Annual report 2018

SAKK
WE BRING PROGRESS TO CANCER CARE

Editing: Flurina Hoffmann, Svetlana Strobel (SAKK)
Layout: Casalini Werbeagentur AG
Translation: BMP Translations AG
Illustration: Rahel Meyer, Grafik & Illustration
Print: Schneider AG

The SAKK Annual Report 2018 is posted on our website, www.sakk.ch.

Contact
Swiss Group for
Clinical Cancer Research SAKK
Coordinating Center
Effingerstrasse 33
3008 Bern
Tel. +41 31 389 91 91
Fax +41 31 508 41 42
sakk.ch / info@sakk.ch

Content

Prof. Dr. med. Roger von Moos
SAKK President

Prof. Dr. med. Viviane Hess
SAKK Vice President

Dr. Peter Durrer
SAKK Interim CEO

Dear Readers,
Dear Colleagues,

In 2018 the 20 centers of the Swiss Group for Clinical Cancer Research (SAKK) showed how strong the clinical research network in Switzerland has become. More than 1,500 patients were recruited into SAKK trials, the highest number ever in the more than 50-year history of SAKK.

In addition, the Regional Networks project was launched with the support of the Swiss Cancer League. This project is designed to give patients at smaller hospitals and practices the opportunity to take part in clinical trials. The aim here is to bring innovation even closer to patients. Support was provided for a total of seven regional initiatives: Vaud University Hospital, Vaud Hospital Sion, HFR Freiburg, Solothurner Spitäler AG, Cantonal Hospital St. Gallen, Cantonal Hospital Winterthur, Cantonal Hospital Lucerne.

The Young Oncology Academy was also continued successfully, with its third iteration in 2018 under the guidance of Prof. Dr. Miklos Pless. A total of 17 participants have already enjoyed the benefits offered by the Academy and now have the opportunity to continue their academic careers as investigators in the SAKK network.

In keeping with our strategy, we were able to open considerably more early trials (Phase I) and to plan (SAKK 09/18), activate (SAKK 23/16 – TAXIS), or continue (SAKK 41/13; SAKK 96/12; SAKK 41/14) some major Phase III trials. This means that the restructuring of the trials portfolio is well on track.

The growth strategy adopted by the SAKK Board was also put into operation. Special thanks are due here to the SAKK Coordinating Center and Dr. Peter Brauchli, who then stepped down as CEO in the fall. Thanks to the tireless efforts and dedication of all employees, we embarked on a successful path into the future.

In an environment marked by constant and ever more rapid change, SAKK is well positioned, thanks to a large part to its readiness and resolve to further develop and adapt to the dynamic cancer research landscape. With this flexibility while maintaining quality and reliability, we move confidently into the future.

Prof. Dr. med.
Roger von Moos
SAKK President

Prof. Dr. med.
Viviane Hess
SAKK Vice President

Dr.
Peter Durrer
SAKK Interim CEO

June

SAKK at the 2018 ASCO Annual Meeting

The American Society of Clinical Oncology (ASCO) Annual Meeting takes place in Chicago from June 1–5. Six abstracts from SAKK trials are accepted for the 2018 poster sessions:

- Gastrointestinal tumors (SAKK 41/14: Prof. Dr. V. Hess);
- Cancer therapies under development (SAKK 67/15: Prof. Dr. M. Jörger);
- Lung cancer (SAKK 16/14: PD Dr. M. Früh / PD Dr. S. Rothschild);
- Prostate cancer (SAKK 08/16: PD Dr. R. Cathomas / Dr. C. Rothermundt)

SAKK June Semi-Annual Meeting

The SAKK summer semi-annual meeting takes place from June 27–29 at Technopark Zurich; this is the first time it is held as a tie-in with the new **Swiss Oncology and Hematology Congress (SOHC).** This new further training event was launched by the Swiss Society of Medical Oncology (SSMO), the Swiss Society of Hematology (SSH), and SAKK. Four further professional associations (including the Swiss Paediatric Oncology Group (SPOG), the Swiss Society of Radiation Oncology (SRO), the National Strategy against Cancer) joined the initiative. The SOHC provides a national platform for exchanging knowledge, keeping in touch, and defining new research projects. The SOHC is a success, with some 1,000 people attending the various events.

Swiss PostASCO

The 12th Swiss PostASCO takes place on June 27. The popular event benefits from being integrated into the SOHC, and roughly 130 physicians and sponsors' representatives attend the series of lectures. Once again, specialists present the most important research findings from the ASCO Annual Meeting and discuss the implications of new treatment standards for everyday practice.

SAKK/Dr. Paul Janssen Fellowship 2018

The Dr. Paul Janssen Fellowship 2018, providing a stipend of CHF 30,000, goes to Dr. med. et Dr. phil. Matyas Ecsedi at University Hospital Basel. The stipend will enable Dr. Matyas Ecsedi to undertake clinical training in the area of cellular immunotherapy using genetically modified T-cells at the Fred Hutchinson Cancer Research Center (FHCRC) in Seattle, Washington. The award is presented by Prof. Dr. Viviane Hess, SAKK vice president, and Dr. Holger Bartz, Director of Medical Affairs & Compliance at the Janssen Alpine Cluster.

September

Cancer Care Day

Cancer Care Day takes place on September 14, 2018, and is held for the first time in cooperation with Inartis Network. The objective of the one-day event is to promote knowledge exchange among specialists working in technology, medicine, research, and development. Presentations by the health and innovation specialists showcase the latest trends and possibilities in interdisciplinary and cross-sector research projects. Prof. Dr. med. Markus Jörger from SAKK talks about the innovative character of the SAKK Phase I trials.

Orphan Malignancies Seminar

This further training seminar on "Clinical challenges in rare breast and prostate cancer subtypes" is held for the sixth time under the scientific direction of PD Dr. med. Richard Cathomas and Prof. Dr. med. Frank Stenner. Lectures and case reviews provide insight into the complex area of rare cancers.

Race for Life

A team from SAKK rides in the Race for Life charity marathon in Bern for the third time on September 9, 2018. The SAKK team members are Dr. Peter Brauchli, Dr. Peter Durrer, Dr. Charlotte Maddox, and Dr. Volker Timme. A total of 580 cyclists take part, covering 1,715 laps and 23,180 kilometers and conquering 562,999 meters in altitude. The event raises over a quarter of a million Swiss francs for children with cancer.

November

SAKK November Semi-Annual Meeting

The SAKK winter semi-annual meeting takes place from November 22–23, 2018, as usual at the Zurich Hotel Marriott . More than 600 participants attend the events organized by our project and working groups, sections, and networks to discuss ongoing trials and new research projects

Public event on lung cancer research

For the third time the SAKK Patient Representative Board holds a public event to tie in with the SAKK semi-annual meeting. Renowned oncology experts, among them PD Dr. med. Martin Früh, Prof. Dr. med. Oliver Gautschi, Prof. Dr. med. Walter Weder, and Prof. Dr. med. Manuela Eicher, speak on lung cancer. The event is moderated by Dr. Peter Durrer.

Young Oncology Academy

During the SAKK winter semi-annual meeting, graduates of the Young Oncology Academy (YOA) 2018 give their final presentations to an audience of experts at the Post ESMO/EHA/ESTRO Symposium, thus bringing the one-year YOA program to a successful conclusion. Following an opening address by the president of the faculty, Prof. Dr. med. Miklos Pless, the mentors briefly introduce their mentees before giving them the floor for their presentations.

Prize awards

SAKK/Astellas GU Oncology Award

The SAKK/Astellas GU Oncology Award 2018 goes to Dr. med. David Christian Müller at University Hospital Basel. Dr. Müller receives the prize of CHF 30,000 for his outstanding scientific paper titled, "Donor-derived, metastatic urothelial cancer after kidney transplantation associated with a potentially oncogenic BK polyomavirus."

GIST Prize

The Swiss GIST Group, a support group for people with gastrointestinal stromal tumors, awards its scientific prize for the ninth time. The GIST Prize 2018 of CHF 10,000 goes to Dr. med. Michael Montemurro for his work on the "Long-term outcome of dasatinib first-line treatment in GIST: A multicenter two-stage phase II trial SAKK 56/07."

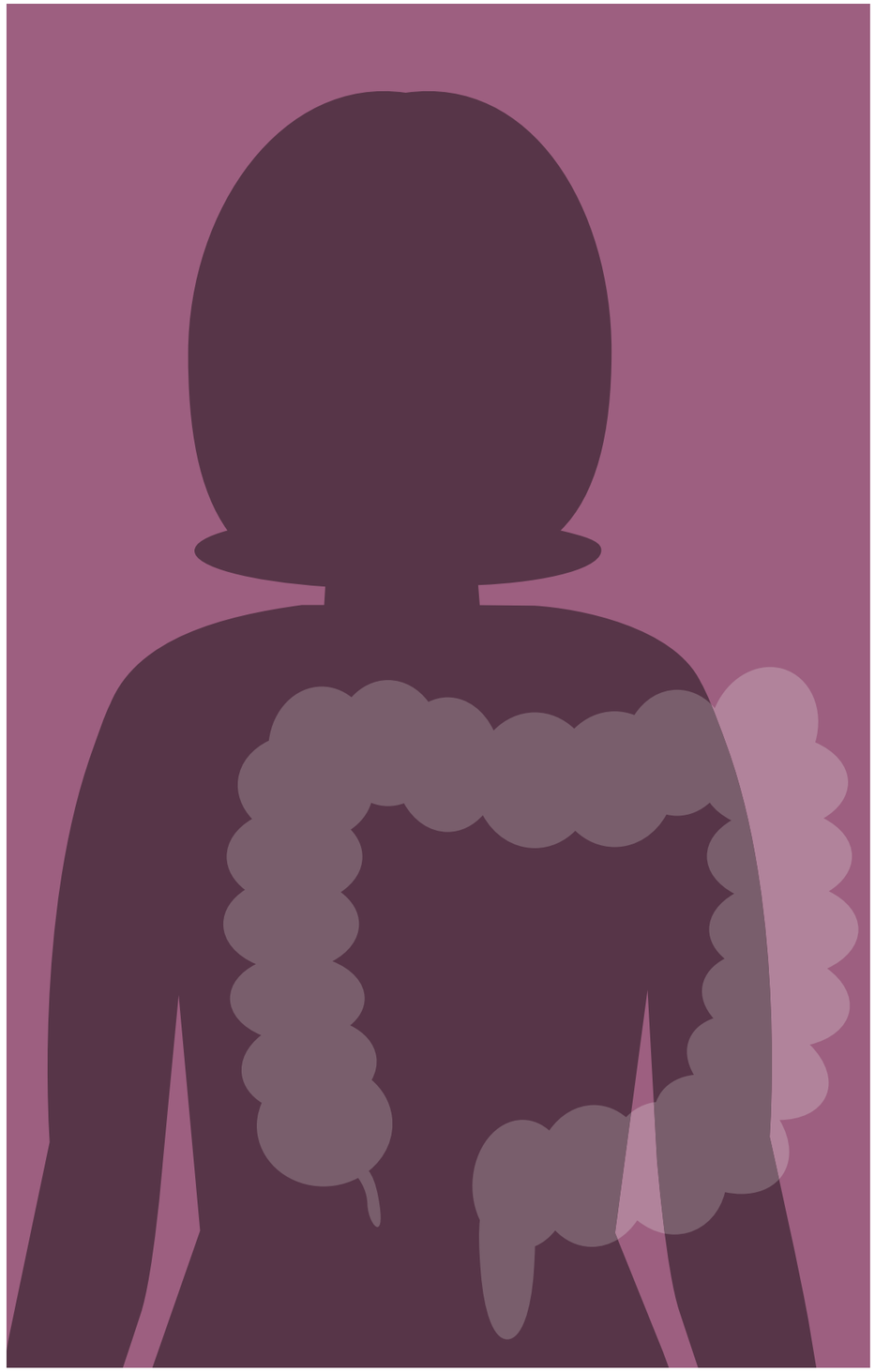
Candy Heberlein Award 2018
The Candy Heberlein Award, with a prize of CHF 50,000, is once again presented at this year's SAKK semi-annual meeting. The sum of CHF 25,000 is awarded to each of two projects:
To Dr. med. Alexandre Theocharides for his project titled, "Pharmacoscopy-guided treatment in relapsed/refractory acute myeloid leukemia" and to Prof. Dr. med. Gabriela Bärlocher for her project titled, "Modulation of telomere biology to increase the expansion of hematopoietic stem and progenitor cells ex vivo for potent and efficient stem cell transplantation."

Prix Galien Switzerland
The Prix Galien Switzerland, presented in November 2018 at the SAKK semi-annual meeting, goes to the medicinal product Opdivo® (nivolumab) from Bristol-Myers Squibb (BMS) in the category "Cancer." Awarded for more than 40 years and now in a number of countries, the Prix Galien honors the most innovative pharmacological product.

"Regional networks" project
With funding from the Swiss Cancer League, SAKK starts the "regional networks" project to make it possible for patients receiving treatment at regional hospitals to participate in clinical trials.

The project aims to network smaller hospitals with the established SAKK hospitals in their regions in 2019 and 2020. The hospitals in Flawil, Rorschach, Grabs, Herisau, Linth, Wil, and Wattwil will collaborate with Cantonal Hospital St. Gallen, for example, or Clinique de Genolier with Lausanne University Hospital (CHUV).

The aim of forming regional networks is to allow more patients to be enrolled in clinical trials in the future. SAKK hopes that this project will achieve greater equality of access, since it will make it possible for patients who live a long way from major hospitals to benefit from clinical research. In addition, treatment within clinical networks is increasingly becoming part of practical, integrated care in our healthcare system.



