

Issue 32 Autumn 2015

search

For supporters of The Institute of Cancer Research



Discoveries in melanoma

Families drive new research into teenage cancer

Spotlight on our scientists

Our mission is to make the discoveries that defeat cancer.

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Editorial

As part of my job, I am lucky enough to meet some very inspirational people – our scientists who relentlessly strive to make the discoveries that defeat cancer, patients who show such strength and courage, and you, our supporters, who never cease to amaze me with your generosity and commitment to our cause.



Without the help of people like you, we would not be able to make the abundance of discoveries that you can read about in this issue. And so for that, I really must thank you very much indeed.

Fundraising is critical for the ICR, both for ensuring our financial sustainability and for allowing us to advance our science. So we are reliant on the good will of our donors and supporters who all play a part in helping us to make the discoveries that defeat cancer.

Recently, charity fundraising practices have featured heavily in the media and I wanted to reassure you that we follow the strict guidelines of both the Fundraising Standards Board and the Institute of Fundraising. We take our responsibility as fundraisers extremely seriously and we are deeply respectful of our donors and their data. We do not share or sell any data and we are happy to remove anyone from our lists immediately they ask us to do so.

My team and I are all passionate about upholding the very best standards in fundraising and donor care. I hope you will enjoy this issue of Search and many more in the future, as we all work together to give hope to cancer patients.

Lara Jukes

Director of Development
The Institute of Cancer Research, London

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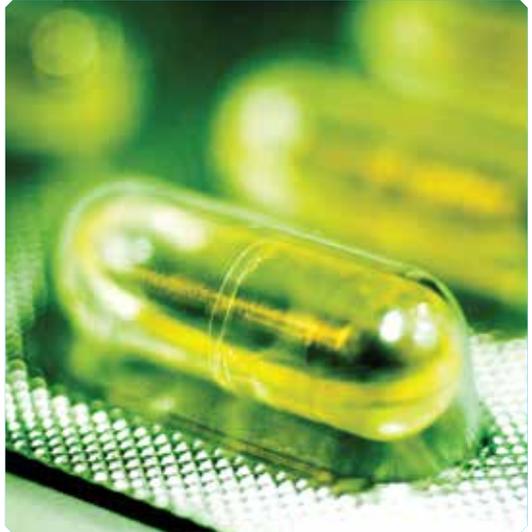
New 'chemotherapy booster' could treat lung and pancreatic cancer

A new drug discovered at The Institute of Cancer Research (ICR) boosts the effectiveness of conventional chemotherapy by blocking one of cancer's escape routes and preventing tumours from evading the effects of treatment.

The drug, known as CCT245737, is scheduled to begin first-in-human clinical trials in patients with lung and pancreatic cancers – two cancers with low survival rates that continue to resist currently available treatments.

The new study was published in the journal *Oncotarget*, and was funded by Cancer Research UK and Sareum Limited.

Find out more at icr.ac.uk/CHK1



New 'mutation-tracking' blood test could predict breast cancer relapse months in advance

A new blood test for breast cancer is able to identify which patients will suffer a relapse after treatment, months before tumours are visible on hospital scans.

Scientists at the ICR and The Royal Marsden were able to track key mutations that occur as cancer develops and



spreads, without the need for invasive biopsy procedures.

The test could help us stay a step ahead of cancer by monitoring the way it changes and helping clinicians pick treatments that exploit the weaknesses of a particular tumour.

Find out more at icr.ac.uk/mutationtracker

Scientists unveil prostate cancer's 'Rosetta Stone'



PROFESSOR JOHANN DE BONO

A landmark new study reveals almost 90% of men with advanced prostate cancer carry genetic mutations in their tumours that could be targeted by either existing or new cancer drugs.

Professor Johann de Bono, Professor of Experimental Cancer Medicine at the ICR and Honorary Consultant at The Royal Marsden, said: "We have for the first time produced a comprehensive genetic map of the mutations in prostate cancers that have spread round the body."

