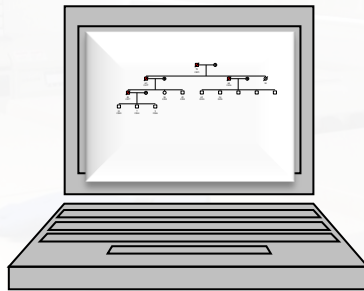
Smoking, alcohol etc.

Exposure

Where do they live?

Ethnicity and race

Culture and genetics



# Discovery data

Omics

**Proteomic**

Tabulated data

Traces and gel images

Array data

(image/values/analysis)

Raw mass spec data

**Metabolomic**

Tabulated

Traces

Raw data

**Transcriptomic**

Tabulated

Array

(image/values/analysis)

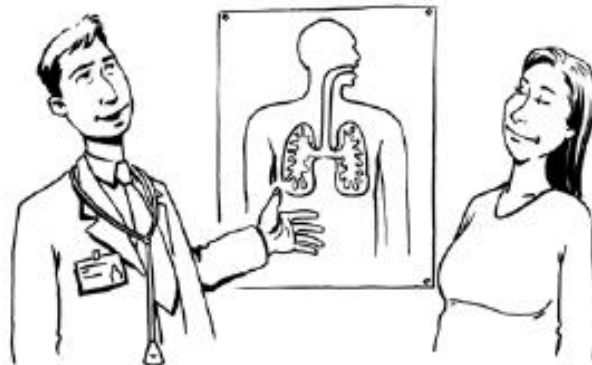
RNASeq raw data or  
analysis

**Genomic**

Exomic

Other targeted

Whole genome



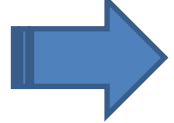


**S v United Kingdom (2009)  
at the European Court of Human Rights**

**Personal information is contained in cellular samples. Their retention without consent interferes with the right to a private life**

**The DNA profile's capacity to provide a means of identifying an individual is in itself sufficient to conclude that their intervention interferes with the right to privacy**

**Retention of samples without consent is a violation of Article 8 of the human rights act.**



# Biomarker data

A protein or group of proteins

ELISA  
Luminex  
IHC (TMAs)

Somatic genetic data or epigenetic

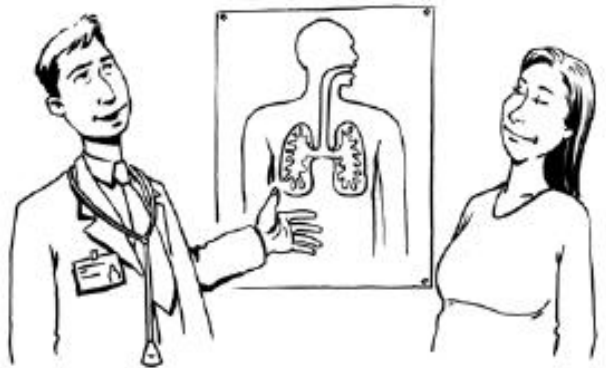
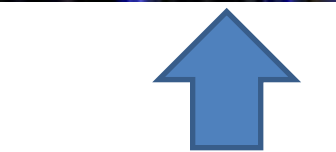
PCR, Sequencing, NGS

Ras mutation  
CDKN2A methylation  
p53 mutation  
BCR-ABL  
Etc.

Germline genetic data

Sequencing, Arrays

SNPs  
BRCA2, MLH1 etc.





Sample



Sample  
Diagnosis and demographics



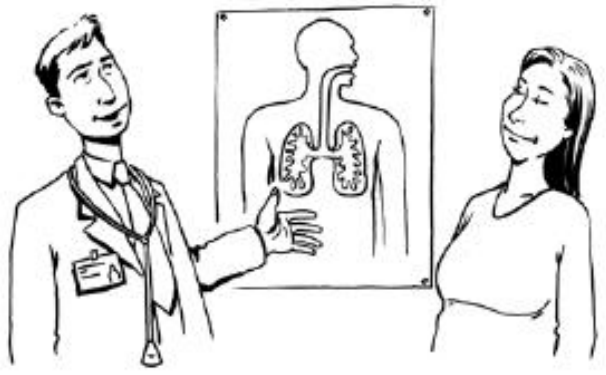
Sample  
Diagnosis and demographics  
Outcomes



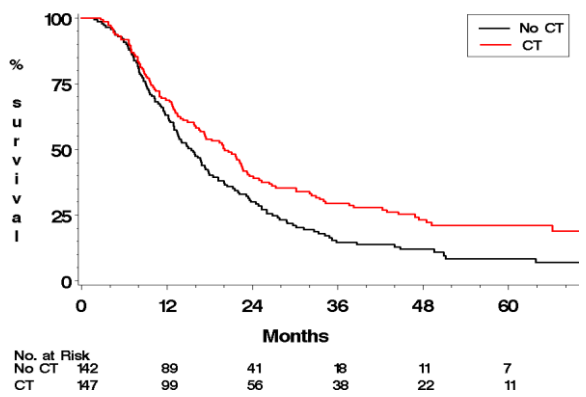
# Trial data

Treatment	As randomised As received
Outcome	Survival (OS, PFS, Event time etc.)
Other	Imaging AE, SUSAR etc

Subsequent follow up data  
(beyond the trial)