Project Group Breast Cancer

President: Dr. med. Andreas Müller,
Cantonal Hospital Winterthur

A major highlight for our group in 2018 was the activation of the **TAXIS-trial** (**SAKK 23/16**), a huge randomized Phase III trial with 1,500 patients. This trial will find out whether a reduced operative intervention (tailored axillary surgery) in clinically node-positive breast cancer is non-inferior to a conventional axillary dissection (both followed by radiotherapy), while reducing morbidity. For this SAKK-led trial, we are joined by the International Breast Cancer Study Group (IBCSG), the Austrian Breast and Colorectal Cancer Study Group (ABCSG), and large centers in Hungary.

Besides running conventional cancer-drug trials (as well as proprietary SAKK-trials as trials within cooperative groups like IBCSG and Breast International Group), our group puts an emphasis on "out-of-the-box trials" in which we look at the efficacy of medical and non-medical interventions to reduce the burden of side effects of anti-cancer treatments for patients with breast cancer. In 2018, we developed the **WISE-trial** (**SAKK 95/17**), which examines the effect of a 24-week activity program (monitored by a tracking device) on aromatase-inhibitor induced arthralgia. This trial will be activated in early 2019.

In 2018, our group accrued a total of 276 patients (of which 188 were recruited into proprietary SAKK trials and 88 patients into intergroup trials). This number is somewhat higher than the 253 in 2017; again, the vast majority of patients (268) were enrolled in intervention trials. In 2018 a total of 39 Swiss centers contributed to our trials.

We expect a similar accrual for 2019: The closure of the **PALLAS-trial,** which recruited many patients also in 2018, is expected to be compensated for by increasing numbers in the TAXIS-trial, which is starting now. The **REDUSE-trial** (**SAKK 96/12**) will carry on contributing substantially to our performance.

In 2018, 15 papers were published in peer-reviewed journals on studies in which we were involved and with authors from our group.

Project Group Gastrointestinal Cancer

President: PD Dr. med. Dr. phil. Andreas Wicki,
Cantonal Hospital Baselland and University Hospital Basel
Vice president: Dr. Alexander Siebenhüner,
University Hospital Zurich

In 2018 the SAKK Project Group for Gastrointestinal (GI) Cancer (SAKK PG GI) recruited about the same number of patients into trials as in the previous year. Two of the SAKK PG GI trials have the potential to alter clinical practice:

- Trial **SAKK 41/13** (U. Güller et al.) is investigating the benefit of aspirin as adjuvant therapy in PI3K-mutated colorectal cancer. Compared to international trials examining the same question, SAKK 41/13 currently has the largest number of recruited patients. The need now is to retain this lead, and to this end an amendment has allowed additional centers in Europe to be activated.
- The **Prodige 32** trial (T. Ruhstaller et al.) is investigating the value of surgical intervention compared with active control for patients in complete remission following radiochemotherapy for esophageal cancer. Prodige 32 is the follow up study of SAKK 75/08, which was published in 2018 in *Annals of Oncology.*

Further trials are currently progressing successfully in the SAKK network. Trial **SAKK 41/14** (V. Hess et al.) is looking at the benefit of sports for patients with metastatic colorectal cancer. The inclusion criteria were broadened last year, making this trial suitable for a wide-ranging patient population. The trial is also recruiting in Austria.

The dose-escalation phase of the Phase I trial **SAKK 41/16** is currently ongoing. As soon as the maximum tolerated dose (MTD) for combined radio-regorafenib treatment of rectal cancer has been determined, the dose expansion phase with a cohort of 13 patients will be conducted.

The SAKK PG GI had to close the **PROSPECT trial** managed by the Alliance trial group in 2018. We were forced to take this decision because patient enrollment in Switzerland was (too) low and there is no suitable follow-on trial in GI medicine in the Alliance pipeline.

Last year, negotiations for the new **DANTE trial** were concluded. The SAKK PG GI will activate the trial in 2019 in collaboration with the German group *Arbeitsgemeinschaft Internistische Onkologie in der Deutschen Krebsgesellschaft* (AIO). DANTE is investigating the use in the perioperative setting of an immunotherapy for stomach cancer and also has the potential to set a new treatment standard.

The SAKK PG GI published eight original articles on clinical trials in 2018. In addition to the trial SAKK 75/08 mentioned above, the secondary analysis of SAKK 60/00 and PETACC-3 deserves a special mention; this was published in *JAMA Oncology* by the group working with Dr. med. Anna Wagner and Prof. Dr. med. Arnaud Roth.

Project Group Leukemia

President: PD Dr. med. Georg Stüssi,
Oncology Institute of Southern Switzerland (IOSI)
From February 1, 2019: Prof. Dr. med. Thomas Pabst,
Inselspital Bern

For the SAKK Project Group Leukemia (SAKK PG LEUK), 2018 was a year of transition. An important number of studies were closed in late 2017 and early 2018, and the next study generation would open only in 2019. As a consequence, there was decreased accrual in 2018 after several years of achieving very high accrual numbers. Most importantly, the protocol for young fit patients with acute myeloid leukemia (AML) testing the addition of lenalidomide to intensive chemotherapy (**HOVON 132**) was closed after almost 3 years, during which Swiss centers recruited approx. 200 patients, or 20 % of all patients, to this international study.

The next generation of AML protocols will give us the opportunity to test very interesting new molecularly targeted substances such as IDH1/2 inhibitors (**HOVON 150**) and a FLT3 inhibitor (**HOVON 156**) of the third generation. However, these studies require very high numbers of screened patients and can therefore be conducted only in collaboration with several other international study groups.

The SAKK PG LEUK will continue to collaborate with the HOVON group also for unfit elderly patients, for which the next study will test the addition of midostaurin to the decitabine backbone. The study, **HOVON 155**, is expected to start in early 2019.

For the first time, the project group plans also to participate in a post-transplant AML study, **ETAL-4/ HOVON 145**. The study was developed at the University of Frankfurt and will be conducted in collaboration with the HOVON group. It will test maintenance therapy with panobinostat after an allogeneic transplantation in patients with AML.

SAKK PG LEUK has expanded its activities in the field of chronic lymphocytic leukemia (CLL). Dr. med. Davide Rossi developed a clinical and translational SAKK-initiated protocol (**SAKK 34/17**) that will start in early 2019. The collaboration with the German CLL study group will be continued for the successor protocols of the CLL 13 study, which will be closed in 2019.

Lastly, PD Dr. med. Georg Stüssi stepped down as project group president after two terms, and the group will now be led by Prof. Dr. med. Thomas Pabst, Inselspital (University Hospital of Bern).

Project Group Lung Cancer

President: PD Dr. med. Martin Früh,
Cantonal Hospital St. Gallen
Vice president: Prof. Dr. med. et phil. Solange Peters,
Lausanne University Hospital (CHUV)

SAKK trials for lung cancer/mesothelioma
One of the main focuses of the SAKK Project Group Lung Cancer continues to be trials on multimodal therapy in patients with stage III non-small cell lung cancer. In the past two decades the project group has achieved both national and international renown in this field. The Phase III trial (**SAKK 16/00**) published in *The Lancet* resulted in the standard therapy comprising neoadjuvant chemotherapy with cisplatin and docetaxel that is currently in widespread use. Trial **SAKK 16/14**, the fifth trial in this population, was successful in 2018 and completed the recruitment phase on schedule. The trial investigated the feasibility and role of neoadjuvant and adjuvant immunotherapy with durvalumab following neoadjuvant chemotherapy in operable stage III patients. The value of immunotherapy in patients with operable stage III disease in the context of the current standard immunotherapy with durvalumab following definitive radiochemotherapy is still unclear, and the results of trial SAKK 16/14 that are expected in the course of 2020 will be both extremely interesting and important.

We are happy that we have already been able to plan another trial in this population (**SAKK 16/18**). We expect to start recruitment at the end of 2019. This trial will be headed by a young clinical researcher (Dr. med. Laetitia Mauti) and will investigate the value of various radiotherapy regimens in combination with immunotherapy.

In 2018 we successfully published the long-term results of the first of three "16" trials (**SAKK 16/96**, **00 and 01**) in the *Journal of Thoracic Oncology.* In addition to very promising 10-year survival data of just under 30 %, the trial showed that that the results of therapy using the latest edition of the TNM staging system, the 8th edition, are similar to those achieved with the 6th edition.

Later in 2018, Dr. med. Hansjörg Vees' poster discussion of his trial **SAKK 15/12** at the European Society for Medical Oncology (ESMO) Congress met with a very positive response. The trial found that patients with small cell lung cancer receiving early, hippocampus-sparing prophylactic cranial irradiation showed no deterioration of neurocognitive functions. Especially the long-term data from this trial are awaited with great anticipation.

During 2018 the maximum tolerated dose was established in the Phase I trial **SAKK 19/16**, which is investigating two dose levels of the MEK inhibitor binimetinib in combination with first-line therapy with cisplatin and pemetrexed in patients with metastatic KRAS-mutated non-small cell lung cancer. The trial is remaining open in the expansion cohort at four SAKK Phase I centers in Switzerland. KRAS mutations make up the major molecular subgroup, accounting for up to 30 % of patients, but as yet no targeted therapy is being used.

Trial **SAKK 17/16** for mesothelioma, which is investigating lurbinectedin in second-line therapy, recruited very rapidly during 2018. The results are expected in 2019. In addition, in late 2018 the SAKK Project Group Lung Cancer opened its first trial with patients with non-small cell lung cancer who are in poor general condition (PS2) (**SAKK 19/17**). This single-arm Phase II trial is investigating the efficacy and safety of durvalumab as first-line therapy in patients with PD-L1 positive (> 25 %) cancer. A further trial planned for early 2019 (**SAKK 19/18**) is being headed by a young researcher from Geneva (Dr. med. Alfredo Addeo) and will investigate rogaratinib in patients with previously treated metastatic squamous cell carcinoma of the lung and FGFR overexpression.

Collaborative trials on chest malignancies

The productive collaboration with the European Thoracic Oncology Platform (ETOP) and the European Organization for Research and Treatment of Cancer (EORTC) was continued in 2018. The collaboration occurs mainly in the context of major Phase II trials and in niche trials for rare indications.

The very important adjuvant placebo-controlled trial (**PEARLS**) to evaluate pembrolizumab in resected non-small cell lung carcinoma is still open for recruitment. Another very important trial, the **EORTC Lung ART** trial to assess the value of adjuvant radiotherapy in resected non-small cell lung cancer N2, completed recruitment in 2018, and the results are eagerly awaited. The **ETOP SPLENDOUR** trial to investigate the efficacy of denosumab in stage IV non-small cell lung cancer was closed prematurely in 2018 because of rapid changes of standard first-line therapies. The results were presented by Prof. Solange Peters in a poster session at the ESMO 2018 Congress, with denosumab not showing any survival advantage.

The **ETOP PROMISE-meso** trial, the second trial for patients with mesothelioma after the lurbinectedin trial, also completed recruitment in 2018 ahead of schedule. Recruitment into **ETOP BOOSTER**, a randomized trial investigating the role of bevacizumab and osimertinib in patients with a positive T790M mutation after first- or second-generation EGFR tyrosine kinase inhibitors, had almost completed recruitment at the end of 2018. Several Swiss centers were able to enroll patients in this trial, which is recruiting rapidly – primarily in Asian countries.

Further protocols for rare cancers of the thorax that were opened at a limited number of Swiss centers and for which physicians are being asked to refer patients included **ETOP Nivothym** (nivolumab in B3 thymomas and thymic cancer) and **ETOP ALERT** (alectinib in RET-positive lung cancer). Further collaborative trials planned for 1029 are: **EORTC HALT** (a randomized trial investigating the role of radiation in patients with oncogene-dependent lung cancer and oligoprogression on tyrosine kinase inhibitors), **ETOP 15-19 ABC** as a follow-up trial to BOOSTER (bevacizumab/atezolizumab/chemotherapy in EGFR+ lung cancer), **ETOP 14-18 CHESS** (multimodal therapy of oligo-metastatic non-small cell lung cancer at selected centers), and **ETOP 13-18 BEAT-meso** (a randomized Phase III trial with chemotherapy and bevacizumab and atezolizumab in mesothelioma).

In sum, the SAKK Project Group Lung Cancer was able to recruit a total of 98 patients into clinical trials in 2018. Members of the SAKK lung cancer group gave two oral presentations and took part in one poster discussion and five poster presentations at national and international congresses and published four papers in renowned journals.

Project Group Lymphoma

President: PD Dr. med. Urban Novak,
Inselspital (University Hospital of Bern), University of Bern
Vice president: Dr. med. Francesco Bertoni,
Università della Svizzera italiana, Institute of Oncology Research, Bellinzona

In 2018, a total of 135 patients in 20 different centers (including all university hospitals of Switzerland) were included in nine clinical trials. Although the number of patients enrolled might appear lower compared to other groups, it should be kept in mind that lymphomas are relatively uncommon and that they comprise a large number of entities with specific treatment options and research questions. Furthermore, standard treatments are already relatively good, and further improvements therefore difficult. Our current portfolio includes trials mainly dedicated to rare diseases such as mantle cell lymphoma, CNS localizations, and Burkitt lymphomas, for which together only about 100 new cases are diagnosed each year in Switzerland. At the same time, there is a lack of frontline therapy trials for the most frequent entities (diffuse large B-cell lymphoma and multiple myeloma) and also of register activities.

The results of the multiple myeloma trial **SAKK 39/16** were published in *Blood*. This is a perfect example of translational research confirming the successful use of nelfinavir as a bortezomib-sensitizing drug in patients with proteasome inhibitor-non-responsive myeloma patients. Enrollment in our new trial **SAKK 39/16** (OptiPOM) started in 2018; this potentially practice changing trial will lower health care costs when alternate day dosing of pomalidomide is shown to be both safe and effective for treatment of patients with refractory multiple myeloma.