The study, hailed as the disease's 'Rosetta Stone', will help give scientists the ability to decode the complexity of the disease, and to translate the results into personalised treatment plans for patients.

Find out more at icr.ac.uk/rosetastone

Genetic test could improve blood cancer treatment

Testing for genetic risk factors could improve treatment for myeloma – a cancer of the blood and bone marrow – by helping doctors identify patients at risk of developing more aggressive disease.

Our researchers found as few as nine genetic features would need to be tested to identify high-risk patients who might benefit from the most intensive treatment.

The study is the first to link genetic mutations in myeloma cells to the chances of surviving the disease.

Find out more at icr.ac.uk/myeloma



Oracle Cancer Trust funds cancer researchers of the future



Oracle Cancer Trust has pledged to support a programme of PhD students at the ICR to conduct new research into head and neck cancers.

The Trust has funded pioneering research at the ICR for the last decade, but its new commitment is the biggest to date. The fully funded programme of PhD students will help to accelerate work to take new therapies into the clinic to help patients.

Anthony Sykes, Chief Executive Officer of Oracle Cancer Trust, said: “We are very proud to fund a programme of up-and-coming researchers at the ICR. Training the next generation of cancer researchers is of critical importance for the future of cancer research, and as a direct result of our funding we want many more patients with head and neck cancer to receive better treatment with fewer side-effects, and to help patients have a better quality of life.”

Schottlander Innovation Awards drive new research

The Schottlander Research Charitable Trust has awarded the ICR £200,000 to fund two innovative research projects to understand how cancer evolves.

Dr Andrea Sottoriva and Dr Marco Gerlinger, both team leaders within the ICR’s Centre for Evolution and Cancer, were selected as winners of the grants, following a competitive peer-reviewed process.

Dr Brian Schottlander, Trustee of The Schottlander Research Charitable Trust, master-minded The Schottlander Innovation Awards to facilitate adventurous blue-sky cancer studies. The award will provide the proof-of-concept funding that could lead to substantial research advances in the future.



DR ANDREA SOTTORIVA



DR MARCO GERLINGER

Lara Jukes, Director of Development at the ICR, said: “Dr Schottlander’s vision to ignite novel research into the causes of cancer will be invaluable in helping us explore new avenues of research. We are extremely grateful to the Trustees of The Schottlander Research Charitable Trust – it is only through such funding that we are able to make the discoveries that defeat cancer.”

London Marathon runners raise thousands for the ICR

A team of runners raised more than £63,000 for the ICR at this year's London Marathon on the 35th anniversary of the world-famous race.

Seventeen keen volunteers took part in the 26-mile London race for the ICR, including our own Director of Research Operations, Dr Fiona Hemsley. The team was a mix of first timers and seasoned competitors including third-time ICR veteran Lynn Frieda who raised more than £14,000 for us this year.

Our runners were cheered on at mile 12 by a team of energetic volunteers made up of friends, family and ICR staff, giving them encouragement and a much-needed boost as they neared the halfway mark.

Charlotte Orrell-Jones, Head of Events at the ICR, said: "The London Marathon is an



LYNN FRIEDA ENJOYING
THE MARATHON

amazing day for us at the ICR. Every year our runners raise a fantastic amount of money come rain or shine. We are incredibly grateful to everybody who runs and to the volunteers that cheer them on."

Family passion raises money for the ICR



A family of keen cyclists has raised nearly £10,000 for the ICR by taking on tough endurance cycle races.

Derek and Lisa Avery, a father and daughter duo, have completed Prudential RideLondon-Surrey 100 cycle race, London to Paris, and Lands' End to John O'Groats – all in aid of the ICR's research.

Lisa was one of six amazing riders who completed the RideLondon cycle race on behalf of the ICR on Sunday 2 August 2015. Her father Derek took part last year, so he knew exactly how she felt when she crossed the finishing line.

Derek said: "I am so proud of Lisa for finishing the course in such a great time, and for supporting the world-leading cancer research at the ICR. As a family that is passionate about cycling, it is fantastic to be able to fundraise for such a worthwhile cause at the same time."