2x2 Factorial: Survival by Adjuvant Chemotherapy





Sample



Sample  
Diagnosis and demographics



Sample  
Diagnosis and demographics  
Outcomes



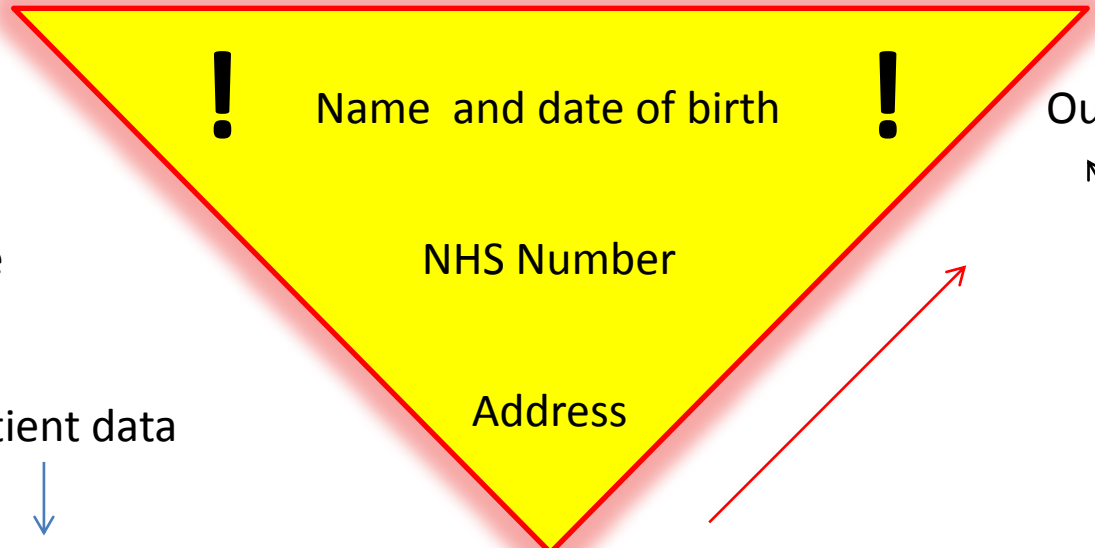
Sample  
Diagnosis and demographics  
Outcomes