The results of the international **REMoDL** trial for diffuse large B-cell lymphoma were published in *The Lancet Oncology.* The SAKK contributed 84 of the 1,128 patients. This was the largest trial that aimed to improve the results of R-CHOP in the frontline therapy of diffuse large B-cell lymphoma adding bortezomib. As it failed to achieve that objective, based on the study results we are now designing a new attractive first-line trial for patients with diffuse large B-cell lymphoma.

The ability of our group to enroll patients in clinical trials for rare entities in compliance with the timeframes is also due to implementation of an efficient referral system. These trials include for example **TRIANGLE** (incorporation of Ibrutinib in the frontline therapy for mantle cell lymphoma patient), **HOVON 127/SAKK 37/16** (academic comparison of two strategies for the frontline therapy for Burkitt lymphoma), and **IELSG-37** (randomized assessment of consolidation radiotherapy for primary mediastinal lymphoma).

Hodgkin lymphomas were traditionally treated in clinical trials, and this is being taken up also by the private sector, which is otherwise difficult to reach for such endeavors. For Switzerland, credit for this must be given to the German Hodgkin Study Group. In 2018, accrual continued to be excellent in the **HD21** trial, which incorporates brentixumab in the experimental arm to challenge escalated BEACOPP. Brentuximab is also used for the treatment of patients with early and intermediate stage disease as part of the upcoming international **RADAR** trial.

The recruitment period for **SAKK 35/15**, a Phase I trial testing obinutuzumab and venetoclax for the chemotherapy-free frontline treatment of patients with follicular lymphoma, a benchmark of the SAKK, is almost completed. It is hoped that the positive dynamism and the great attractiveness of the combination will lead to the planned Phase II trial, in which centers in other countries will be included. Following a similar approach, **SAKK 66/18**, a Phase I trial based on preclinical data produced by our investigators and designed within the SAKK Project Group New Anticancer Treatments, will soon be activated to assess the combination of copanlisib and venetoclax with planned expansion cohorts for patients with follicular and with marginal zone lymphoma.

In conclusion, we are convinced that our mix of trials is appealing for our members and will help to improve treatment of patients with lymphoma. In 2019 the project group will work mainly on completing recruitment into the first-line trials for follicular lymphoma (**SAKK 35/14 / SAKK 35/15**) and for relapsed mantle-cell lymphomas (**SAKK 36/13**) and on activating first-line trials for diffuse large B-cell lymphoma and Hodgkin lymphoma, the most common lymphoma.

Project Group New Anticancer Treatments

President: Prof. Dr. med. Markus Jörger,
Cantonal Hospital St. Gallen
Vice president: PD Dr. med. Anastasios Stathis,
Oncology Institute of Southern Switzerland

The SAKK Project Group New Anticancer Treatments (SAKK PG NAT) has a broad focus on innovation in oncology. 2018 was a very active year for the group, with 3 clinical trials opened. The first trial is **SAKK 65/16**, studying a new liposomal doxorubicin compound, in the development of which SAKK has been involved for more than 4 years, starting from the preclinical phase. The compound was developed by Innomedica, a small Swiss start-up company. The trial is open for five Phase 1 study centers in Switzerland and will recruit a broad group of patients with solid tumors. The study is currently open, and two patients have already been enrolled.

SAKK PG NAT also opened two trials in collaboration with larger pharmaceutical companies, **SAKK 69/17** with an oral ATR inhibitor and **SAKK 68/17** with an oral TGF-β inhibitor, for patients with selected tumors. With enrollment of at least 6 patients in less than 6 months, the project group already made a considerable contribution to SAKK 69/17.

In addition to the above 3 new trials, we also opened the expansion part of trial **SAKK 67/15**, which is investigating the tumor checkpoint controller BAL-101553 in patients with advanced glioblastoma and ovarian cancer. BAL-101553 is being developed in collaboration with Basilea Pharmaceuticals. The project group was proud to present interim results of the Phase I/II at last year's ASCO Annual Meeting as well as at the SOHC in Zurich. SAKK PG NAT was also proud to see the final results of trial **SAKK 67/13** with the oral PI3K-inhibitor PQR309 published in the prestigious *European Journal of Cancer* (Wicki et al., *European Journal of Cancer* 2018;96: 6-16).

In addition to these newly activated studies, SAKK PG NAT supports 7 ongoing Phase I(/II) clinical trials for a broad range of tumor entities including lymphoma (**SAKK 35/15**), lung cancer (**SAKK 19/16**), rectal cancer (**SAKK 41/16**), head and neck squamous-cell cancer (**SAKK 11/16**), and soft-tissue sarcoma (**SAKK 57/16**). Particularly successful is the project group's study on the combination of the BCL2-inhibitor venetoclax and the anti-CD20 monoclonal antibody obinutuzumab (SAKK 35/15) for patients with treatment-naïve follicular lymphoma. A new trial for patients with relapsed/refractory lymphoma is already far advanced, testing the intravenous PI3K-inhibitor copanlisib in combination with venetoclax (**SAKK 66/18**).

In total, 10 SAKK PG NAT-supported clinical trials were open for patient recruitment in 2018. The number of patients included increased steadily from 2016 (N = 20) to 2017 (N = 33) to 2018 (N = 36, 27 of whom are in Phase I trials run by other SAKK research groups).

Turning to the future, our group is actively working on its more mature study pipeline, with at least 3 clinical trials designated to open in the first half of 2019. Besides SAKK 66/18, **SAKK 66/17** will evaluate the combination of laser-assisted thermal tumor ablation followed by intratumoral n-dihydrogalactochitosan (IP-001) in patients with advanced solid tumors, and **M16-438** is planned to evaluate a new anti-EGFR antibody-drug conjugate (ABBV-321) in EGFR-overexpressing solid tumors and glioblastoma. SAKK 66/17 is a collaboration with the U.S.-based firm Immunophotonics, and MI16-438 is being conducted in collaboration with AbbVie.

A particular focus of the SAKK PG NAT is to move preclinical academic research into early clinical development. One such successful project is the SAKK 66/18 trial mentioned above, where the combination of copanlisib and venetoclax was preclinically evaluated by Dr. med. Francesco Bertoni's lab in Bellinzona. A second project was initiated by Dr. med. Olga Shakhova and PD Dr. med. Christian Britschgi at University Hospital Zurich's Laboratory of Translational Oncology. That trial will explore GSK3α/β inhibition in patients with advanced melanoma.

Project Group Urogenital Tumors

President: PD Dr. Richard Cathomas,
Cantonal Hospital Graubünden
From Feb. 1, 2019: PD Dr. Aurelius Omlin,
Cantonal Hospital St. Gallen
Vice president: PD Dr. Dr. Cyrill Rentsch,
University Hospital Basel
From Feb. 1, 2019: Dr. med. Alexandros Papachristofilou,
University Hospital Basel

2018 was another successful year for the SAKK Project Group Urogenital Cancer (SAKK PG URO), with high recruitment rates. As in previous years, more than 500 patients were enrolled in the 10 trials run by the project group, about half in the biobank trial for prostate cancer (**SAKK 63/12**) and the other half in interventional trials.

Prostate cancer remains the group's primary focus, with a total of six trials. They cover a very wide spectrum, and patients with the disease at practically all stages (localized, salvage with increased PSA, metastatic hormone-sensitive, metastatic castration-resistant) were treated in our SAKK trials. Collaboration with the major English research group at the Medical Research Council (MRC) on the **STAMPEDE trial** remains successful, with important presentations at the major international congresses and a publication in *The Lancet*.

In addition, three clinical trials with immunotherapies were concluded successfully in 2018. The SAKK PG URO completed a trial of non-muscle invasive bladder cancer, which marked the first ever use of a novel recombinant BCG vaccine. The international multicenter trial enrolled 42 patients who were no longer responding to conventional BCG. Here, too, further clinical trials are planned within the network that has been established.

A trial for localized muscle-invasive bladder cancer investigating the integration of immunotherapy into the standard treatment for preoperative chemotherapy followed by cystectomy was started. Recruitment to the trial is excellent, and a follow-on trial is already being planned. The project group's first trial for patients with kidney cancer was even more successful; this trial of combined immunotherapy was able to recruit the planned number of 42 patients in just 12 months. One particularly interesting feature of the trial is the extensive translational research component, in which three tumor biopsies were obtained from each patient during treatment.

The trial for patients with stage IIA/B seminoma was concluded in 2018. This innovative trial investigated a novel combination of therapy de-escalation with less aggressive chemotherapy and low-volume radiotherapy. It is the first prospective trial of its kind in testicular cancer and the results are eagerly awaited. A follow-on study was approved by the SAKK Board in 2018 and will begin in 2019.

PD Dr. Richard Cathomas and PD Dr. Dr. Cyrill Rentsch stepped down in 2018 after more than 5 years as president and vice president, respectively. The group elected PD Dr. Aurelius Omlin as president and Dr. med. Alexandros Papachristofilou as vice president, to take up their positions in February 2019. The combination of medical oncologist and radio-oncologist confirms the project group's interdisciplinary approach. This is further underlined by the fact that trials in various areas of urology (lymphadenectomy trial in prostate cancer), radio-oncology (seminoma trial), and oncology (international PEACE IV trial of metastatic castration-resistance cancer) are planned to open in 2019.

Working Group Central Nervous System (CNS) Tumors

President: Dr. med. Patrick Roth,
University Hospital Zurich
Vice president: Prof. Dr. med. Philippe Schucht,
University Hospital of Bern

Many CNS tumors continue to be a major therapeutic challenge in the field of clinical oncology. The SAKK Working Group CNS Tumors (SAKK WG CNS) brings together experts from different disciplines and aims at expanding and strengthening the neuro-oncological community in Switzerland.

In 2018, the **SAKK 67/15** trial was amended, and an additional cohort was opened for patients with recurrent glioblastoma. This study will be activated at various sites in Switzerland and several patients have already been enrolled. In addition, several SAKK centers are participating in the randomized Phase III **EORTC 1709** study, which explores the activity of marizomib, a novel brain-penetrant proteasome inhibitor, in patients with newly diagnosed glioblastoma.

The members of the SAKK WG CNS have continued to work on developing and organizing the Swiss Glioma Network, a database of glioma patients. This project is also of interest for industry partners, which could provide support. Advanced discussions on potential collaborations are ongoing. The group has already conducted several clinically-oriented research projects involving many centers in Switzerland, and presentation of these data can be expected in the near future.

In the future, the working group aims at participating in more clinical trials under the umbrella of SAKK. The strong involvement of several group members in international activities in neuro-oncology will help to achieve this goal. Accordingly, a major focus in the coming years will be to further improve access to clinical trials for patients with brain tumors in Switzerland and to design and organize our own clinical trials for patients with CNS malignancies within the SAKK network.

Working Group Head and Neck Cancer

President: Dr. med. Marco Siano,
Hopital Riviera-Chablais Vaud-Valais, Vevey
Vice president: Prof. Dr. med. Pavel Dulguerov,
Geneva University Hospitals (HUG)

The planned trials were continued this year, and a collaborative trial with the SAKK Section Network for Outcomes Research (SAKK NOR) was published.

The **SAKK 10/16** trial, run in collaboration with EORTC, is a major collaborative European Phase III trial to evaluate the "best of radiotherapy" versus the "best of surgery" (transoral surgery) in patients with T1-T2, N0 oropharyngeal cancer. It started well, with four patients recruited in Switzerland.

Trial **SAKK 11/16** is investigating whether the immunotherapy MVX-ONCO-1 is effective, safe, and tolerable in cases of advanced squamous cell carcinoma of the head and neck. This immunotherapy consists of dead tumor cells from the patient and genetically modified cells in a capsule injected subcutaneously. The genetically modified cells release adjuvants that additionally stimulate the immune system. The trial is being run in collaboration with the biotech company MaxiVAX SA, which was awarded the CTI Swiss Medtech Award for this innovative vaccine project at the Swiss Medtech Day in June 2017. The trial was delayed by conditions imposed by Swissmedic, but now the first patients have been treated in Geneva, and the trial will be initiated shortly throughout Switzerland.

A cost-efficiency analysis of the immunotherapy nivolumab in second-line therapy of head/neck cancers with squamous differentiation was published in in conjunction with the SAKK NOR group (Hirschmann A et al., *Oral Oncology* 2018;87:104-10).

Further projects in collaboration with EORTC or GORTC are underway. The SAKK Board has already approved an interesting follow-up trial to investigate aftercare of head and neck cancers and its value, and we hope to open this trial in Switzerland soon.

Working Group Immuno-Oncology

President: Prof. Dr. med. et phil. George Coukos,
Lausanne University Hospital (CHUV) and University of Lausanne
Vice presidents: PD Dr. med. Ulf Petrausch,
Oncology Center Zurich
Dr. med. Alexandre Theocharides,
University Hospital Zurich, Hematology
Prof. Dr. med. Alfred Zippelius,
University Hospital Basel

The Working Group Immuno-Oncology aims at fostering partnerships with universities, start-ups, and industry to combine local expertise in translational research, with the advantages in patient recruitment provided by the collaboration with SAKK. In this regard, the group works in close collaboration with the SAKK Project Group New Anticancer Treatments that already draws on a dynamic network of Phase I and accredited First-in-Human Phase I study sites.