If you would like to keep up to date with our latest news and events, you can like us on Facebook or follow us on Twitter @ICR_London

Drug discoverer Dr Olivia Rossanese is on a mission to help as many cancer patients as possible.

Using biology to discover new cancer drugs

Dr Olivia Rossanese is the new Head of Biology within the ICR's Division of Cancer Therapeutics. She brings with her an impressive track record in drug discovery, but her relentless passion to offer hope to patients with cancer is the driving force behind her research.

"I chose to work at the ICR because it is one of the few places in the world with the track record and infrastructure to discover new cancer drugs and take them to patients. I want new breakthrough treatments to reach patients as fast as possible," she says.

Originally from Scotland, Dr Rossanese moved to the US with her family when she was 10. She received a classical training in cell biology and then became part of the team at GlaxoSmithKline that discovered the drug dabrafenib, which is now used for patients with advanced melanoma.

"The day that dabrafenib was approved for use in patients was one of the proudest days

of my research life. But I don't want that to be my only success. I want to repeat this as many times as possible to help as many cancer patients as possible," explains Dr Rossanese.

Now at the ICR, Dr Rossanese has her next challenge in her sights. She wants to make drug discovery more precise so that better drugs are developed. Dr Rossanese will use biology to identify the targets within cancer cells that drugs are most likely to be successful against. She will then work alongside chemists to identify existing drugs or design new drugs to hit these targets, and will also aim to identify which patients are most likely to benefit from a particular drug treatment.

"I am very excited about the future of cancer research at the ICR. I have big plans for drug discovery, and working with the multi-disciplinary teams across the ICR will help me realise my goals."



CV

Name: Dr Olivia Rossanese

Joined the ICR: June 2015

Specialist subject: Cancer drug discovery

Greatest achievement to date: Being a member of the team that discovered the drug dabrafenib which is now used to treat melanoma patients.

In her own words: "I don't feel I have reached the pinnacle of my career. I want to repeat the success my team had with dabrafenib, and to keep doing it to help as many cancer patients as possible."

An unrelenting desire to deliver personalised treatments at one of the most hard-to-treat cancers.

Hope for pancreatic cancer patients

Dr Anguraj Sadanandam says his desire to offer patients hope is the driving force behind his research into pancreatic cancer – a type of cancer with particularly poor outcomes.

“I joined the ICR because I admire its unrelenting goal to deliver personalised medicine for the benefit of cancer patients,” he says. “Pancreatic cancer is a particularly brutal disease, but the ICR provides the ideal environment for my research to improve outcomes for these patients.”

Dr Sadanandam, a Team Leader in Systems and Precision Cancer Medicine, is using his combined expertise in computational and biological sciences to identify which patients will benefit the most from a particular treatment.

Originally trained in India, Dr Sadanandam’s career has already spanned multiple continents, including time spent in the US and Switzerland working with some of the biggest names in cancer research, before establishing his own team here at the ICR.

Pancreatic ductal adenocarcinoma is particularly unresponsive to current treatments and has a very poor prognosis. Currently, drugs are given to all patients, because we have no way of knowing which individual patient will respond to what treatment. But Dr Sadanandam is developing tests to predict how



CV

Name: Dr Anguraj Sadanandam

Joined the ICR: September 2013

Specialist subject: Combining computational and biological sciences to identify patient groups for targeted treatment.

Greatest achievement: “I like to think that my greatest achievement in the cancer field is yet to come, but I hope that ultimately my research will help get patients on the right treatment at the right time.”

In his own words: “Taking on cancer is a big challenge. Cancer cells evolve depending on their genetics and environment. Using advanced computing to model the genetic mixtures of cancer cells in tumours, combined with the use of biology, we can identify ways to target the different tumour cells individually.”

patients will respond and match patients to the treatments most likely to work for them.

“I am looking for the unique molecular signatures that distinguish between different types of pancreatic cancer and will use these to predict which patients will respond to which treatment. Pancreatic cancer patients generally have such poor outcomes, but it is these patients that give me the inspiration to explore new avenues of research.”