+ Existing sample data

# Lab data

# Personal Data

# Trial data



Aliquots



Original sample

Patient data

Sample ID

Lab

Patient ID

Hospital number

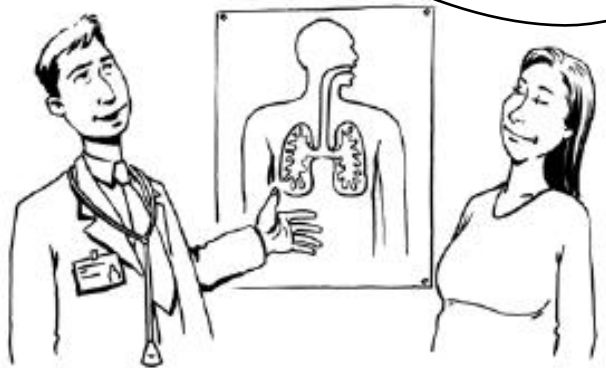
Outcomes

Adverse events

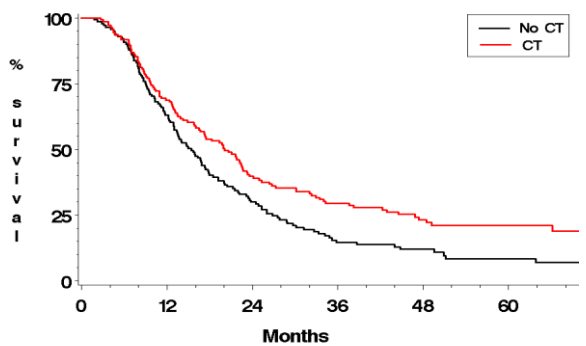
Trial Arm

Trial

Patient ID



2x2 Factorial: Survival by Adjuvant Chemotherapy





Narrative recording

Hypothesis



Aims



Objectives



Plan



Protocol



Results



Conclusion



Narrative recording

Easy to understand, efficient and..... not auditable

Hypothesis



Aims



Objectives



Plan



Protocol



Results



Conclusion



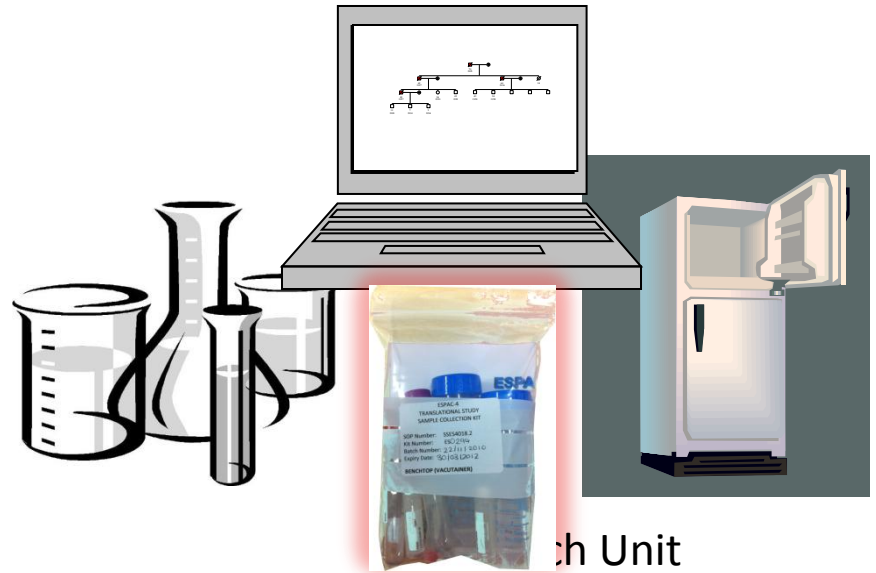


# Clinical trials

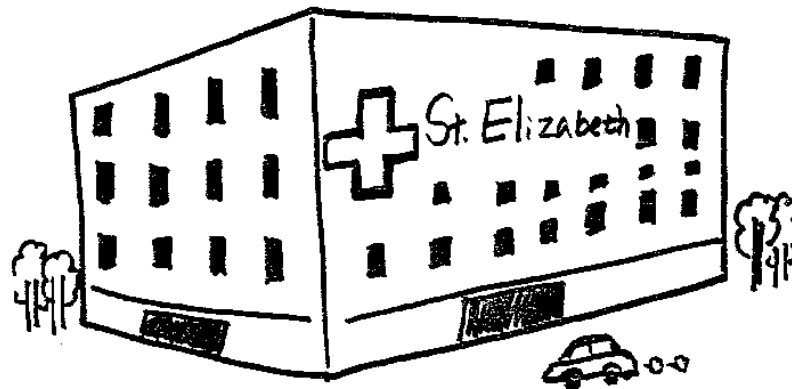


Trials Units

# Translational Research



Research Unit  
GCLP facility




Clinical sites

... Any collaborating site providing samples

# Fax

**To:** \_\_\_\_\_ **From:** \_\_\_\_\_  
**Fax:** 0151 794 8930 **Pages:** 1  
**Phone:** 0151 794 8933 **Date:** \_\_\_\_\_  
**Re:** Plasma Samples **CC:** \_\_\_\_\_

Number & Name	_____
Number of patient	_____

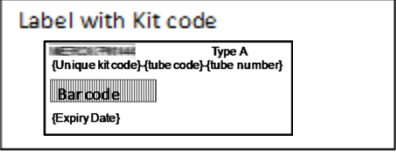
nt In			
nt Di			<b>Type A</b>
le Ti	<b>{Unique kit code}</b>	<b>{tube code}</b>	<b>{tube number}</b>
se tic			
ype	<b>{Expiry Date}</b>		
Ty (Tic			

		(HH:MM)	(hh:mm)	have been placed)
<input type="checkbox"/> Plasma	___/___/___	__:__	__:__	
<input type="checkbox"/> Blood Pellet	___/___/___	__:__	__:__	
<input type="checkbox"/> Serum	___/___/___	__:__	__:__	

Comments

\_\_\_\_\_

## Checklist form Kit A (Baseline)



Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Initial or give times

- Verify that Kit labels all have the same code (checklist form, fax form, all tubes)
- EDTA blood drawn
- Serum blood drawn
- CA19-9 blood drawn
- Time at completion of blood draw (24 hour clock) \_\_\_\_\_:\_\_\_\_\_
- Time when eppendorf and cryotubes placed at -80 degrees/on dry ice (24 hour clock) \_\_\_\_\_:\_\_\_\_\_
- Time when serum was set to spin (24 hour clock) \_\_\_\_\_:\_\_\_\_\_
- Time when CA19-9 blood sent for analysis(24 hour clock) \_\_\_\_\_:\_\_\_\_\_
- Time when cryotubes with serum was placed at -80 degrees/dry ice (24 hour clock) \_\_\_\_\_:\_\_\_\_\_
- If tubes were temporarily stored on dry ice, time for transfer to -80 degree freezer \_\_\_\_\_:\_\_\_\_\_

### Send checklist to

Liverpool Cancer Trials Unit  
Cancer Research Centre  
200 London Road  
Liverpool  
L3 9TA

### Contact Numbers

Tel no: +44 (0) 151 794 8938/8937  
Fax no: +44 (0) 151 794 8930/8931  
Email: [lctu@liv.ac.uk](mailto:lctu@liv.ac.uk)