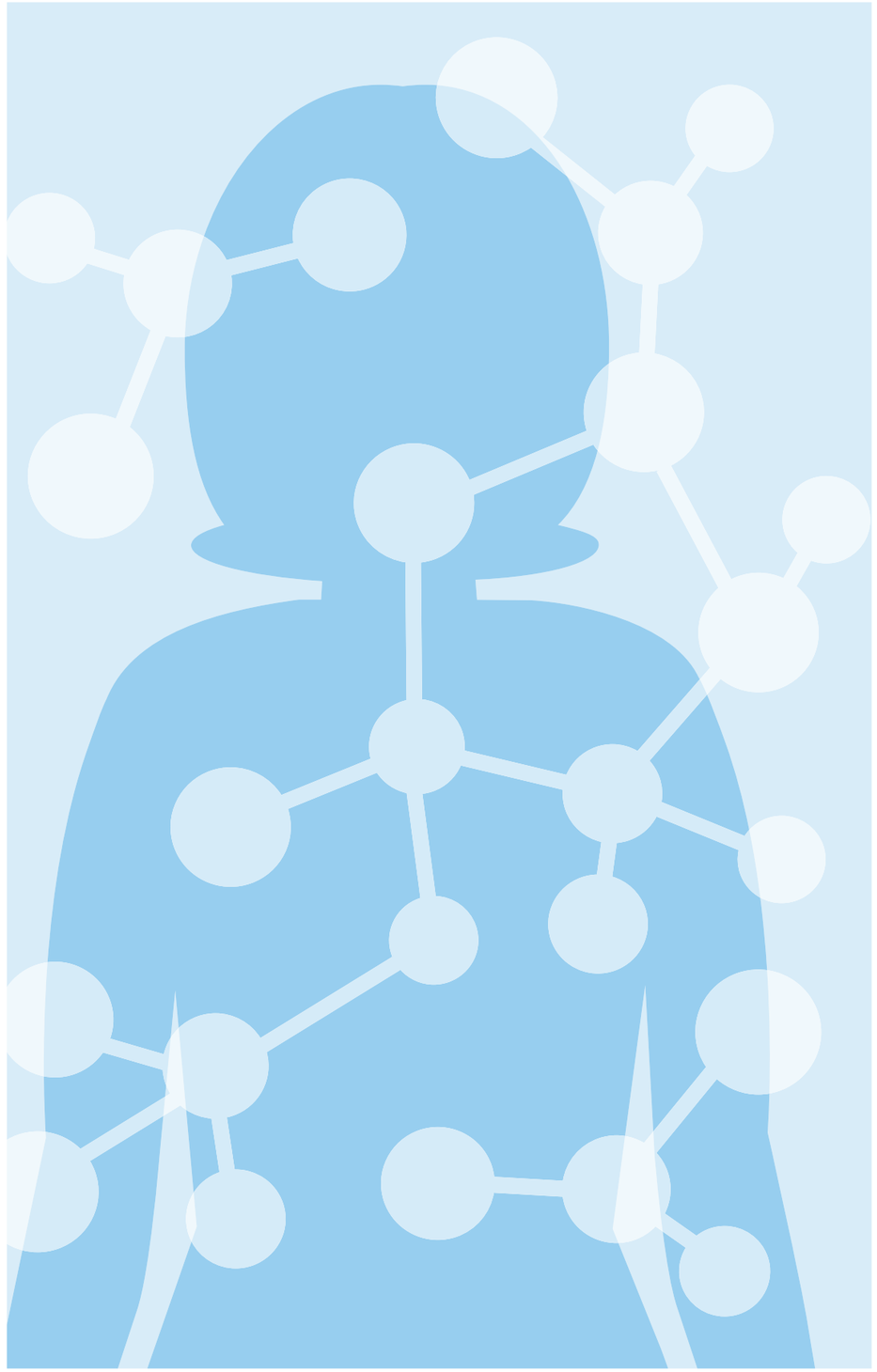
The fact that only one trial activated by SAKK in 2018 is investigating an innovative immunotherapy compound highlights substantial opportunity for drug development. Two Phase I-II trials aiming at overcoming primary and adaptive resistance to PD(L)1 blockade, using different multipronged approaches such as low-dose radiotherapy, epigenetic modifiers, engineered cytokines, and cytokine-traps have been proposed and elaborated within the group. The working group continues to collect and assess collaboration proposals from stakeholders in cancer immunotherapy. Cell-based immunotherapy approaches are gaining traction as both academic and industrial initiatives. The working group will take a leading role in coordinating and encouraging local projects for development of nation-wide cell-based therapies within the SAKK framework.

Working Group Molecular Oncology

President: PD Dr. med. Sacha Rothschild,
University Hospital Basel
Vice president: PD Dr. med et Dr. phil. Tobias Grob,
University of Bern

Now in the second year after its founding, this interdisciplinary working group currently has 42 registered members, who are specialists in medical oncology, hematology, pathology, molecular biology, and other disciplines. Close exchange takes place with all of the project groups and working groups in the SAKK network. There is close exchange particularly with the Project Group New Anticancer Treatments and the Working Group Immuno-Oncology. Joint meetings are held with these two groups at the SAKK semi-annual meeting to coordinate shared projects. In the fall of 2018, SAKK organized a workshop for Phase I trials at which the Working Group Molecular Oncology was also represented.

Onconavigator is the first clinical trial being developed by the Working Group Molecular Oncology. The primary aim of this ambitious project is to develop treatment algorithms on the basis of the molecular profile for patients with advanced cancers and to investigate them on a randomized basis in the second part of the project. A prospective national cohort of patients with advanced cancers will be established in the first part of the project. Molecular biological data and cancer treatment data will be collected in particular. This database will be used to calculate treatment algorithms that will be investigated in the second part of the trial. The cornerstones of this trial were defined last year, and the project was approved by the SAKK Board. Discussions were held with a large number of pharmaceutical companies to evaluate possibilities for collaboration and for supporting this project. One of the aims of this trial is to facilitate access to new therapies and drug trials. Development of the first part of the project is going well, and the project is scheduled for initiation in 2019.



In 2018 the foundation was also laid for close collaboration and leverage of synergies with the Swiss Personalized Health Network (SPHN). Representatives of SAKK and SPHN held various meetings to discuss joint projects and the sharing of clinical and molecular data. This collaboration will be continued and intensified in 2019.

Another goal is to develop further trials and to intensify collaboration on translational projects associated with clinical trials within SAKK.

Working Group Sarcoma

President: Dr. med. Christian Rothermundt,
Cantonal Hospital St. Gallen

We are a small but dedicated group with interest in sarcoma treatment and research. Despite the rarity and heterogeneity of sarcomas, we were able to open two clinical trials in 2018: an investigator-initiated study and a collaboration with the Euro Ewing Consortium.

On October 2, 2018, the first patient was enrolled in the multicenter open-label single arm phase Ib/IIa **SAKK 57/16 (NAPAGE)** trial investigating nab-paclitaxel and gemcitabine in advanced soft-tissue sarcoma. So far, 3 patients were treated, and the safety and dose limiting toxicity (DLT) evaluation of the first cohort in Dose Level 1 has been completed. We hope this trial can soon move to the Phase IIa part.

Euro Ewing 2012 is an international randomized controlled trial for the treatment of newly diagnosed Ewing's sarcoma family of tumors, which compares the European standard induction chemotherapy VIDE followed by VAI/VAC consolidation, and the American standard induction compressed VDC/IE followed by IE/VC consolidation (randomization R1). In a second step, patients will be randomized to zoledronic acid versus no zoledronic acid (randomization R2) while receiving consolidation chemotherapy.

Two further trials are in preparation and should soon be initiated: **PazoQoL or GISG 11**, which assesses quality of life in patients with soft-tissue sarcoma receiving either palliative chemotherapy or pazopanib. Patient reported outcomes (PROs) will be obtained electronically on an iPad, and **SAKK 66/17** with intratumoral N-dihydrogalactochitosan (GC) injection following intratumoral thermal treatment in patients with advanced solid tumors – a multicenter Phase I trial with expansion cohorts in melanoma and soft-tissue sarcoma patients.

Great effort was put into the design of an immune-oncology study. However, realization was hampered by a lack of commitment and financial support from pharmaceutical companies.

In the future, a focus will be on molecular biology to further characterize sarcomas and to explore novel therapeutic targets.

Working Group Supportive Care and Palliative Cancer Care

President: Prof. Dr. rer. Med. Manuela Eicher, RN, PhD,
associate professor, Lausanne University Hospital (CHUV)
and University of Lausanne
Vice presidents: Dr. phil. I Karin Ribi, PhD, MPH,
International Breast Cancer Study Group IBCSG
Dr. med. Gudrun Theile, MD,
University Hospital Zurich

In the field of supportive and palliative cancer care a number of potential topics including supportive and palliative care interventions, geriatric oncology, psycho-oncology, and cancer rehabilitation can be addressed. One ongoing study (**SAKK 95/16**) completed accrual in May 2018. The cross-sectional survey study aimed at describing patterns of care for patients with metastatic bone disease in solid tumors in Switzerland. The study recruited a total of 417 patients from 17 sites and a total of 86 medical oncologists from 18 sites. Analyses are ongoing, and results are expected to be published in 2019.

In addition, **several projects** have been discussed at the meetings of the working group:

- A pilot phase/feasibility study to investigate patient needs-based multi-professional delivery of palliative interventions by oncologists and oncology nurses. This project will be further developed after the appointment of a new principal investigator.
- A project that aims at improving the understanding of the treatment experience and quality of life of cancer patients undergoing immune check-point inhibitor therapy and to investigate potential associations between symptoms and immune-related biomarkers by combining quantitative with qualitative data. This study has started as a single-center study in Lausanne. The group decided to re-discuss this study after first results have been obtained for its potential as a multi-center study within the SAKK network.
- A survey of health practitioner knowledge and practice of cancer treatment-related fatigue (CRF), for which an existing survey of health practitioner knowledge and practice of CRF management is currently being adapted for the situation in Switzerland. An online survey is being developed and will include interprofessional health care team members. The group decided to proceed with this project.
- A study on the treatment of functional iron deficiency independent of anemia in patients with solid tumors and its impact on quality of life. The group decided to procced with this proposal.
- A study assessing the impact of G8 geriatric screening on therapeutic decisions in elderly men with advanced prostate cancer. The group decided to support a study after an inquiry to the group members on the availability of professionals to take over this planned geriatric intervention and the expected accrual.

We expect to submit at least one of these projects to the SAKK board in 2019.

Section Pathology

President: Prof. Dr. Rupert Langer,
Institute of Pathology, University of Bern

The Pathology Section sees itself as a diagnostic and scientific platform that aims to offer support particularly in translational research associated with clinical trials. At the same time, it initiates and runs its own projects in close collaboration with the organ-specific working groups and project groups. It is also involved in the quality assurance of pathological diagnoses in clinical trials, compliance with pre-analytical and analytical standards in tissue-based analysis, the application and introduction of new analytical methods, and the establishment, operation, and maintenance of tissue banks. The promising field of digital pathology and possible applications in clinical cancer research were the focus of a mini-symposium held during the SAKK semi-annual meeting in November 2018 and titled "Digital Pathology: Applications in Diagnostics and Clinical Research," which featured national and international speakers. The Pathology Section is currently participating on a scientific level in the implementation of the translational research project associated with the **SAKK 75/08** trial (cetuximab in neoadjuvant therapy of esophageal cancer), in which pre-therapeutic molecular signatures are being correlated with the response to subsequent pre-operative therapy.

Section Radio-Oncology

President: Prof. Dr. med. Frank Zimmermann,
University Hospital Basel

The Radio-Oncology Section was able to sufficiently support clinical and translational science of SAKK in all organ groups by increasing the number of active and open clinical trials within SAKK.

Together with the organ groups and the other professional sections, we aim at improving multimodal cancer treatment and avoiding severe late and long-term morbidity, such as in the head neck trial on early stage oro- and hypopharyngeal carcinoma (**SAKK 10/16-EORTC-1420-HNCG-ROG Best of**) and also in locally advanced esophageal cancer by defining the subgroup of patients with good outcome without surgery (**PRODIGE 32 – ESOSTRATE 1 – FFCD 1401**), and in node-positive breast cancer (**SAKK 23/16 "TAXIS"**), where we aim at a reduction of the axillary lymph node dissection, with the hope to reduce the morbidity of axillary lymphedema. All of these trials are running within international collaborations due to the high number of patients required and for long-term improvement of partnerships.

The radiation quality assurance program to guarantee comprehensible, reasonable, transferable, and reproducible results of trials was subsequently used in clinical routine and is now established as a routine program in all SAKK trials using radiation therapy.

SAKK 01/10 successfully achieved full recruitment in early 2018 and is now followed by a further trial for optimizing chemo- and radiation therapy in the treatment of stage II seminoma. **PROMET-trial** (**SAKK 08/15**) on recurrent prostate cancer was opened in 2017, but unfortunately, recruitment was below expectations. After necessary modifications were made, more centers were opened for the trial in 2018.

Dr. sc. nat. Markus Hasenfratz
Chief Operations Officer (COO)

Dr. sc. nat. Peter Durrer
Head of Quality Assurance &
Regulatory Affairs

	2017	2018
Total patients	**1265**	**1545**
Patients in Switzerland	1217	1438
Patients in foreign countries	48	107
Patients in SAKK trials	885	1251
Patients in trials with other cooperative groups/partners	380	294
Patients in clinical trials	897	948
Patients in retrospective trials, cohort trials, and biobanks	368	597
Studies open for patient recruitment	**49**	**58**
SAKK trials	23	28
Trials with other cooperative groups/partners	26	30

Further increase in number of trials and patients
In 2018 we again saw a pleasing increase in trial activities, with more patients enrolled in a greater number of trials. The total of 1,545 patients recruited into the 58 open trials conducted by SAKK represented a substantial increase of 22 %. The Swiss member hospitals contributed 1,438 of these patients. The aim to further increase the number of patients was thus clearly achieved in also in 2018.

Trial results and publications
Last year, 50 articles involving SAKK were published in various scientific journals. The full list can be found on page 50 of this report.

SAKK was well represented at the major oncology congresses as well as at more local events, with 8 oral presentations and 26 posters. This included two poster presentations at the ESMO Congress. Eight abstracts were presented at the Swiss Oncology & Hematology Congress (SOHC). A full list of all presentations can be found on page 57 of this report.