Cutting-edge imaging could help therapies reach patients sooner thanks to our new Centre for Cancer Imaging.

Using imaging to accelerate the discovery of new cancer therapies

Imaging plays a crucial role in the discovery and development of new cancer treatments. In this magazine two years ago, we described the ICR's vision to create a world-class imaging research facility. Now, that vision has been realised, with the completion of the new Centre for Cancer Imaging on our Sutton site in south London.

Advanced imaging techniques such as ultrasound and MRI don't only allow scientists and clinicians to detail tumours in the body, but also to understand the nature and behaviour of a particular cancer. They can be used to determine whether and how treatments are working in a way that is non-invasive and avoids the need to repeatedly take tissue samples from patients.

These imaging techniques are also very useful in the initial stages of drug discovery to help us understand how a drug compound is working.

Professor Paul Workman, Chief Executive of the ICR and sponsor of the project to create the new centre, aims to bring the next generation of cancer treatments to patients sooner. He says: "The Centre brings together multi-disciplinary research teams with an ethos of collaboration and innovation. It provides them with access to the latest imaging techniques to push the boundaries of our knowledge of cancer and improve outcomes for cancer patients. Our vision is

becoming a reality and will help us accelerate the discovery and development of better therapies for patients."

When full, the new building will house approximately 130 scientists from a range of scientific backgrounds, and will be formally opened at a ceremony this Autumn.

We would like to thank the generosity of our donors, including The Wolfson Foundation and the Garfield Weston Foundation, in helping to make the construction of the building possible.



We are embarking on an exciting research challenge to develop one of the world's most cutting-edge and powerful radiotherapy machines.

Revolutionising radiotherapy

The ICR, with our hospital partner The Royal Marsden, will become the first centre in the UK to own and develop the world-leading radiotherapy technology, which is known as the MR Linac.

Radiotherapy is a highly effective treatment that plays an important role in the treatment of more than 40% of patients who are cured of cancer. Our scientists are continually seeking out ever more precise methods of delivering radiotherapy to help cure even more patients, and to reduce the side effects that they experience.

Professor Uwe Oelfke, Head of the Joint Department of Physics at the ICR and The Royal Marsden, explains the problem that the MR Linac is trying to solve in treating cancers. "We face the immense challenge of trying to hit an invisible target with an invisible beam," he says.

It may surprise many to know that the location of tumours and organs within the body changes from day to day or even constantly. For example, a tumour in the lung will move up and down as a person breathes.

The MR Linac will combine two technologies – an MRI scanner and a linear accelerator – to precisely locate tumours, tailor the shape of X-ray beams in real time, and accurately deliver doses of radiation, even to moving tumours. This is a major challenge for physicists because X-ray radiation treatment is affected by the strong magnetic fields used during MRI scans.

The facility to house the MR Linac is currently being built at the ICR's and The Royal



A PROTOTYPE OF THE NEW
MR LINAC TECHNOLOGY
COURTESY OF ELEKTA AND
UMC UTRECHT.

Marsden's Sutton site, using a £10 million grant awarded by the Medical Research Council. The technology is being developed with an international consortium of academic institutions and Elekta, the manufacturer.

We hope to start the initial technical development stage during 2016. Our scientists will be optimising and testing the MR Linac before conducting final trials in patients and eventual roll out to the clinic.

Professor Oelfke adds: "Patients are the driving force behind this pioneering programme of research. The MR Linac has the potential to improve the effectiveness of radiotherapy with significant benefit for cancer patients."

Hope is now on the horizon for melanoma patients following decades of research at the ICR.

Advancing treatments for melanoma

T-VEC INFECTED
MELANOMA CELLS

Melanoma – a type of skin cancer – is almost always curable when it’s found in its very early stages. Unfortunately, it’s far more aggressive than other skin cancers and often becomes metastatic – spreading to other parts of the body – by which time it is usually incurable.

Until recently there were no effective treatments for metastatic melanoma, but in the last decade we have seen a flurry of treatment breakthroughs. Here we highlight some of the most exciting advances and introduce you to two of our most promising new treatments.