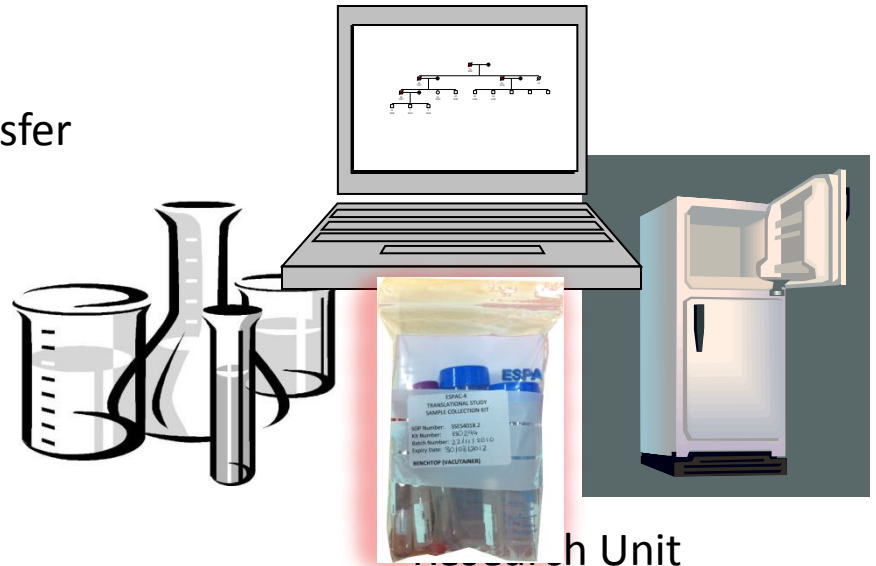
# Clinical trials



Trials Units

Computer system:  
MACRO

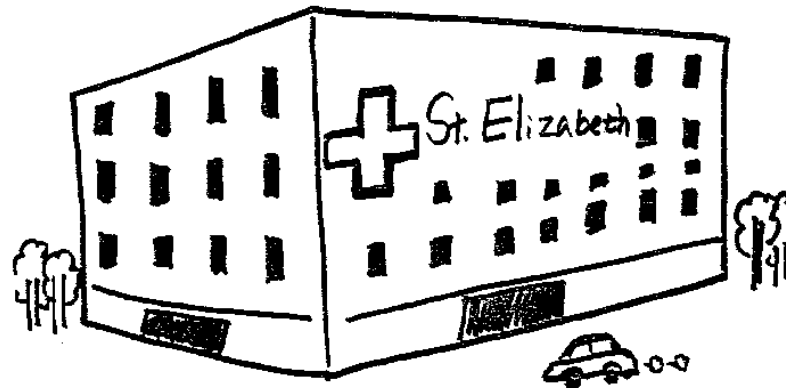
# Translational Research



Research Unit  
GCLP facility

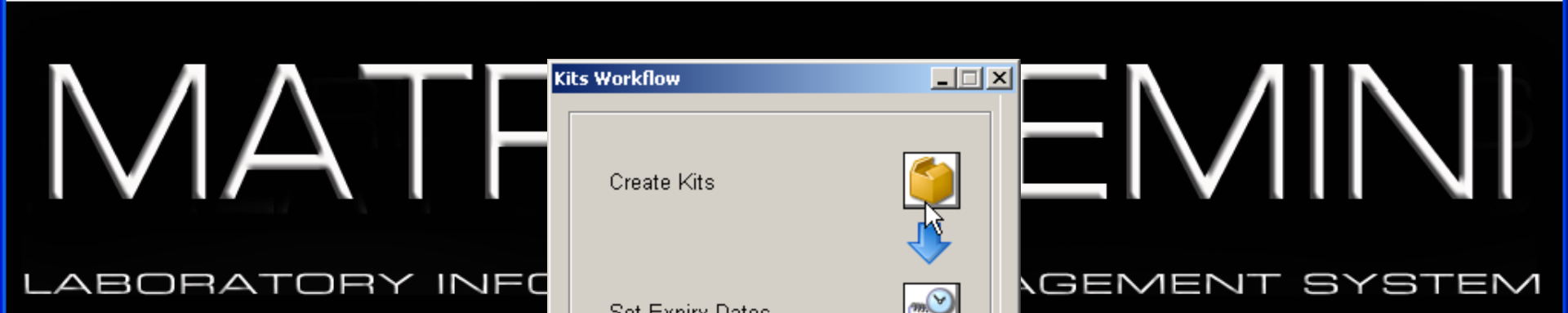
Computer system:  
Matrix LIMS

Coded data transfer



Clinical sites

... Any collaborating site  
providing samples














GCLP F



Medicine Centre

**Kits Workflow** \_ □ ×

- Create Kits 
- ↓ 
- Set Expiry Dates 
- ↓ 
- Print Labels 
- ↓ 
- QC 
- ↓ 
- Dispatch / Store Kits 
- ↓ 
- Close 

### Kits

Kit Types

- eMicroKit
- eMicroKitB
- ePost Kit
- eTissueK
- hHopon
- iltern
- LIVC3-Imp
- mPN144A
- mPN144B
- pPancRota
- pPancRotaE
- pPancRotaJ
- pPancRotaM
- pPancRotaV
- pPangen
- pPBRU-A
- pPBRU-B
- pPBRU-C
- pSecretin
- tPBMC & S**
- tPBMC 96ml
- tPBMCold
- tSerumOn
- tU&BFroz
- tU&BFrozM
- tU&BPost
- tU&BPostL
- uETWO-A
- xUpdatepHT

Key

a*	Any SuAve kit
c*	Any CLL kit (Pacifico)
BenchKit :	Espac - Benchtop Centrifuge Kit
MicroKit :	Espac - Microcentrifuge Kit

Create Kit From Template

View Kit Components

Kit Number:

Description:

---

Kit Created by: BillG

Kit Created on: 26/11/2010

Kit Type: tPBMC & S

Labels Made In:

Trial:

