



GLOBAL ACTION PLAN 1 GLOBAL PROSTATE CANCER  
BIOMARKER INITIATIVE

## GAP1 INFO SHEET

### WHAT'S IT ALL ABOUT?

Developing better tests that more accurately distinguish between low-risk and aggressive forms of prostate cancer by examining biomarkers in blood, urine and tissue. This will allow for a more personalized approach to treating patients based on their type of cancer.

### AND THERE ARE TWO OTHER GAP1 PROJECTS...

#### GAP1 GLOBAL PROSTATE CANCER UNIQUE TISSUE MICROARRAY (TMA) INITIATIVE

A global team of oncologists, urologists, pathologists and researchers will pool their resources for the first time to construct unique and high quality Tissue Microarrays (TMAs) – a tool that allows hundreds of tissue samples from men with prostate cancer to be examined together to identify biomarkers that distinguish between primary prostate cancer and metastatic cancer (cancer which has spread beyond the prostate) with the view to improving treatment response.

### HOW WILL THIS HELP MEN?

The ultimate long term goal is that every man diagnosed with prostate cancer would be tested for a series of biomarkers that will better predict the aggressiveness of their disease and that patients would then receive a tailored treatment plan that best suits their specific cancer.

### WHAT'S HAPPENING NOW?

The projects are in their second year of implementation and are tracking well against agreed milestones. Some preliminary results starting to come out of the project are very exciting...

### YEAH BUT WHAT'S A BIOMARKER?

It's a measurable indicator of disease and can be a powerful way of measuring how serious/aggressive a particular cancer is.

There are five global biomarker projects being looked at:

- Circulating Tumour Cells
- Serum (blood)
- Exosomes
- Tissue
- Urine

#### GAP1 GLOBAL PROSTATE CANCER XENOGRAFT INITIATIVE

##### WHAT'S A XENOGRAFT?

A patient-derived xenograft is cancer tissue that has been taken from a patient and implanted into a mouse. By doing this, researchers are able to see how the cancer tissue develops in the mouse over time and use this as a model that 'mimics' the disease in humans to better predict a patient's response to different treatments.

In this project, hundreds of patient-derived xenograft tissues from labs around the world will be consolidated into a single resource. This is the first time that the global prostate cancer community has collaborated and shared these precious tissue samples. This resource will ultimately be used to identify biomarkers that better predict treatment response in men with prostate cancer with a view to optimizing individual patient treatment regimes.

### FIND OUT MORE ON THE REPORT CARDS: GAP1 BIOMARKERS GAP1 XENOGRAFT GAP1 UNIQUE TMAS

# AUD 9.1 MILLION

ACROSS ALL SEVEN GAP1 PROJECTS

### WHO'S INVOLVED?

All GAP1 projects are governed and advised by the Movember Foundation GAP1 Research Advisory Committee (RAC).

### GAP1 UNIQUE TMA:

20 Principal Investigators (each working with a team of researchers) across 4 countries - Canada, Finland, Norway and USA.

### GAP1 XENOGRAFT:

16 researchers across 7 countries – Australia, Austria, Canada, Netherlands, Switzerland, UK and USA.

### GAP1 BIOMARKERS:

50 research Principal Investigators (each working with a team of researchers) in 14 countries: Australia, Belgium, Canada, Finland, Germany, Ireland, Netherlands, New Zealand, Norway, Sweden, Spain, Switzerland, UK and USA

### WHAT'S TO COME?

GAP1 CTCs and Exosomes projects are due to be completed by mid-2015

GAP1 Serum and Urine biomarker projects are scheduled to be completed by December 2015.

The GAP1 Tissue, Xenografts and Unique TMAs teams are well underway and are scheduled to be completed in 2016.

**PV SAYS: "AS A RARE CANCER, THE ISSUE OF MEN WHO NOT ONLY FACE A DIAGNOSIS OF TESTICULAR CANCER, BUT FOR WHOM THE CANCER RETURNS CAN ONLY BE ADDRESSED BY GLOBAL EFFORTS. THE MOVEMBER FOUNDATION'S UNIQUE GLOBAL POSITION AND FUNDRAISING EFFORTS ARE PERFECTLY PLACED TO HELP THESE MEN BY CONNECTING RESEARCHERS ACROSS THE GLOBE TO WORK TOGETHER TO BETTER UNDERSTAND THE PROBLEM OF RECURRING TESTICULAR CANCER."**