As part of our statistical advisory work, we were also able to assist with about 17 smaller and larger non-SAKK projects and contribute to presentations and manuscripts. One of the outcomes of this work was an article published in the *Journal of Clinical Oncology* (JCO) written by PD Dr. med. Richard Cathomas. The statistics team produced 17 clinical trial reports, including five final reports for the authorities.

Further increase in approved trials
The number of trials submitted to the authorities and approved rose again in 2018. The increasing trial activity is also reflected in the key figures of the SAKK Regulatory Affairs department. The number of amendments submitted, the additional trial centers opened, and the annual safety reports submitted all increased as well. The process of trial approvals went well throughout the year, with only isolated delays. Collaboration with the regulatory authorities, the ethics committees, and Swissmedic was improved further and resulted in shorter processing times.

More evaluation of safety signals by the SAKK Safety Office
The SAKK Safety Office also noted the distinct increase in trial activities last year. The number of cases requiring evaluation rose by about 40 %, and there was also a substantial increase in the number of annual safety reports written. A growing safety awareness also led to a strong increase in spontaneous reports of safety signals from pharmaceutical companies whose products we use in our SAKK trials. These reports from outside the trials and their impact on our ongoing SAKK trials had to be evaluated by the Safety Office.

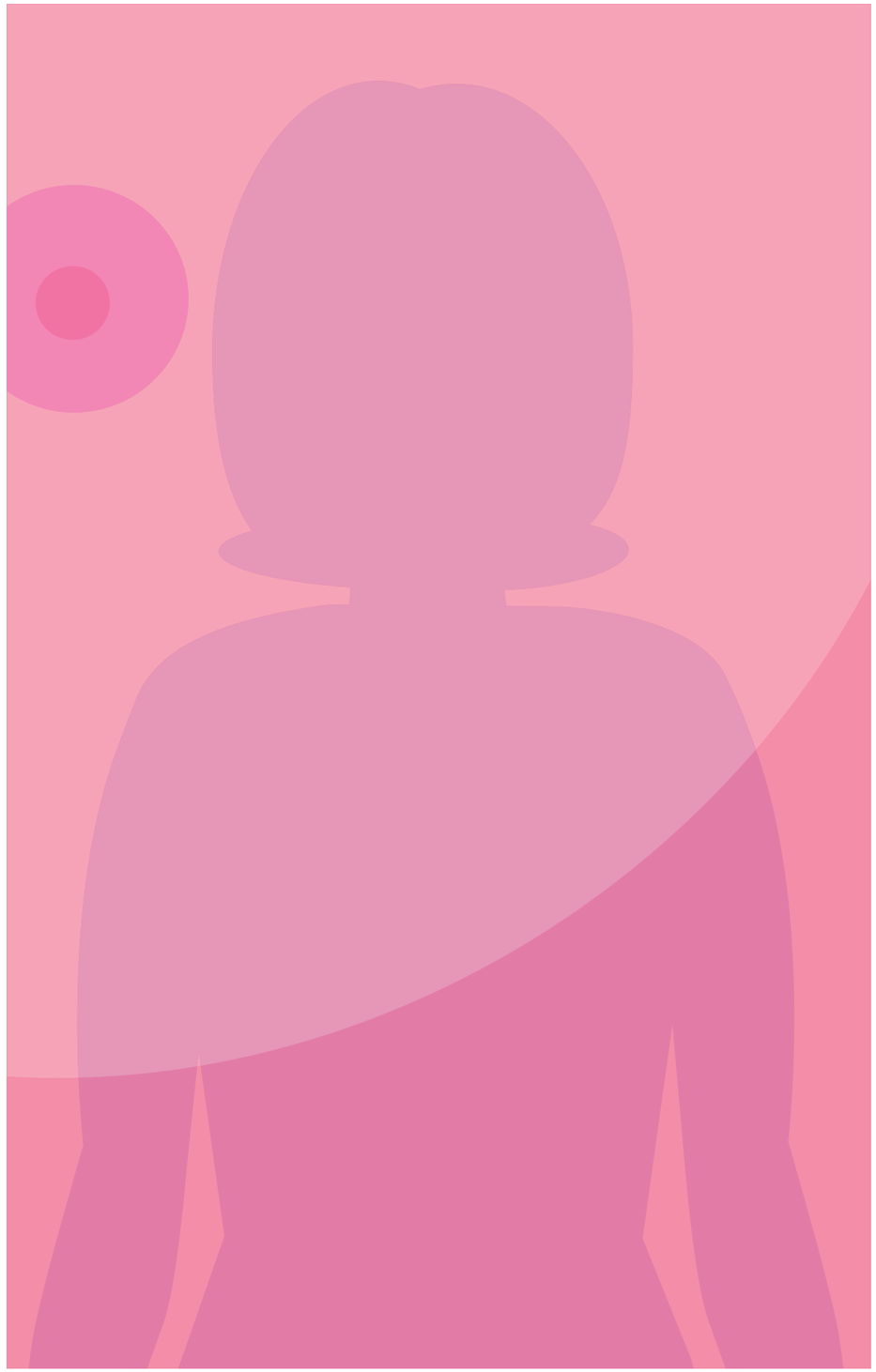
Swissmedic inspections confirm the high standard of quality at SAKK
Swissmedic has been performing regular Good Clinical Practice (GCP) and pharmacovigilance inspections since 2010. During this period, SAKK underwent a routine inspection five times. Last year, a trial center participating in an ongoing SAKK trial was inspected. The outcome of the inspection was very gratifying for SAKK and once again confirmed that we conduct trials in compliance with the current standards and legislation.

Flurina Hoffmann
Head of Fundraising &
Communication

2018 was another exceptionally successful year for the Fundraising & Communication department. In 2017 the sum of roughly CHF 1.7 million in competitive funding was raised; in 2018 the total volume of financial support from foundations rose to nearly CHF 3 million. This money enabled us to tackle several academic trials, among them the major Phase III trial SAKK 09/18 "Lymphadenectomy" and SAKK 23/16 "TAXIS." Trial SAKK 01/18 also met with great approval from the foundations: Commitments from the two foundations Swiss Cancer League and Rising Tide Foundation for Clinical Cancer Research mean that the conducting of the trial is assured. Submission of the SAKK 39/16 "OptiPOM" trial to the administrative commission of the LOA IV/1 foundation of Santesuisse and the Swiss Cancer Research foundation also paid off: The budget for the project is almost fully covered.

Our main institutional fundraising partners in 2018 were once again the Swiss Cancer Research foundation, the Swiss Cancer League, and the Rising Tide Foundation for Clinical Cancer Research. We would also like to thank the foundations that support us repeatedly with smaller amounts: the Joseph and Lina Spicher Foundation, the Basel Cancer League, the Schweizerische Stiftung für Klinische Krebsforschung (SSKK), and the Fondation pour la Recherche et le Traitement medical.

In the area of continuing education, we held our regular events in 2018. The Swiss PostASCO probably set a new record for attendance. It should also be mentioned that SAKK took over the organization of the Chicago in the Mountains (CitM) event. We would also like to express our gratitude to our partners in industry, the members of the industry pool; it is largely thanks to them that we are able, again and again, to offer exciting continuing education courses on the latest research and state-of-the art in treatment.



Mark Jensen
Head of IT & Finance

Finances

The SAKK statement of operations closed in 2018 with a positive annual result of CHF 267'338.80. This indicates a successful financial year. The continuing high level of liquidity posed a challenge to the finance department in its efforts to avoid negative charges; it was largely successful as a result of good cash management. The digitalization of the finance department progressed, with the aim to make processes more efficient. 2018 was a year of preparations; the creditor process will be fully digitalized in the coming year. Another forthcoming task is the preparatory work for an upgrade of our accounting software.

IT

A large amount of trial-related data is managed in the various departments in our organization. In the future, a central data warehouse will ensure that the different information is captured, consolidated, and made electronically evaluable. By linking data, information will be available in full at all times, and this will make our reporting considerably more efficient, flexible, and thus powerful in the future.

The introduction of a new document management system will also create greater efficiency in day-to-day operations. Starting next year, all trial-related documents will be collated in a single system using an electronic workflow. They will be automatically classified, making it faster and easier to search for documents. In addition, all the steps involved in processing documents will be electronically recorded and documented, making them traceable at all times. In the medium term, the new system will also be deployed in other departments, where it will simplify archiving processes.

Finance / IT / Human Resources

Stéphanie Mohler
Head of Human Resources

Human Resources

The expansion of our trial and project activities last year led to a slight increase in our headcount. As of the end of 2018, our organization is well-placed to manage the further increase in trial activities, with a total of 82 specialists comprising 68.9 FTEs.

The management process initiated in 2017 was continued in 2018. The SAKK management forum (comprising the SAKK management and the extended management) discussed relevant topics at a number of externally moderated workshops. As a result, the committee adopted new guiding principles for collaboration at the end of 2018: reliability, empowerment, and resource and service orientation. Systematic alignment with these values should have a positive impact on collaboration both internally and within our network. At the same time, a new performance review template was introduced to enable even more differentiated assessment of employees' capabilities. In particular, this template allows the capabilities needed for successful implementation of our defined guiding principles to be documented.

On November 8, 2018, National Future Day, we opened our doors to the next generation. Six children between 11 and 15 years of age visited our Coordinating Center in Bern, where they learned from the various departments about the work done in clinical cancer research. The youngsters were delighted by the introduction they were given, and the day was a great success.

Balance sheet

As of December 31 (in CHF)	**2018**		**2017**	
Assets				
Cash and cash equivalents	10’716’389.68		10’722’782.87	
Accounts receivable	1’425’178.46		3’032’967.90	
Other accounts receivable	19’402.27		19’402.27	
Prepaid expenses and deferred income	2’654’174.80		1’209’488.62	
Total current assets	**14’815’145.21**	62.1 %	**14’984’641.66**	61.0 %
Financial assets	9’032’316.00		9’574’772.00	
Total fixed assets	**9’032’316.00**	37.9 %	**9’574’772.00**	39.0 %
Total assets	**23’847’461.21**	100.0 %	**24’559’413.66**	100.0 %
Liabilities				
Accounts payable	3’015’930.27		2’221’002.05	
Other accounts payable	172’490.21		120’335.10	
Deferred income and accrued expenses	5’816’522.91		7’157’310.17	
Total short-term liabilities	**9’004’943.39**	37.8 %	**9’498’647.32**	38.7 %
Provisions for liability claims	608’155.88		608’155.88	
Other Provisions	-		-	
Total long-term liabilities	**608’155.88**	2.6 %	**608’155.88**	2.5 %
«Education Grant» fund	30’000.00		30’000.00	
«Special purpose» fund	167’932.38		67’932.38	
«Hubacher» fund	9’804’409.62		10’389’996.94	
Total special purpose fund capital	10’002’342.00	41.9 %	10’487’929.32	42.7 %
Organizational capital				
Free capital as at 1 January	3’964’681.14		3’279’947.26	
Group result	267’338.80		684’733.88	
Free capital as at 31 December	4’232’019.94		3’964’681.14	
Total organizational capital	**4’232’019.94**	17.7 %	**3’964’681.14**	16.1 %
Total liabilities	**23’847’461.21**	100.0 %	**24’559’413.66**	100.0 %

Finance / IT / Human Resources

Statement of operations

January 1 to December 31 (in CHF)	**2018**		**2017**	
Operating income				
Research contributions SERI[1]	5’628’614.00		5’832’434.00	
Research contributions CLS[2]	441’850.00		493’000.00	
Research contributions CRS[3]	1’394’850.00		1’428’800.00	
Research contributions SSKK[4]	100’000.00		250’000.00	
Research contributions, third parties	644’459.85		864’774.90	
Research contributions, Swiss health insurers	2’365’435.25		1’482’271.60	
Income from industry partnerships	8’570’296.01		4’272’981.86	
Income from foreign study groups	465’146.25		1’558’401.62	
Income from Cancer Bulletin	224’987.52		275’685.00	
Income from Patient Advisory Board	35’275.00		35’275.00	
Donations, bequests, legacies	61’860.56		519’083.68	
Miscellaneous income	617’248.88		958’995.52	
Losses on receivables	105’000.00		-104’000.00	
Total operating income	**20’655’023.32**	100.0 %	**17’867’703.18**	100.0 %
Operating costs				
Miscellaneous study-related expenses	-1’583’334.90		-1’418’703.09	
Research contributions IBCSG[5], ETOP	-176’666.00		-293’333.00	
Research contributions, centers	-6’787’186.71		-4’953’549.57	
Travel, hospitality expenses	-462’527.60		-567’112.77	
Other operating expenses	-142’497.71		-184’406.29	
Total operating expenses	**-9’152’212.92**	-44.3 %	**-7’417’104.72**	-41.5 %
Interim result 1	**11’502’810.40**	55.7 %	**10’450’598.46**	58.5 %
Coordination expenses				
Personnel expenses	-9’186’333.44		-8’279’637.82	
Other coordination expenses	-2’063’179.56		-1’537’896.89	
Total coordination expenses	**-11’249’513.00**	-54.5 %	**-9’817’534.71**	-54.9 %
Interim result 2	**253’297.40**	1.2 %	**633’063.75**	3.5 %
Financial result				
Financial income	43’040.15		75’301.58	
Financial expenses	-45’205.20		-23’631.45	
Total financial result	**-2’165.05**	0.0 %	**51’670.13**	0.3 %
Interim result 3	**251’132.35**	1.2 %	**684’733.88**	3.8 %
Out-of-period result				
Out-of period income	16’279.75		-	
Out-of period expenses	-73.30		-	
Total out-of-period result relating to a different accounting period	16’206.45	0.1 %	-	0.0 %
Annual result	**267’338.80**	1.3 %	**684’733.88**	3.8 %

1 State Secretariat for Education, Research and Innovation 2 Cancer league Switzerland 3 Cancer Research Switzerland
4 Swiss Foundation for Clinical Cancer Research 5 International Breast Cancer Study Group, European Thoracic Oncology Platform

Notes to the 2018 annual financial statements

As of December 31	2018	2017
Information compliant with Art. 957–962 SCO		
Number of personnel		
Bandwidth of full-time equivalents (average for year)	>50 bis 250	>50 bis 250
Valuation of assets at market value		
Financial investments at market value on 31.12	9'032'316.00 CHF	9'574'772.00 CHF
Auditors' fee		
Fee for auditing services	8'616.00 CHF	13'600.00 CHF
Fee for other services	0.00 CHF	0.00 CHF
Remainder of liabilities from purchase contract-type leasing transactions and other leasing liabilities not maturing or called within 12 months after the balance sheet date.		
Fixed rental contract (offices) up to 31.5.2026	1'134'928 CHF	1'147'680 CHF
Fixed rental contract (offices) up to 30.4.2026	23'843'338 CHF	24'114'285 CHF
Fixed rental contract (offices) up to 30.8.2027	9'012'640 CHF	9'099'300 CHF
Total	33'990'906 CHF	34'361'265 CHF
Notes on extraordinary, non-recurring or out-of-period items in the income statement		
Out-of-period income	-73 CHF	0.00 CHF
Out-of-period expenses	16'280 CHF	0.00 CHF
Total	16'206 CHF	0.00 CHF

These annual financial statements have been prepared in accordance with the requirements of Swiss law, in particular the articles on commercial accounting and financial reporting in the Code of Obligations (Art. 957 to 962).