Save

---

Existing Kits

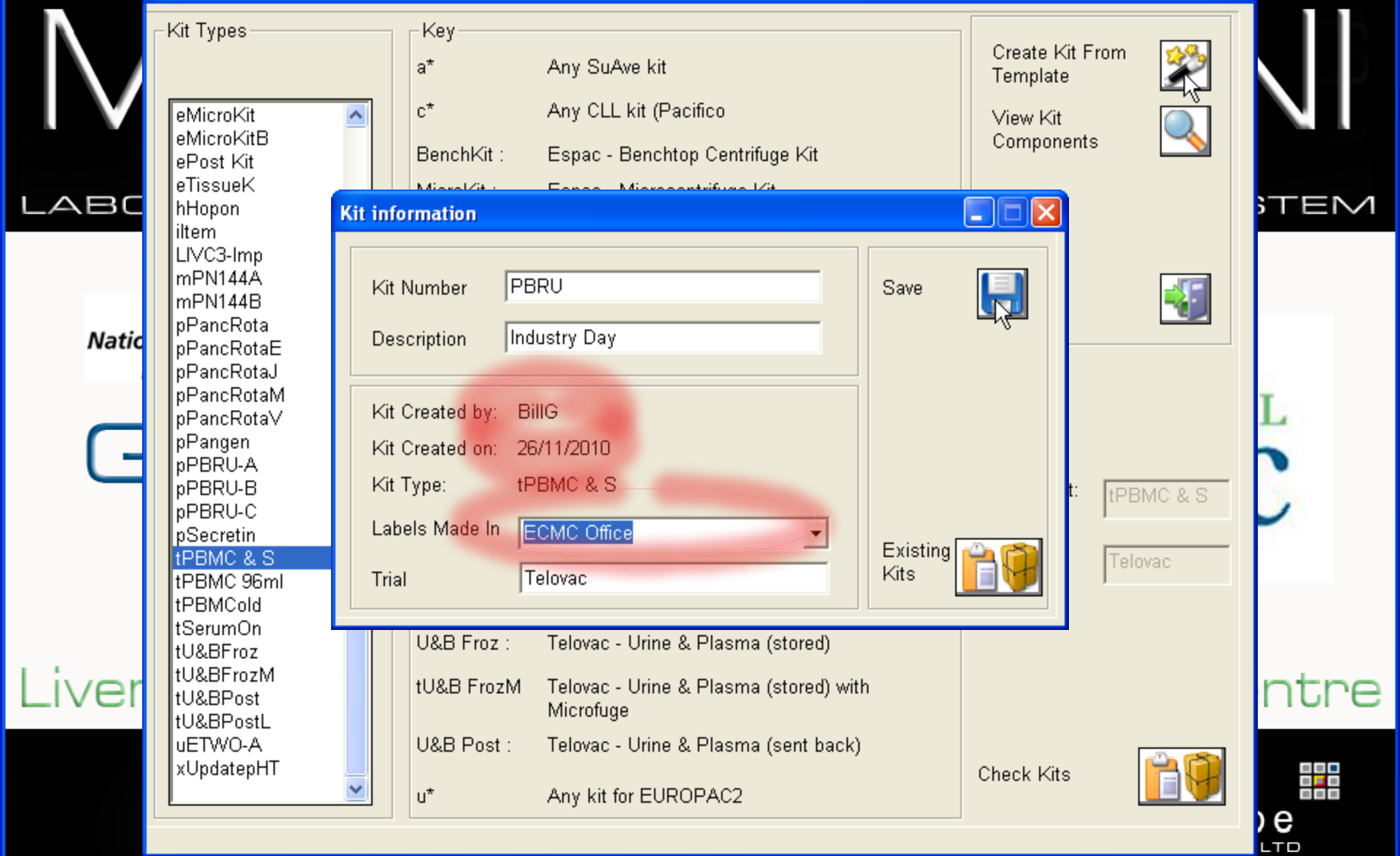
  

U&B Froz :	Telovac - Urine & Plasma (stored)
tU&B FrozM	Telovac - Urine & Plasma (stored) with Microfuge
U&B Post :	Telovac - Urine & Plasma (sent back)
u*	Any kit for EUROPAC2

tPBMC & S

Telovac

Check Kits




### Equipment Expiry Dates


Kit information

Kit code:	KIT10040009	Description:	Telovac kit
Type:	tPBMC & S	Location:	Main GCLP Lab
Number:	Test 13 April	Created By:	BILLG

Equipment items in selected Kit

Code	Equipment	Expiry
SM1004000134	Cryovial	
SM1004000135	Cryovial	
SM1004000136	Cryovial	
SM1004000137	SST Tube	
<b>SM1004000138</b>	<b>CPT Tube</b>	
SM1004000139	CPT Tube	
SM1004000140	CPT Tube	
SM1004000141	CPT Tube	
SM1004000142	CPT Tube	
SM1004000143	Universal Tube	
SM1004000144	Universal Tube	
SM1004000145	Safe Box	
SM1004000146	Sample Information Sheet	
SM1004000147	Fax Sheet	