Discovering the genetic causes

We began our research on melanoma around 15 years ago, when a team of scientists at the ICR discovered that a gene called BRAF was faulty – or mutated – in approximately half of all cases of melanoma. Finding a way to target BRAF became a priority for researchers at the ICR and worldwide.

Developing the first targeted therapies

Work over the next decade led to the development of a number of drugs (or inhibitors) targeting the mutated BRAF gene. The drug vemurafenib – the development of which was underpinned by ICR science – was the first effective treatment for patients with metastatic melanoma. BRAF inhibitors often work very quickly to control melanoma, however, the cancers usually become resistant to treatment within a year. So while the development of BRAF inhibitors has been a big breakthrough, they represent the beginning, rather than the end, of the story.

Overcoming drug resistance

The ICR’s Professor Caroline Springer is continuing the fight against melanoma. In a collaboration with Professor Richard Marais, who is now at the Cancer Research UK Manchester Institute but was previously at the ICR, Professor

Springer is designing new drugs which may overcome the problem of BRAF resistance.

The researchers have discovered a brand new family of cancer drugs called 'pan-RAF' inhibitors, which are designed to block the action of several key cancer-causing proteins at once. These new drugs not only inhibit the BRAF protein, but also inhibit other RAF proteins implicated in cancers, and could potentially treat incurable skin cancers.

Professor Springer says: "Our work showed that our pan-RAF inhibitors stopped the growth of BRAF-driven melanomas, including those that had stopped responding to currently available BRAF-targeted drugs. But we also saw that our new inhibitors stopped tumour growth in cancers in which BRAF-targeted drugs had never worked – which happens in around 20% of cases.

The next stage has already started with the launch of a phase I clinical trial in which cancer patients with advanced cancer are receiving the drug with the aim of establishing the safe maximum dose for use in larger trials. If successful, pan-RAF inhibitors could treat drug-resistant skin cancer, potentially giving hope to thousands of patients who have run out of treatment options.

Using viruses to treat melanoma

We have also spent many years developing and testing new types of treatment – viral immunotherapies – which work in a different way to other types of cancer drug.

Our immune systems are normally charged with keeping us healthy by killing cells and organisms that appear to be alien to us. However, cancer cells originate from our own bodies and so the immune system does not recognise them as being invaders and largely ignores them.

Now, our researchers have shown that a genetically engineered virus called T-VEC can halt the progression of skin cancer by killing melanoma cancer cells and sparking the immune system into action against the tumours.

The ICR's Professor Kevin Harrington,



PROFESSOR CAROLINE SPRINGER

also an honorary consultant at The Royal Marsden, led the UK part of a clinical trial of this new viral immunotherapy in patients with melanoma. It is the first time that a phase III trial of viral immunotherapy has definitively shown benefit for patients with cancer.

Professor Harrington says: "There is increasing excitement over the use of viral treatments like T-VEC for cancer, because they can launch a two-pronged attack on tumours – both killing cancer cells directly and marshalling the immune system against them. And because viral treatment can target cancer cells specifically, it tends to have fewer side-effects than traditional chemotherapy or some of the other new immunotherapies."

Hope on the horizon

With pan-RAF inhibitors already in patients in clinical trials, and the potential that viral immunotherapies like T-VEC will be licensed for use as a new treatment for patients soon, there is hope on the horizon for melanoma patients. We believe these advances offer patients real hope that their melanoma can be kept at bay for far longer, giving them more quality time with their loved ones.

Two families who lost their sons to a rare teenage cancer are carrying out their wishes by funding new research into the disease.

Finding treatments for rare teenage cancers

Any parent would dread being told their child has cancer. But for two families closely involved with the ICR, their devastation was amplified – there were no effective treatments to help their sons.

Tom Bowdidge and Rob Holland were both diagnosed with a rare cancer called desmoplastic small round cell tumour (DSRCT) – a type of sarcoma that affects soft tissues in the body. The cancer is so rare that each year there are only a handful of cases diagnosed in the UK.