BDO

Phone +41 31 327 17 17
Fax +41 31 327 17 38
www.bdo.ch

BDO Ltd
Hodlerstrasse 5
3001 Berne

REPORT OF THE STATUTORY AUDITOR
To the General Assembly of the Swiss Group for Clinical Cancer Research, Berne

Report of the Statutory Auditor on the Financial Statements

As statutory auditor, we have audited the accompanying financial statements of the Swiss Group for Clinical Cancer Research, which comprise the balance sheet as per 31st December 2018, the income statement, the cash flow statement, the statements of changes in equity/funds and notes for the year then ended.

Board's Responsibility

The Board is responsible for the preparation of these financial statements in accordance with the requirements of Swiss law and the company's articles of incorporation. This responsibility includes designing, implementing and maintaining an internal control system relevant to the preparation of financial statements that are free from material misstatement, whether due to fraud or error. The Board is further responsible for selecting and applying appropriate accounting policies and making accounting estimates that are reasonable in the circumstances.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Swiss law and Swiss Auditing Standards. Those standards require that we plan and perform the audit to obtain reasonable assurance whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers the internal control system relevant to the entity's preparation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control system. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made, as well as evaluating the overall presentation of the financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements for the year ended 31st December 2018 comply with Swiss law and the company's articles of incorporation.

Report on Other Legal Requirements

We confirm that we meet the legal requirements on licensing according to the Auditor Oversight Act (AOA) and independence (article 728 Code of Obligations (CO)) and that there are no circumstances incompatible with our independence.

In accordance with article 728a para. 1 item 3 CO and Swiss Auditing Standard 890, we confirm that an internal control system exists, which has been designed for the preparation of financial statements according to the instructions of the Board.

Berne, 11 April 2019

BDO Ltd

Matthias Hildebrandt
Licensed Audit Expert

Simon Kehrli
Auditor in Charge
Licensed Audit Expert

Advisory Board

General Assembly

Aargau	Baden	Basel	Bern	Biel
Fribourg	Genève	Graubünden	Hirslanden	Solothurn
St. Gallen	Thun	Thurgau	Ticino	Valais
Vaud	Winterthur	Zentralschweiz	Zürich Triemli	Zürich USZ
Budapest	Strasbourg	Freiburg i. B.	Feldkirch	

Chairman

SAKK Board

Project Groups

Breast Cancer
Dr. med. Andreas Müller

Lung Cancer
PD Dr. med. Martin Früh

Leukemia
Prof. Dr. med. Thomas Pabst

Lymphoma
PD Dr. med. Urban Novak

Gastrointestinal Cancer
PD Dr. med. et. Dr. phil.
Andreas Wicki

New Anticancer Treatments
Prof. Dr. med. Markus Jörger

Urogenital Tumors
PD. Dr. med. Aurelius Omlin

Working Groups

CNS Tumors
PD Dr. med. Patrick Roth

Head and Neck Cancer
Dr. med. Marco Siano

Imaging in Diagnostics
and Therapy Monitoring
Prof. Dr. med. Hendrik
von Tengg-Kobligk

Melanoma
Dr. med. Simone M. Goldinger

Sarcoma
Dr. med. Christian Rothermundt

Supportive Care & Palliative
Cancer Care
Prof. Dr. rer. med. Manuela Eicher

Gynecological Cancers
Prof. Dr. med. Viola A.
Heinzelmann-Schwarz

Immuno-Oncology
Prof. Dr. med. et phil.
George Coukos

Molecular Oncology
PD Dr. med. et Dr. phil. nat.
Sacha Rothschild

Sections

Network for Cancer Predisposition
Testing and Counseling
PD Dr. med. Sheila Unger

Network for Outcomes Research
Dr. med. Konstantin Dedes

Pathology
Prof. Dr. Rupert Langer

Radio-Oncology
Prof. Dr. Frank Zimmermann

Surgery
Prof. Dr. med. Christoph Kettelhack

SAKK Coordinating Center

CEO

Executive Board

- Clinical Trial Management
- Quality Assurance & Regulatory Affairs
- Fundraising & Communication
- IT & Finance

SAKK Board

Prof. Dr. med. Roger von Moos
Cantonal Hospital Graubünden
(President)

Prof. Dr. med. Viviane Hess
University Hospital Basel
(Vice President)

Prof. Dr. med.
Gabriela Baerlocher
University Hospital Bern

Prof. Dr. med.
Stefan Breitenstein
Cantonal Hospital Winterthur

PD Dr. med.
Richard Cathomas
Cantonal Hospital Graubünden

Prof. Dr. med.
Christoph Driessen
Cantonal Hospital St. Gallen

Prof. Dr. med.
Olivier Michielin
University Hospital Lausanne

Prof. Dr. med.
Ellen C. Obermann
University of Basel

Prof. Dr. med.
Bernhard C. Pestalozzi
University Hospital Zurich

Prof. Dr. med.
Ludwig Plasswilm
Cantonal Hospital St. Gallen

Prof. Dr. med.
Miklos Pless
Cantonal Hospital Winterthur

Prof. Dr. med. Emanuele Zucca
Oncology Institute of Southern
Switzerland (IOSI)

The Swiss Group for Clinical Cancer Research SAKK would like to express our gratitude for the generous support received.

Contributions from the public sector and third parties:
- State Secretariat for Education, Research and Innovation (SERI)
- Swiss Cancer Research foundation (SCR)
- Swiss Cancer League (SCL)
- Bequests
- Bern Cancer League
- Gateway for Cancer Research
- Private donors
- Promedica
- Rising Tide Foundation for Clinical Cancer Research
- Schweizerische Stiftung für Klinische Krebsforschung (SSKK)
- Stiftung zur Krebsbekämpfung
- Werner and Hedy Berger-Janser Foundation

SAKK Industry Pool 2018

Sincere thanks go to the supporting pharmaceutical companies:

- AbbVie AG
- Amgen Switzerland AG
- Astellas Pharma AG
- AstraZeneca AG
- Bayer (Schweiz) AG
- Boehringer Ingelheim (Schweiz) GmbH
- Bristol-Myers Squibb SA
- Celgene GmbH
- Daiichi Sankyo (Schweiz) AG
- Eli Lilly (Suisse) SA
- Genomic Health Intl' Sàrl
- Gilead Sciences Switzerland Sàrl
- Incyte Inc.
- Janssen-Cilag AG
- Jazz Pharmaceuticals
- Lipomed AG
- Merck (Schweiz) AG
- MSD Merck Sharp & Dohme AG
- Mundipharma Medical Company
- Novartis Pharma (Schweiz) AG
- Pfizer AG
- PharmaMar S.A.
- Pierre Fabre Pharma AG
- Roche Pharma (Schweiz) AG
- Sandoz Pharmaceuticals AG
- Sanofi-Aventis (Schweiz) AG
- Shire
- Takeda Pharma AG
- TESARO Bio GmbH
- Teva Pharma AG
- Vifor AG

Address
Swiss Group for Clinical Cancer Research (SAKK)
SAKK Coordinating Center
Effingerstrasse 33
3008 Bern
Tel. +41 31 389 91 91
Fax +41 508 41 42
sakk.ch
info@sakk.ch

Account for donations to SAKK:
PC 60-295422-0

Conducted trials 2018

Trials activated in 2018

Trial name	Trial title	Coordinating Investigator	Activated
Breast Cancers			
IBCSG 55-17 TOUCH	Phase II open-label, multicenter, randomized trial of neoadjuvant palbociclib in combination with hormonal therapy and HER2 blockade versus paclitaxel in combination with HER2 blockade for elderly patients with hormone receptor positive/HER2 positive early breast cancer.	Patrik Weder	30.10.2018
SAKK 23/16	Tailored AXIllary Surgery with or without axillary lymph node dissection followed by radiotherapy in patients with clinically node-positive breast cancer (TAXIS). A multicenter randomized open labeled phase III trial.	Walter Weber	31.07.2018
Gynecological Tumors			
ENGOT-en7_ AtTEnd	Phase III double-blind randomized placebo controlled trial of Atezolizumab in combination with Paclitaxel and Carboplatin in women with advanced/recurrent endometrial cancer.	Manuela Rabaglio-Poretti	21.12.2018
Lung Cancers			
ETOP ALERT	Single arm phase II trial evaluating the activity of Alectinib for the treatment of pretreated RET-rearranged advanced NSCLC.	Christian Britschgi	05.06.2018
SAKK 19/17	First line durvalumab in patients with PD-L1 positive, advanced NSCLC with performance status 2 unsuitable for combination chemotherapy. A multicenter, single-arm phase II trial.	Michael Mark	23.10.2018
Lymphomas			
HOVON 127/ SAKK 37/16	Phase III study comparing R-CODOX-M/R-IVAC versus dose-adjusted EPOCH-R (DA-EPOCH-R) for patients with newly diagnosed high risk Burkitt lymphoma.	Frank Stenner	11.01.2018
IELSG-42	An international phase II trial assessing tolerability and efficacy of sequential Methotrexate-Aracytin-based combination and R-ICE combination followed by high-dose chemotherapy supported by autologous stem cell transplant in patients with systemic DLBCL with CNS involvement at diagnosis or relapse.	Stefan Balabanov	29.01.2018
IELSG-43	High-dose chemotherapy and autologous stem cell transplant consolidating conventional chemotherapy in primary CNS lymphoma – randomized phase III trial (Matrix).	Thomas Pabst	12.11.2018
SAKK 39/16	Alternate day dosing of Pomalidomide in patients with refractory Multiple Myeloma. A multicenter, single arm, open label phase II trial.	Thilo Zander	16.09.2018
TRIANGLE	Autologous Transplantation after a Rituximab/Ibrutinib/ Ara-c containing Induction in Generalized Mantle Cell Lymphoma – a randomized European MCL Network Trial.	Ulrich Mey	29.01.2018
New Anticancer Treatments			
SAKK 65/16	TLD-1, a novel liposomal doxorubicin, in patients with advanced solid tumors. A multicenter open-label single-arm phase I trial.	Markus Jörger	26.10.2018
SAKK 68/17	A phase I study of LY3200882 in patients with solid tumors (oral TGFß inhibitor).		13.09.2018
SAKK 69/17	Open-label, FIH dose-escalation study to evaluate the safety, tolerability, PK, PD, MTD or optimum biologic dose of the ATR inhibitor BAY 1895344 in patients with advanced solid tumors and lymphomas.	Markus Jörger	25.05.2018
Sarcomas			
EURO EWING 2012	International Randomised Controlled Trial for the Treatment of Newly Diagnoxsed Ewing's Sarcoma Family of Tumours Euro Ewing 2012.	Attila Kollár	31.08.2018
SAKK 57/16	NAPAGE: NAb-PAclitaxel and GEmcitabine in advanced soft tissue sarcoma. A multicenter open-label single arm phase Ib/IIa trial.	Antonia Digklia	01.10.2018
Urogenital Cancers			
SAKK 06/17	Neoadjuvant and adjuvant durvalumab in combination with neoadjuvant chemotherapy in patients with operable urothelial cancer. A multicenter, single-arm phase II trial.	Richard Cathomas	15.05.2018

Trials open for accrual in 2018

Trial name	Trial title	Coordinating Investigator	Activated
Breast Cancers			
IBCSG 48-14 POSITIVE	A study evaluating the pregnancy outcomes and safety of interrupting endocrine therapy for young women with endocrine responsive breast cancer who desire pregnancy (POSITIVE).	Olivia Pagani	02.12.2014
IBCSG 50-14 OLYMPIA	A randomised, double-blind, parallel group, placebo-controlled multi-centre Phase III study to assess the efficacy and safety of olaparib vs placebo as adjuvant treatment in patients with high risk germline BRCA1/2 mutations and high risk HER2 negative primary breast cancer who have completed definitive local treatment and neoadjuvant or adjuvant chemotherapy.	Urban Novak	23.11.2015
IBCSG 52-15 PALLAS	PALbociclib CoLlaborative Adjuvant Study: A randomized phase III trial of Palbociclib with standard adjuvant endocrine therapy versus standard adjuvant endocrine therapy alone for hormone receptor positive (HR+) / human epidermal growth factor receptor 2 (HER2)-negative early breast cancer.	Marcus Vetter	08.11.2016
IBCSG 55-17 TOUCH	Phase II open-label, multicenter, randomized trial of neoadjuvant palbociclib in combination with hormonal therapy and HER2 blockade versus paclitaxel in combination with HER2 blockade for elderly patients with hormone receptor positive/HER2 positive early breast cancer.	Patrik Weder	30.10.2018