Set Expiry Date 

Exit 

MA  
LABORAT

INI  
SYSTEM

National Institu  
Health Res

GC

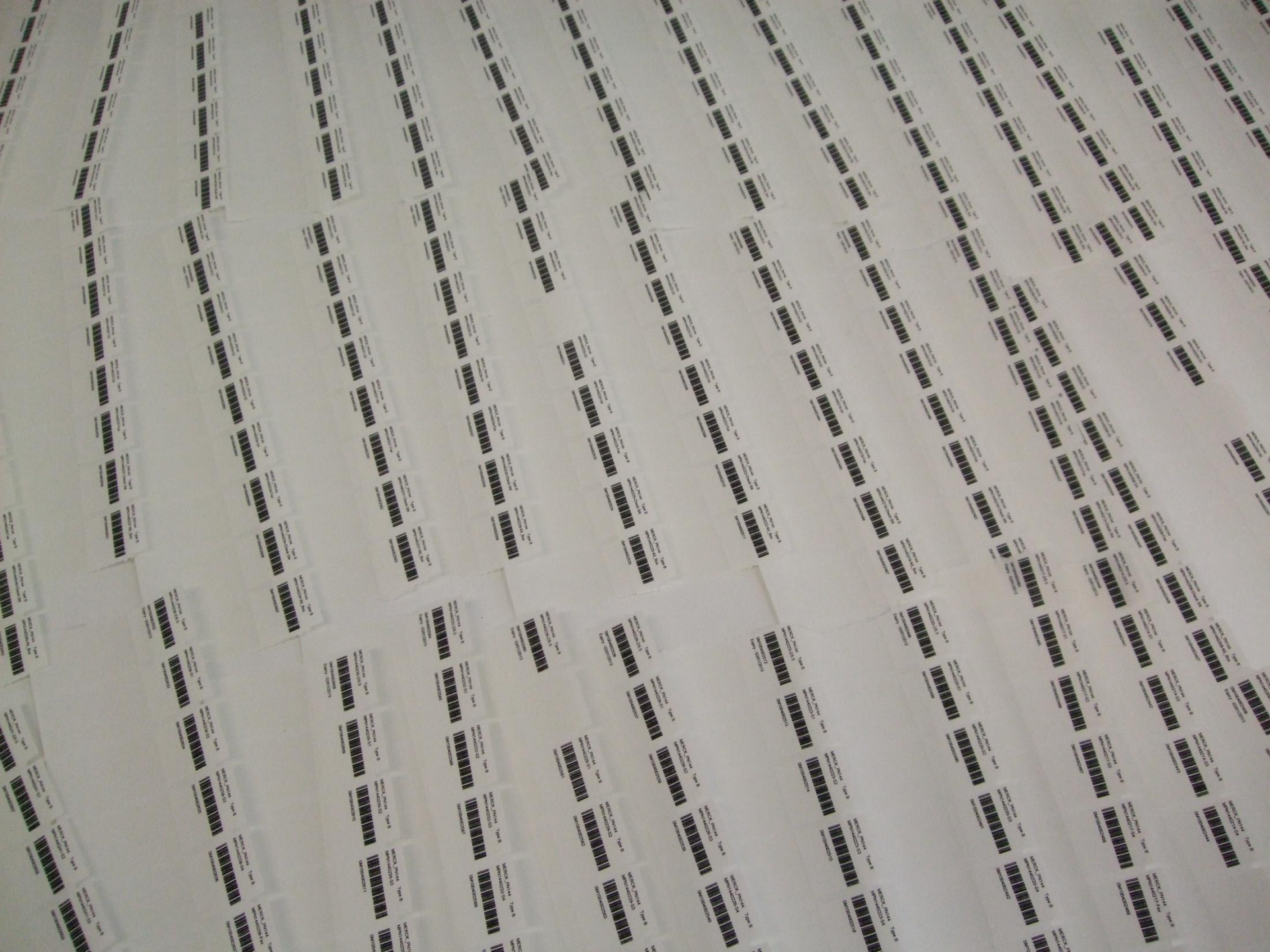
RPOOL  
mc

Liverpool

e Centre

Autoscribe  
LTD





### Kits Workflow

#### Kit QC

**Filters**

Kit type:

Show Kits created after:

**Kit Details**

Kit Code : TEL1326  
Kit ID : KIT10090131  
Type : tPBMC & S  
Status : Created  
Storage Location :  
Expiry Date : 30/06/2011

**Equipment items in selected Kit**

Code	Equipment	QC
SM1009002496	Cryovial	
SM1009002497	Cryovial	
SM1009002498	Cryovial	
SM1009002499	SST Tube	
SM1009002500	CPT Tube	
SM1009002501	CPT Tube	
SM1009002502	CPT Tube	
SM1009002503	CPT Tube	
SM1009002504	CPT Tube	
SM1009002505	Universal Tube	
SM1009002506	Universal Tube	
SM1009002507	Postage Box	
SM1009002508	Smple Info Sht	
SM1009002509	Fax Sheet	
SM1009002510	LCTU Sheet	

**Kits**

Kit Code	Type	Status	Location
SUA0019	aSUAVE	Created	GCLP Equipment
SUA0020	aSUAVE	Created	GCLP Equipment
SUA0021	aSUAVE	Created	GCLP Equipment
SUA0022	aSUAVE	Created	GCLP Equipment
SUA0023	aSUAVE	Created	GCLP Equipment
SUA0024	aSUAVE	Created	GCLP Equipment
TEL1326	tPBMC & S	Created	GCLP Equipment
TEL1369	tU&BFroz	Created	GCLP Equipment
TEL1408	tU&BFrozM	Created	GCLP Equipment
TEL1414	tSerumOn	Created	GCLP Equipment
TEL1415	tSerumOn	Created	GCLP Equipment
TEL1416	tSerumOn	Created	GCLP Equipment
TEL1417	tSerumOn	Created	GCLP Equipment