Both boys, though desperately ill, independently pledged to set up charities to raise money to help fund research into this disease and help to prevent other families from facing the same tragedy. Today their parents

are continuing to run the charities in their sons' memories to drive new research into DSRCT.

Both family-led charities are each funding a researcher in the laboratory of Professor Janet Shipley at the ICR. Professor Shipley is an internationally recognised expert in sarcomas who aims to find more effective and less toxic treatments that target the specific molecular defects driving the growth of these deadly tumours.

When 15-year-old Rob Holland set up his charity Rob's ARTTT (A Rare Teenage Tumour Trust) in 2007, little was known about DSRCT. Just six months later, Rob sadly died. Now, eight years on, thanks to funding from the charity, Professor Shipley is confident

“To be able to work with the ICR is a really exciting opportunity for us and to know that the research The Tom Bowdidge Foundation will be funding will be targeting the specific cancer Tom was diagnosed with is especially important. This is what Tom wanted.”

that the first personalised clinical trials for DSRCT in teenagers are possible in the not-too-distant future.

Eighteen-year-old Tom Bowdidge was diagnosed with DSRCT in 2012. It was his wish to start his own charity to support teenagers with cancer, and before his death on 18 October 2013, he had already raised over £150,000 for cancer causes. Shortly before he passed away he told his mother Nikki to 'crack on without him' and continue his work. And that is what she and her husband Richard are doing.

"When Nikki and I set up The Tom Bowdidge Foundation we knew that one of the aims had to be to fund research into teenage cancers," says Richard Bowdidge, Tom's father and trustee and founder of the Tom Bowdidge Foundation. "There is so little research underway that it had to be a central ambition for us to find a project we could support and one that could make a real improvement in the way in which teenage cancers are treated in the future."

Developing new treatments for DSRCT is particularly challenging because of the very small number of patients involved, but funding from these two family-led charities is making research possible. Professor Shipley and her team are exploring completely new research avenues and are making headway in understanding the biology that drives the growth of DSRCT so that more effective and less toxic treatments can be developed to halt the disease.

Advances in treating rare cancers are greatly dependent on such generous support, so enabling our scientists to explore less well-trodden paths of research. It is this innovation that will help us make the discoveries that defeat cancer.



Progress towards treating DSRCT



We have identified genes involved in DSRCT that can be therapeutically targeted.



We are studying how aberrant signals are passed within a cell to tell it how to behave and are exploring ways to use drugs to block these abnormal messages.



We have tested various drugs on DSRCT cells and identified promising drugs that kill the cancer cells – but crucially leave healthy cells unaffected.



We are identifying drugs already used to treat other adult cancers that may be effective in treating DSRCT too.



We are exploring ways to prevent DSRCT from becoming resistant to new treatments.

Our Head of Events Charlotte Orrell-Jones reveals how the unsung heroes of our work help make the discoveries that defeat cancer.

Taking on the challenge

Charlotte Orrell-Jones says she cannot help but be inspired by the thousands of individuals who take on sporting events and challenges in support of research at the ICR.

“I love the energy and excitement of working with so many different people to help them take on a challenge of a lifetime,” she says. “It is motivating to see our supporters get

involved with such passion and to share in their joy when they cross the finish line.”

Charlotte has a strong track-record in organising a varied and engaging series of events, challenges and social evenings for ICR supporters. She has a flair for hosting and engaging with guests on a personal level and her passion as an ambassador for the ICR is



Amelia goes the extra mile for cancer research



Charlotte's colleague Amelia has raised over £1,300 for the ICR's research. Amelia was inspired by the important research taking place in our labs, so in memory of loved ones that she's lost to cancer, she jumped at the chance to combine her hobby with a desire to support the ICR by taking on the Prudential RideLondon–Surrey 100. She completed the challenge in 6 hours and 40 minutes.

Amelia said: "I am extremely pleased to raise so much to help support the ICR's cancer research and I thoroughly enjoyed the experience, especially the thrilling atmosphere of the finish on the Mall."

evident. But it is the personal stories behind each supporter that are the driving force for Charlotte's energy and enthusiasm.