Trial name	Trial title	Coordinating Investigator	Activated
SAKK 21/12	A stratified, multicenter Phase II trial of transdermal CR1447 (4-OH-testosterone) in endocrine responsive-HER2 negative and triple negative-androgen receptor positive metastatic or locally advanced breast cancer.	Marcus Vetter	14.04.2014
SAKK 23/16	Tailored AXIllary Surgery with or without axillary lymph node dissection followed by radiotherapy in patients with clinically node-positive breast cancer (TAXIS). A multicenter randomized open labeled phase III trial.	Walter Weber	31.07.2018
SAKK 24/14	Anti-EGFR-immunoliposomes loaded with doxorubicin in patients with advanced triple negative EGFR positive breast cancer - A multicenter single arm phase II trial.	Ralph Winterhalder	20.10.2016
SAKK 25/14	Eribulin as 1st line treatment in elderly patients (≥ 70 years) with advanced breast cancer: a multicenter phase II trial.	Ursula Hasler-Strub	11.08.2015
Gastrointestinal Cancers			
PRODIGE 32	Systematic surgery vs. monitoring and salvage surgery in operable oesophageal cancer in complete clinical response after chemotherapy. Strategic multicenter randomized phase II-III trial.	Thomas Ruhstaller	28.03.2017
PROSPECT	A phase II/III trial of neoadjuvant folfox, with selective use of combined modality chemoradiation vs. preoperative combined modality chemoradiation for locally advanced rectal cancer patients undergoing low anterior resection with total mesorectal excision.	Michael Montemurro	02.07.2015
SAKK 41/13	Adjuvant aspirin treatment in PIK3CA mutated colon cancer patients. A randomized, double-blinded, placebo-controlled, phase III trial.	Ulrich Güller	26.04.2016
SAKK 41/14	Physical activity program in patients with metastatic colorectal cancer who receive palliative first-line chemotherapy. A multicenter open label randomized controlled phase III trial.	Viviane Hess	29.01.2016
SAKK 41/16	SAKK 41/16 (RECAP trial): Neoadjuvant treatment with Regorafenib and Capecitabine combined with radiotherapy in locally advanced rectal cancer. A Phase Ib trial.	Sara Bastian	27.02.2017
Gynecological Tumors			
ENGOT-en7_ AtTEnd	Phase III double-blind randomized placebo controlled trial of Atezolizumab in combination with Paclitaxel and Carboplatin in women with advanced/recurrent endometrial cancer.	Manuela Rabaglio-Poretti	21.12.2018
Head and Neck Cancers			
SAKK 10/16	Phase III study assessing The "best of" radiotherapy compared to the "best of" surgery (trans-oral surgery (TOS) in patients with T1-T2, N0 oropharyngeal carcinoma.	Frank Zimmermann	27.11.2017
Leukemias			
CLL13	A phase 3 multicenter, randomized, prospective, open-label trial of standard chemoimmunotherapy (FCR/BR) versus rituximab plus venetoclax (RVe) versus obinutuzumab (GA101) plus venetoclax (GVe) versus obinutuzumab plus ibrutinib plus venetoclax (GIVe) in fit patients with previously untreated chronic lymphocytic leukemia (CLL) without Del(17p) or TP53 mutation.	Michael Gregor	17.07.2017

Trial name	Trial title	Coordinating Investigator	Activated
GRAALL 2014	Multicenter trial for the treatment of Acute Lymphoblastic Leukemia (ALL) in younger adults (18-59 years) – Comprising 3 sub-studies according to lineage (2 sub-substudies) GRAALL-2014/B & QUEST substudy Ph-negative B-lineage ALL GRAALL-2014/T & ATRIALL substudy T-ALL GRAAPH-2014 Ph+ ALL.	Yves Chalandon	03.05.2016
HOVON 103 - SEL	A randomized phase II multicenter study with a safety run-in to assess the tolerability and efficacy of the addition of oral selinexor (KPT-330) to standard induction chemotherapy in AML and high risk myelodysplasia (MDS) (IPSS-R > 4.5) in patients aged ≥ 66 years.	Georg Stüssi	19.06.2017
HOVON 135	A randomized phase II multicenter study to assess the tolerability and efficacy of the addition of ibrutinib to 10-day decitabine in UNFIT (i.e. HCT-CI ≥ 3) AML and high risk myelodysplasia (MDS) (IPSS-R > 4.5) patients aged ≥ 66 years. A study in the frame of the masterprotocol of parallel randomized phase II studies in UNFIT-older AML/high-risk MDS patients.	Sabine Blum	26.10.2016
Lung Cancers			
EORTC PEARLS	A randomized, phase 3 trial with anti-PD-1 monoclonal antibody pembrolizumab (MK-3475) versus placebo for patients with early stage NSCLC after resection and completion of standard adjuvant therapy (PEARLS).	Alessandra Curioni Fontecedro	08.02.2016
ETOP ALERT	Single arm phase II trial evaluating the activity of Alectinib for the treatment of pretreated RET-rearranged advanced NSCLC.	Christian Britschgi	05.06.2018
ETOP BOOSTER	A randomised phase II trial of osimertinib and bevacizumab versus osimertinib alone as second-line treatment in stage IIIb-IVb NSCLC with confirmed EGFRm and T790M.	Martin Früh	15.06.2017
ETOP PROMISE-meso	A multicentre randomised phase III trial comparing pembrolizumab versus standard chemotherapy for advanced pre-treated malignant pleural mesothelioma.	Alessandra Curioni Fontecedro	06.09.2017
ETOP SPLENDOUR	A randomised, open-label phase III trial evaluating the addition of denosumab to standard first-line anticancer treatment in advanced NSCLC.	Roger von Moos	12.01.2015
Lung ART EORTC	LungArt: Phase III study comparing post-operative conformal radiotherapy to no post-operative radiotherapy in patients with completely resected non-small cell lung cancer and mediastinal N2 Involvement.	Oliver Riesterer	18.05.2015
SAKK 16/14	Anti-PD-L1 antibody MEDI4736 in addition to neoadjuvant chemotherapy in patients with stage IIIA(N2) non-small cell lung cancer (NSCLC). A multicenter single-arm phase II trial.	Sacha Rothschild	11.04.2016
SAKK 17/16	Lurbinectedin Monotherapy in Patients with Progressive Malignant Pleural Mesothelioma. A Multicenter, Single-arm Phase II Trial.	Ioannis Metaxas	28.09.2017
SAKK 19/16	Binimetinib, pemetrexed and cisplatin, followed by maintenance with binimetinib and pemetrexed, in patients with advanced non-small cell lung cancer with KRAS mutations. A multicenter phase IB trial.	Martin Früh	25.04.2017
SAKK 19/17	First line durvalumab in patients with PD-L1 positive, advanced NSCLC with performance status 2 unsuitable for combination chemotherapy. A multicenter, single-arm phase II trial.	Michael Mark	23.10.2018

Trial name	Trial title	Coordinating Investigator	Activated
Lymphomas			
HD 21	HD21 for advanced stages: Treatment optimization trial in the first-line treatment of advanced stage Hodgkin lymphoma; comparison of 4-6 cycles of escalated BEACOPP with 4-6 cycles of BrECADD.	Alden Moccia	29.03.2017
HOVON 127/ SAKK 37/16	Phase III study comparing R-CODOX-M/R-IVAC versus dose-adjusted EPOCH-R (DA-EPOCH-R) for patients with newly diagnosed high risk Burkitt lymphoma.	Frank Stenner	11.01.2018
IELSG-37	A randomized, open-label, multicentre, two-arm phase III comparative study assessing the role of involved mediastinal radiotherapy after Rituximab containing chemotherapy regimens to patients with newly diagnosed Primary Mediastinal Large B-Cell Lymphoma (PMLBCL).	Emanuele Zucca	15.11.2011
IELSG-42	An international phase II trial assessing tolerability and efficacy of sequential Methotrexate-Aracytin-based combination and R-ICE combination followed by high-dose chemotherapy supported by autologous stem cell transplant in patients with systemic DLBCL with CNS involvement at diagnosis or relapse.	Stefan Balabanov	29.01.2018
IELSG-43	High-dose chemotherapy and autologous stem cell transplant consolidating conventional chemotherapy in primary CNS lymphoma – randomized phase III trial (Matrix).	Thomas Pabst	12.11.2018
SAKK 35/14	Rituximab with or without ibrutinib for untreated patients with advanced follicular lymphoma in need of therapy. A randomized, double-blinded, SAKK and NLG collaborative Phase II trial.	Michael Pedersen	15.10.2015
SAKK 35/15	A phase I trial of obinutuzumab in combination with venetoclax in previously untreated follicular lymphoma patients.	Anastasios Stathis	23.02.2017
SAKK 36/13	Combination of ibrutinib and Bortezomib followed by ibrutinib maintenance to treat patients with relapsed and refractory mantle cell lymphoma. A multicenter Phase I/II trial.	Urban Novak	11.08.2015
SAKK 39/16	Alternate day dosing of Pomalidomide in patients with refractory Multiple Myeloma. A multicenter, single arm, open label phase II trial.	Thilo Zander	16.08.2018
T-Cell Project	Prospective collection of data in patients with peripheral T-cell lymphoma	Felicitas Hitz	26.07.2006
TRIANGLE	Autologous Transplantation after a Rituximab/Ibrutinib/ Ara-c containing Induction in Generalized Mantle Cell Lymphoma – a randomized European MCL Network Trial.	Ulrich Mey	29.01.2018
New Anticancer Treatments			
SAKK 11/16	Personalized and cell-based antitumor immunization MVX-ONCO-1 in advanced head and neck squamous cell carcinoma. A single arm, open label, multicenter phase II trial.	Olivier Michielin	27.06.2017
SAKK 65/16	TLD-1, a novel liposomal doxorubicin, in patients with advanced solid tumors. A multicenter open-label single-arm phase I trial.	Markus Jörger	26.10.2018
SAKK 67/15	An open-label Phase 1/2a study of BAL101553 administered as intravenous 48-hour infusions in adult patients with advanced solid tumors or recurrent glioblastoma.	Markus Jörger	19.08.2016
SAKK 68/17	A phase I study of LY3200882 in patients with solid tumors (oral TGFß inhibitor).		13.09.2018

Trial name	Trial title	Coordinating Investigator	Activated
SAKK 69/17	Open-label, FIH dose-escalation study to evaluate the safety, tolerability, PK, PD, MTD or optimum biologic dose of the ATR inhibitor BAY 1895344 in patients with advanced solid tumors and lymphomas.	Markus Jörger	25.05.2018
Sarcomas			
EURO EWING 2012	International Randomised Controlled Trial for the Treatment of Newly Diagnosed Ewing's Sarcoma Family of Tumours Euro Ewing 2012.	Attila Kollár	31.08.2018
SAKK 57/16	NAPAGE: NAb-PAclitaxel and GEmcitabine in advanced soft tissue sarcoma. A multicenter open-label single arm phase Ib/IIa trial.	Antonia Digklia	01.10.2018
Supportive and Palliative Cancer Care			
SAKK 95/16	Patterns of care for patients with metastatic bone disease in solid tumors – a cross sectional survey study.	Michael Mark	01.11.2017
Urogenital Cancers			
SAKK 01/10	Carboplatin Chemotherapy and Involved Node Radiotherapy in Stage IIA/B Seminoma.	Alexandros Papachristofilou	15.06.2012
SAKK 06/14	A phase I/II open label clinical trial assessing safety and efficacy of intravesical instillation of VPM1002BC in patients with recurrent non-muscle invasive bladder cancer after standard BCG therapy.	Cyrill Rentsch	07.09.2015
SAKK 06/17	Neoadjuvant and adjuvant durvalumab in combination with neoadjuvant chemotherapy in patients with operable urothelial cancer. A multicenter, single-arm phase II trial.	Richard Cathomas	15.05.2018
SAKK 07/17	Nivolumab in combination with Ipilimumab in patients with metastatic renal cell carcinoma: A multicenter single-arm phase II trial.	Frank Stenner	13.12.2017
SAKK 08/14	Investigation of Metformin in patients with castration resistant Prostate Cancer in combination with Enzalutamide vs. Enzalutamide alone (IMPROVE TRIAL) A randomized, open label, phase II trial.	Christian Rothermundt	20.05.2016
SAKK 08/15	Multicenter, Randomized Phase II Trial of Salvage Radiotherapy +/- Metformin for Patients with Prostate Cancer after Prostatectomy.	Daniel M. Aebersold	22.09.2017
SAKK 08/16	ODM-201 maintenance therapy in patients with metastatic castration resistant prostate cancer (mCRPC) previously treated with novel hormonal agents and non-progressive disease after subsequent treatment with a taxane: A multicenter randomized double-blind placebo-controlled phase II trial.	Silke Gillessen	31.03.2017
SAKK 63/12	Prospective cohort study with collection of clinical data, serum and plasma of patients with prostate disease.	Daniel Engeler	15.10.2014
SAKK 96/12	Prevention of Symptomatic Skeletal Events with Denosumab Administered every 4 Weeks versus every 12 Weeks – A Non-Inferiority Phase III Trial.	Roger von Moos	16.07.2014
STAMPEDE	Systemic Therapy in Advancing or Metastatic Prostate Cancer: Evaluation of Drug Efficacy A multi-arm multi-stage randomised controlled trial.	George Thalmann	11.01.2010