**Refresh**

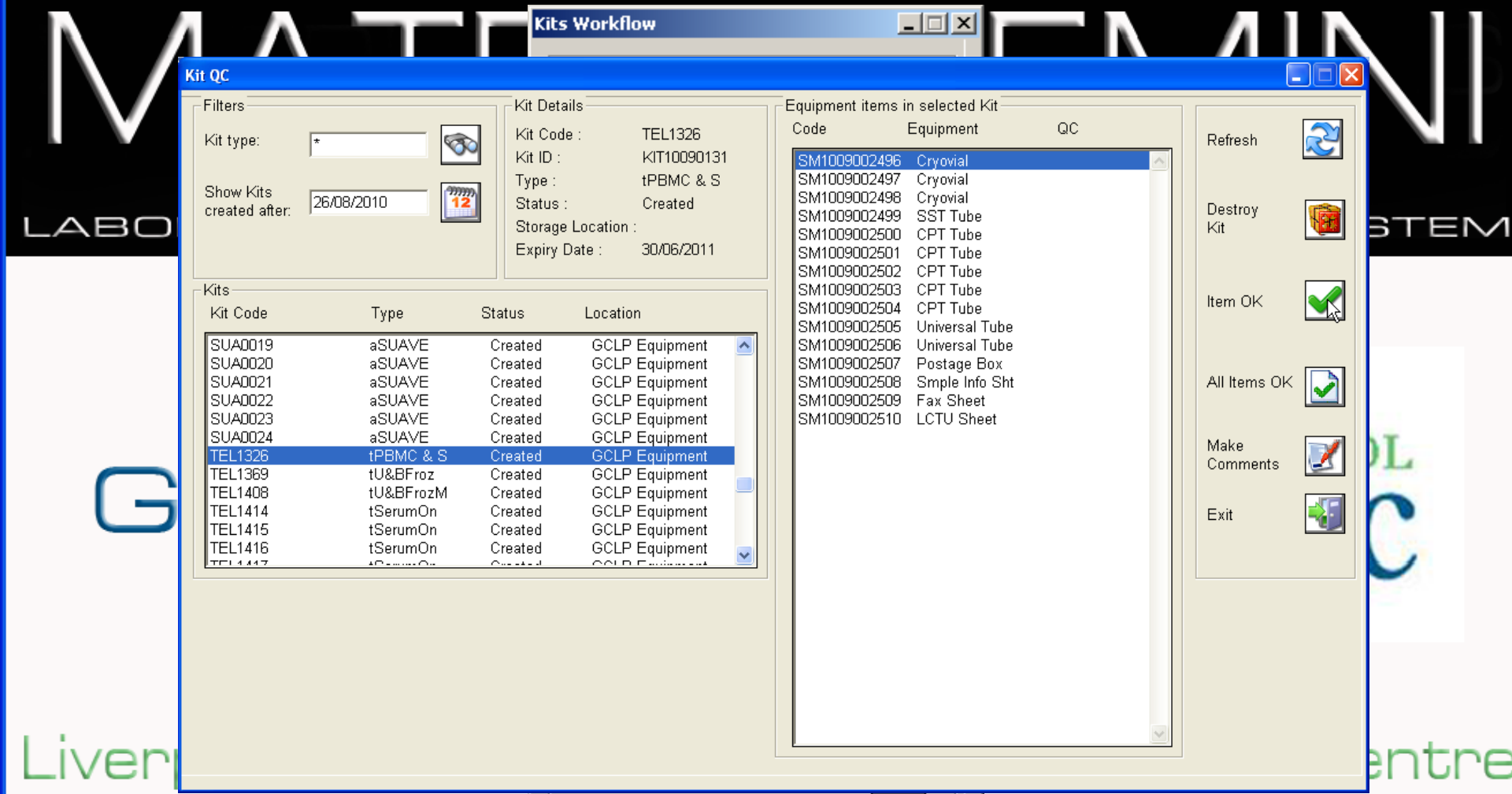
**Destroy Kit**

**Item OK**

**All Items OK**

**Make Comments**

**Exit**



### Kits Workflow

#### Kit QC

**Filters**

Kit type:

Show Kits created after:

**Kit Details**

Kit Code : Tel2

Kit ID : KIT10110079

Type : tPBMC & S

Status : Created

Storage Location :

Expiry Date : 25/11/2011

**Equipment items in selected Kit**

Code	Equipment	QC
SM1011001237	Cryovial	22/11/2010
SM1011001238	Cryovial	22/11/2010
SM1011001239	Cryovial	22/11/2010
SM1011001240	SST Tube	22/11/2010
SM1011001241	CPT Tube	22/11/2010
SM1011001242	CPT Tube	22/11/2010
SM1011001243	CPT Tube	22/11/2010
SM1011001244	CPT Tube	22/11/2010
SM1011001245	CPT Tube	22/11/2010
SM1011001246	Universal Tube	22/11/2010
SM1011001247	Universal Tube	22/11/2010
SM1011001248	Postage Box	22/11/2010
SM1011001249	Smple Info Sht	22/11/2010
SM1011001250	Fax Sheet	22/11/2010
SM1011001251	LCTU Sheet	22/11/2010

