First steps on the Belgian scene

KickCancer is working on several projects in Belgium to make the lives of clinical oncologists and to raise awareness on paediatric cancers.

The first project is linked to what they call in the medical jargon “off-label” drugs.

When a drug is authorised, this authorisation relates to a specific use: a given disease, a specific formulation (pill, syrup, etc.) and a determined dosage (“on-label”). When these medicines are used for another indication, or according to different dosage for another disease, the medicines are then called “off-label”. In paediatric oncology, many drugs given to children are prescribed off-label. Their use has been tested through valid clinical trials, and the safety and effectiveness of these drugs are demonstrated. Nevertheless, the company that produces these medicines did not ask for an official authorisation for this new indication.

These medicines used off-label however are included in international protocols and are regarded as the “standard of care” the best care for a given disease of cancer. A medicine prescribed off-label is not necessarily reimbursed in Belgium. As a result, several doctors have complained that the protocols are not reimbursed by the healthcare system. Despite all the procedures to put in place to try to get these protocols reimbursed, the administration of the foundation and participates in everything seemed naturally perfect. She also manages countless number of tasks for us.

Adeline Godefroid, wonder collaborator. Adeline has supervised the organisation of RUN TO KICK with an out of this world experience for families who had a child with cancer.

Contact us: info@kickcancer.org

www.kickcancer.org

To make a donation

Fondation King Baudouin — KiCa Fund

BE02 0000 0000 0404

Contact us: info@kickcancer.org

www.kickcancer.org

KickCancer is growing!

Two stars simultaneously joined our team in June 2018:

Céline Ghins, new administrator. She looks after KickCancer’s data for example, by providing an amazing Kicks Corner for the RUN TO KICK race. Truth be told, she also manages countless number of tasks for us.

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Hello!

KickCancer will soon celebrate its second birthday. Our foundation has firmly settled its activities in the Belgian and European landscapes... and thereafter, annually. The project will end in 2022.

The time has come now to share our greatest achievements and plans with you! After all, we are in December, aren’t we? Let’s take this opportunity to share our season’s greetings and wish you a kicking New Year 2019!

Here at KickCancer, no one suffers from the vitamin D deficiency syndrome in the winter. We are hitting the ground until the end of 2018 and we are off to a flying start for 2019. Thank you for giving us wings and we hope that we can count on your support again next year!

A few key metrics

- More than 1.5 million euros raised over two years
- 5 research projects financed for 743,000 euros and a 6th one currently being finalised for 100,000 euros
- 680 registered runners at RUN TO KICK, who requested the generosity of nearly 4,000 donors
- 12 articles in the print media, 4 radio broadcasts and 3 television appearances
- 7 people who contribute as employees, freelances or volunteers to the success of KickCancer (and soon some new recruits...)

Participation in 12 international conferences on research or improvement of access to treatments

KickCancer is pursuing its two-lines strategy in order to improve its means of financing of research projects and soft power or the influence it has, for the benefit of the patients in order to contribute to the improvement of these treatments.

Our research projects

Next steps: The trial is structured in two phases; the first one will bring a first batch of results and will end in the year 2019- early 2020. This first report will be drafted at the end of the first year of the study, and then after every third year, annually. The final results of the trial will be available during the first quarter of 2020, or five years after the opening of the study, which allows for a two year’s follow-up of the first patient included in the study.

A project to improve our understanding of the resistance mechanisms of high-risk cancers: 200,000 euros over 4 years

In the event of inefficacy of so-called “first-line” standard treatment, the orientation towards new therapeutic approaches and the understanding of the resistance mechanisms must be based on an in-depth analysis of the interactions between the tumour and the patient.

This project aims at allowing a full molecular analysis of the tumour upon diagnosis for the children and adolescents with a high-risk cancer, thanks to advanced technologies, including high-detail sequencing. For this purpose, national classification method with uniform risk groups in order to improve patient treatments on the basis of their risk group.

First results: two subgroups of patients have already changed risk category. Specifically, in the new treatment protocol, a first category of children was transferred from the “high risk” to the “standard” risk group, which justified the use of lightier treatments in the hope of reducing the burden of side-effects caused by the treatment. On the other hand, a second category of patients was transferred to a therapeutic modality of higher intensity, in the hope of improving their survival chances.

Status and next steps: there will be two interim reports published in April 2019 and 2020; a final report on the projects is expected in the Spring of 2021.

A clinical trial for solid or relapsed tumours: 150,000 euros over 3 years

The clinical trial will test the combination of three classical chemotherapies: vincristine, doxorubicine and cyclophosphamide, with a TJD-1 check-point inhibitor. This trial allows children to benefit from immunotherapy.

The clinical trial will take place in six French hospitals and in Belgium, in the university hospital of Ghent. It will be open to patients with a solid tumour who do not respond to standard treatment who are in relapse.

Latest developments: The project has been approved by the French ethics committee and will start recruiting patients in the French centres before the end of 2018. The trial in Belgium will open in the course of 2019.

Two projects ITCC: 300,000 euros over 1 year

These two projects were selected in collaboration with the ITCC through an open call for projects.

Status update: both projects started in October 2018 and will last 12 months. The final activity report will be issued in December 2018.

Project on liquid biopsies

For children with rhabdomyosarcoma, assessing response during the treatment and follow-up, researchers can learn more about the success of the treatment (such as clinical trials), the results of this analysis will enable them to refine our understanding of the response (or lack of response to treatment) to refine our understanding of the response to treatment.

This study aims to validate the usefulness of the concept of correlation between the amount of rhabdomyosarcoma specific DNA found in the blood and the quality of the response of said patients to their treatment. In practice, if a correlation is established, blood samples (including the circulating DNA of the tumour cells) should be collected at regular intervals and then keep track of the modifications of these molecular profiles. The collected molecular information is complemented with the clinical results of patients (response or lack of response to treatment) to refine our understanding of the treatment.

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A better cure for an incurable brain tumour

Brain tumours are the main causes of mortality and morbidity of children, adolescents and young adults. Gliomas are the most frequent and the most fatal kind, among which diffuse intrinsic pontine gliomas (DIPG) by scrutinising their differences at the epigenetic level. Epigenetics study the expression or regulation of the genes; it focuses on the sequences of the gene not on the DNA sequence level. Epigenetics study the expression or regulation of these genes.

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Status update: the recruitment of the first patients started in December 2018, and the study will last 12 months. The final activity report will be issued in December 2019.

A coordination unit for clinical trials in Belgium: 100,000 euros per year

Most clinical trials are coordinated at a European level in paediatric oncology; however, each participating country must have the clinical trial approved at its national level and for so-called “academic” trials (which are not funded by a pharmaceutical company), seek its own funding.

The Belgian Paediatric Oncology Association (BSPHO) currently does not have enough internal resources to sustainably support its efforts to participate in all European clinical trials. KickCancer is committed to allocating the first €100,000 per year during the RUN TO KICK race to finance the first stones of this coordination cell.

The aim of this cell is to enable the Belgian centres to coordinate their research activities in order to make them more impact and improve the care provided to Belgian patients.

First steps: In conjunction with the King Baudouin Foundation and the King Baudouin Foundation ITCC through an open call for projects.

Long-term development: In the longer run, KickCancer will provide BSOHO with the infrastructure necessary to enable physicians to prepare their trials that don’t encroaching on their clinical or research time.

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