"Supporters' stories are often driven by tragic family loss or a personal journey with cancer, but they are galvanised by a dedication to support research into cancer and to make a difference, says Charlotte. "I recently met a family whose son died of an extremely rare and hard-to-treat brain cancer. Their commitment to channelling their grief into something positive is truly humbling."

Charlotte met the Menon family, whose son Rudy died of a type of inoperable brain cancer called gliomatosis cerebri, at a fundraising walk across London to celebrate Rudy's short, but full life. The Menon family have been raising funds for the ICR for two years and are enabling Dr Chris Jones, a team leader at the ICR who specialises in brain tumours in children and young people, to carry out, for the first time, a large-scale assessment of the factors that drive gliomatosis cerebri. The ICR team

hope that their research will shed light on what causes the cancer, with the ultimate aim of developing new and targeted treatments for patients with this disease.

Charlotte says that the Menon family are a true inspiration. "They are a fantastic example of how a dedicated group of people have come together and are providing the seed funding to enable a brand new avenue of research to be explored. This is how we make the discoveries that will defeat cancer and I'm so grateful to play a small role in helping the Menon family – and so many others like them – in their fundraising activities."

If you have been inspired to take part in an event to support research at the ICR, please contact the Events Team on 020 7153 5307 or by email on sports@icr.ac.uk or visit icr.ac.uk/challenge

The importance of a Will

Scientists at the ICR were hugely excited this year with the arrival of a new flow cytometer at the labs in Sutton. This cutting edge piece of equipment created a real buzz in the labs with the scientists anxious to start using it.

Cell samples can now be analysed more quickly and in more detail than ever before. Seven lasers distinguish between up to twenty six different colour combinations in cell samples – a level of complexity not possible before.

We were only able to purchase the new flow cytometer thanks to a generous gift



left in the Will of Mr Mullard. Gifts like Mr Mullard's are vital for the ICR. Last year almost 40% of the money we raised came from the kind gifts that supporters left us in their Wills.

An up-to-date Will helps ensure that your family and loved ones are provided for in the way that you would want them to be. It also gives you an opportunity to leave a gift to a charity of your choice if you so wish.

If you are considering writing a Will or updating an existing Will we would always recommend using a solicitor or professional Will writer. Using a professional can help avoid the difficulties and divisions that can occur when someone dies without a Will, if an existing Will has been poorly prepared or if a Will no longer reflects your wishes.

If you would like to remember the ICR in your Will and are over 60 you might be able to take advantage of our Will For Free programme. If you would like to know more please contact our Legacy Support Officer, Marcia, on **020 7153 5387**, or go to icr.ac.uk/legacy

Events calendar

Take part in the challenge of a lifetime and help us to make the discoveries that defeat cancer. Here are just some of the events that you can get involved in.

Run

adidas Silverstone Half Marathon

13 March 2016

A great event for beginners, getting that PB, or the perfect training race for the London Marathon.

Edinburgh Marathon Festival

28 & 29 May 2016

Take part in a 10K, half marathon or full marathon in Scotland's vibrant capital city.



SIGN UP NOW TO TAKE
PART IN THE SILVERSTONE
HALF MARATHON

Cycle

Prudential RideLondon – Surrey 100

31 July 2016

We have guaranteed places in this exciting and sought-after event.



TREKFEST OFFERS A
FANTASTIC ATMOSPHERE

Trek

Trekfest Brecon Beacons

4 & 5 June 2016

The ultimate UK charity challenge, a fun and life-changing experience.

Social

Carols from Chelsea

1 December 2015

Traditional carols, music and readings in Christopher Wren's beautiful chapel at the Royal Hospital, Chelsea.

If you are already taking part in an event, get in touch and use your own place to raise funds for us.

See our website for our full events calendar icr.ac.uk/challenge or contact the team on 020 7153 5307 or email sports@icr.ac.uk

www.icr.ac.uk