**Kits**

Kit Code	Type	Status	Location
Tel2	tPBMC & S	Created	ECMC Office

Refresh

Destroy Kit

Item OK

All Items OK

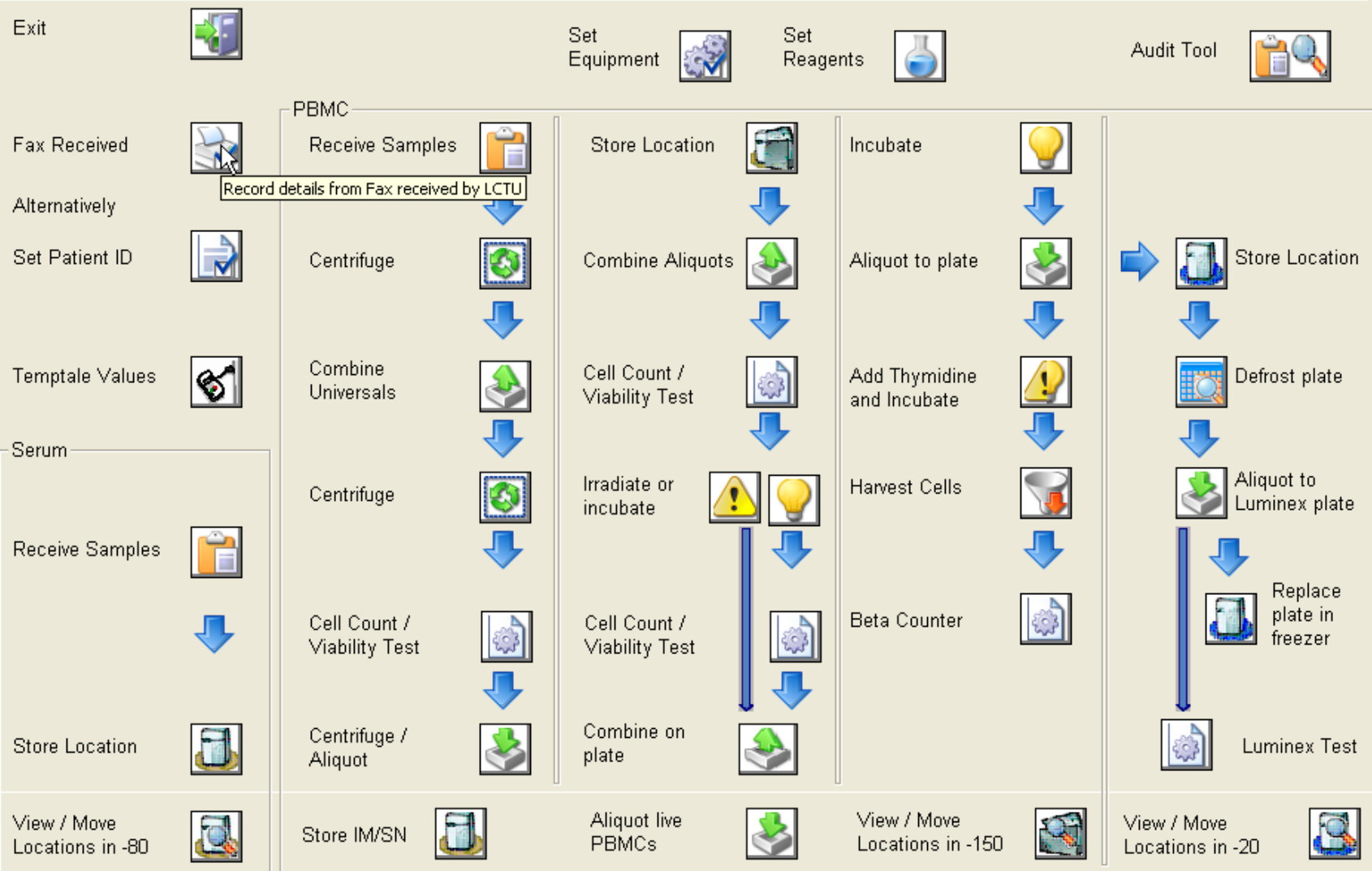
Make Comments

Exit

Live

entre

# TELOVAC PBMC & SERUM






### Sample Life Cycle


#### Storage Location


Sample Code : SM1011001809  
Patient ID Code : Fred  
Parent Sample : SM1011001805

Freezer: Freezer 7 (-150)  
Tower: B  
Box: 3


Position:  
A1  
A2  
A3  
A4  
A5  
A6  
A7  
A8

Ok   
Cancel   
Magic Button 

Print Labels (Single Select) 

Temp Store (Multi Select) 

Final Location 

Exit 

Delete Sample 

Store Location 

Defrost plate 

Aliquot to Luminex plate 

Replace plate in freezer 

Luminex Test 



PLEASE SWITCH MONITOR OFF WHEN NOT IN USE



# Conclusion

Samples gain value because of the link to the patient (a person)

Properly informed patient consent is essential and must be verifiable

Patients have the right to privacy

Laboratory data should be acquired empirically  
Blinded as far as possible to related clinical data

Potential bias should be identifiable from an easily achievable audit

Regulators (e.g. MHRA) are tasked with ensuring that is achieved

Computer systems can be used to provide a sequential audit trail rather than a narrative



I'd like to discuss Somerset and Edge if I can find a way to cut down the rest of the talk