Trials closed for accrual in 2018

Trial name	Trial title	Coordinating Investigator	Closed
Breast Cancers			
IBCSG 52-15 PALLAS	PALbociclib CoLlaborative Adjuvant Study: A randomized phase III trial of Palbociclib with standard adjuvant endocrine therapy versus standard adjuvant endocrine therapy alone for hormone receptor positive (HR+) / human epidermal growth factor receptor 2 (HER2)-negative early breast cancer.	Marcus Vetter	30.11.2018
SAKK 21/12	A stratified, multicenter Phase II trial of transdermal CR1447 (4-OH-testosterone) in endocrine responsive-HER2 negative and triple negative-androgen receptor positive metastatic or locally advanced breast cancer.	Marcus Vetter	24.07.2018
Gastrointestinal Cancers			
PROSPECT	A phase II/III trial of neoadjuvant folfox, with selective use of combined modality chemoradiation vs. preoperative combined modality chemoradiation for locally advanced rectal cancer patients undergoing low anterior resection with total mesorectal excision.	Michael Montemurro	28.12.2018
Leukemias			
HOVON 135	A randomized phase II multicenter study to assess the tolerability and efficacy of the addition of ibrutinib to 10-day decitabine in UNFIT (i.e. HCT-CI ≥ 3) AML and high risk myelodysplasia (MDS) (IPSS-R > 4.5) patients aged ≥ 66 years. A study in the frame of the masterprotocol of parallel randomized phase II studies in UNFIT-older AML/high-risk MDS patients.	Sabine Blum	13.06.2018
Lung Cancers			
ETOP PROMISE-meso	A multicentre randomised phase III trial comparing pembrolizumab versus standard chemotherapy for advanced pre-treated malignant pleural mesothelioma.	Alessandra Curioni Fontecedro	14.08.2018
ETOP SPLENDOUR	A randomised, open-label phase III trial evaluating the addition of denosumab to standard first-line anticancer treatment in advanced NSCLC.	Roger von Moos	10.01.2018
Lung ART EORTC	LungArt: Phase III study comparing post-operative conformal radiotherapy to no post-operative radiotherapy in patients with completely resected non-small cell lung cancer and mediastinal N2 Involvement.	Oliver Riesterer	23.05.2018
SAKK 17/16	Lurbinectedin Monotherapy in Patients with Progressive Malignant Pleural Mesothelioma. A Multicenter, Single-arm Phase II Trial.	Ioannis Metaxas	25.10.2018
Lymphomas			
IELSG-42	An international phase II trial assessing tolerability and efficacy of sequential Methotrexate-Aracytin-based combination and R-ICE combination followed by high-dose chemotherapy supported by autologous stem cell transplant in patients with systemic DLBCL with CNS involvement at diagnosis or relapse.	Stefan Balabanov	03.08.2018
T-Cell Project	Prospective collection of data in patients with peripheral T-cell lymphoma	Felicitas Hitz	30.07.2018
Supportive and Palliative Cancer Care			
SAKK 95/16	Patterns of care for patients with metastatic bone disease in solid tumors – a cross sectional survey study.	Michael Mark	07.05.2018
Urogenital Cancers			
SAKK 01/10	Carboplatin Chemotherapy and Involved Node Radiotherapy in Stage IIA/B Seminoma.	Alexandros Papachristofilou	26.06.2018
SAKK 06/14	A phase I/II open label clinical trial assessing safety and efficacy of intravesical instillation of VPM1002BC in patients with recurrent non-muscle invasive bladder cancer after standard BCG therapy.	Cyrill Rentsch	27.03.2018

Accrual numbers per disease and member

Urogenital Cancers	Head and Neck Cancers	Lung Cancers	Breast Cancers	Leukemias	Lymphomas	Gastrointestinal Cancers	Gynaecological Cancers	Sarcomas	Supportive and Palliative Cancer Care	New Anticancer Treatments	Total			
523	**4**	**98**	**276**	**74**	**135**	**69**	**0**	**3**	**344**	**19**	**1545**		Members	Hospitals
10	0	5	4	4	4	0	0	0	0	0	**27**		**Aargau**	**Kantonsspital Aarau**
20	0	3	12	2	2	0	0	0	20	0	**59**		**Baden**	**Kantonsspital Baden**
48	0	7	30	5	9	2	0	0	8	0	**109**		**Basel**	**Brustzentrum Basel, Praxis Thorn Claraspital; Kantonsspital Baselland Bruderholz; Kantonsspital Baselland Liestal; Onkopraxis Dr. med. A. Dieterle; Universitätsspital Basel**
58	1	5	5	13	17	1	0	1	0	0	**101**		**Bern**	**Inselspital; Lindenhofgruppe, Engeriedspital**
0	0	0	0	0	0	0	0	0	0	0	**0**		**Biel**	**Spitalzentrum AG**
55	0	5	12	0	5	0	0	0	10	0	**87**		**Fribourg**	**Hôpital Fribourgeois, Hôpital Cantonal; Hôpital Daler; Network, Hôpital Neuchâtelois**
64	0	4	2	4	3	5	0	0	17	3	**102**		**Genève**	**Hôpitaux Universitaires de Genève; Praxis Dr. med E. Tullen; Praxis Dr. med. A. Hügli**
54	0	4	16	2	7	6	0	1	57	1	**148**		**Graubünden**	**Kantonsspital Graubünden**
6	0	0	42	0	3	1	0	0	48	0	**100**		**Hirslanden**	**Brustzentrum (Seefeld); Hirslanden Klinik Hirslanden; Hirslanden Klinik Im Park Hirslandenklinik Aarau; Hirslandenklinik Andreasklinik Cham Zug; Hirslandenklinik St. Anna**
10	0	0	9	0	0	0	0	0	31	0	**50**		**Solothurn**	**Bürgerspital Solothurn, Solothurner Spitäler; Kantonsspital Olten, Solothurner Spitäler**
63	0	14	36	7	11	7	0	0	39	10	**187**		**St. Gallen**	**Kantonsspital St. Gallen; Rundum Onkologie am Bahnhofpark; Tumor- und Brustzentrum ZeTuP**
18	0	1	10	0	1	2	0	0	0	0	**32**		**Thun**	**Radio-Onkologie Berner Oberland; Spital STS AG Thun**
3	0	0	11	2	1	2	0	0	0	0	**19**		**Thurgau**	**Brustzentrum Thurgau; Network, Spital Thurgau; Spital Thurgau, Kantonsspital Frauenfeld; Spital Thurgau, Kantonsspital Münsterlingen**
18	0	9	8	8	14	4	0	0	12	5	**78**		**Ticino**	**Clinica Luganese; EOC, Istituto Oncologico della Svizzera Italiana Fondazione Oncologia Lago Maggiore; Oncologia Varini&Calderoni**
7	0	0	5	0	0	0	0	0	37	0	**49**		**Valais**	**Hôpital du Valais, Hôpital de Sion; Hôpital du Valais, Spital Brig Network, Hôpitaux du Valais**
12	2	4	26	5	2	0	0	0	32	0	**83**		**Vaud**	**CCAC, Centre de Chimiothérapie Anti-Cancéreuse; CHUV, Centre hospitalier universitaire vaudois**
11	0	9	17	6	4	9	0	0	0	0	**56**		**Winterthur**	**Kantonsspital Winterthur**
11	0	3	8	3	10	3	0	0	32	0	**70**		**Zentralschweiz**	**Luzerner Kantonsspital Luzern**
5	0	0	4	2	3	1	0	0	1	0	**16**		**Zürich Triemli**	**Spital Limmattal; Stadtspital Triemli**
10	1	8	17	11	12	5	0	1	0	0	**65**		**Zürich USZ**	**Spital Männedorf; Brust-Zentrum Zürich; UniversitätsSpital Zürich**
40	0	17	2	0	27	21	0	0	0	0	**107**		**Foreign countries**	

Publications of SAKK and cooperative groups 2018

Trial name	Trial title	Authors	Journal	IF*
Urogenital Cancers				
STAMPEDE	Radiotherapy to the primary tumour for newly diagnosed, metastatic prostate cancer (STAMPEDE): a randomised controlled phase 3 trial.	Parker CC, James ND, Brawley CD, Clarke NW, Hoyle AP, Ali A, Ritchie AWS, Attard G, Chowdhury S, Cross W, Dearnaley DP, Gillessen S, Gilson C, Jones RJ, Langley RE, Malik ZI, Mason MD, Matheson D, Millman R, Russell JM, Thalmann GN, Amos CL, Alonzi R, Bahl A, Birtle A, Din O, Douis H, Eswar C, Gale J, Gannon MR, Jonnada S, Khaksar S, Lester JF, O'Sullivan JM, Parikh OA, Pedley ID, Pudney DM, Sheehan DJ, Srihari NN, Tran ATH, Parmar MKB, Sydes MR	LANCET	39.207
	Questioning the value of FDG PET for residual lesions after chemo-therapy for metastatic seminoma: results of an International Global Germ Cell Cancer Group registry.	Cathomas R, Klingbiel D, Bernard B, Lorch A, Garcia Del Muro X, Morelli F, De Giorgi U, Fedyanin M, Oing C, Haugnes HS, Hentrich M, Fankhauser C, Gillessen S, Beyer J.	J CLIN ONCOL	18.428
STAMPEDE	Adding abiraterone or docetaxel to long-term hormone therapy for prostate cancer: directly randomised data from the STAMPEDE multi-arm, multi-stage platform protocol.	Sydes MR, Spears MR, Mason MD, Clarke NW, Dearnaley DP, de Bono JS, Attard G, Chowdhury S, Cross W, Gillessen S, Malik ZI, Jones R, Parker CC, Ritchie AWS, Russell JM, Millman R, Matheson D, Amos C, Gilson C, Birtle A, Brock S, Capaldi L, Chakraborti P, Choudhury A, Evans L, Ford D, Gale J, Gibbs S, Gilbert DC, Hughes R, McLaren D, Lester JF, Nikapota A, O'Sullivan J, Parikh O, Peedell C, Protheroe A, Rudman SM, Shaffer R, Sheehan D, Simms M, Srihari N, Strebel R, Sundar S, Tolan S, Tsang D, Varughese M, Wa	ANN ONCOL	7.040
Head and Neck Cancers				
	Cost-effectiveness of nivolumab in the treatment of head and neck cancer	Hirschmann A, Lupatsch JE, Schwenk-glenks M, Panje CM, Matter-Walstra K, Espeli V, Dedes KJ, Siano M	ORAL ONCOL	4.794
Lung Cancers				
	Brief Report: Pembrolizumab as palliative immunotherapy in malignant pleural mesothelioma.	Metaxas I, Rivalland G, Klingbiel D, Kao S, Schmid S, Nowak AK, Gautschi O, Bartnick T, Hughes BG, Bouchaab H, Rothschild S, Pavlakis N, Wolleb S, Petrausch U, O'Byrne K, Froesch P, Löffler-Baumann M, Pratsch-Peter S, Russell P, Mingrone W, Savic S, Thapa B, Früh M, Pless M, von Moos R, Mauti L, John T.	J THORAC ONCOL	5.282
	A cost-effectiveness analysis of consolidative local therapy in oligo-metastatic non-squamous non-small cell lung cancer (NSCLC).	Panje CM, Dedes KJ, Matter-Walstra K, Schwenkglenks M, Gautschi O, Siano M, Aebersold DM, Plasswilm L, Lupatsch JE; Swiss Group for Clinical Cancer Research (SAKK).	RADIOTHER	13.164
	Patterns of response to nivolumab in patients with Non-Small Cell Lung Cancer cancer (NSCLC).	Schmid S, Diem S, Li Q, Krapf M, Flatz L, Leschka S, Desbiolles L, Klingbiel D, Jochum W, Früh M.	CANCER IMMUNOL	4.363
SAKK 16/96, 16/00, 16/01	Multimodal Treatment in Operable Stage III Non-Small Cell Lung Cancer: A Pooled Analysis on Long Term Results of three SAKK trials (SAKK 16/96, 16/00, 16/01).	Früh M, Betticher DC, Stupp R, Xyrafas A, Peters S, Ris HB, Mirimanoff RO, Ochsenbein A, Schmid R, Matzinger O, Stahel RA, Weder W, Guckenberger M, Rothschild S, Lardinois D, Mach N, Mark M, Gautschi O, Thierstein S, Biaggi Rudolf C, Pless M	J THORAC ONCOL	10.337
Breast Cancers				
BCY3/BCC 2017	The BCY3/BCC 2017 survey on physicians' knowledge, attitudes and practice towards fertility and pregnancy-related issues in young breast cancer patients.	Lambertini M, Di Maio M, Pagani O, Curigliano G, Poggio F, Del Mastro L, Paluch-Shimon S, Loibl S, Partridge AH, Demeestere I, Azim HA Jr, Peccatori FA.	BREAST	2.381
SAKK 23/13	Impact of a Surgical Sealing Patch on Lymphatic Drainage after Axillary Dissection for Breast Cancer. The SAKK 23/13 Multicenter Randomized Phase III Trial.	Weber WP, Tausch C, Hayoz S, Fehr MK, Ribi K, Hawle H, Lupatsch JE, Matter-Walstra K, Chiesa F, Dedes KJ, Berclaz G, Lelièvre L, Hess T, Güth U, Pioch V, Sarlos D, Leo C, Canonica C, Gabriel N, Zeindler J, Cassoly E, Andrieu C, Soysal SD, Ruhstaller T, Fehr PM, Knauer M	ANN SURG ONCOL	4.041
IBCSG 42-12/BIG 2-12 SNAP	A randomized phase II study evaluating different maintenance schedules of nab-paclitaxel in the first-line treatment of metastatic breast cancer: final results of the IBCSG 42-12/BIG 2-12 SNAP trial.	Gennari A, Sun Z, Hasler-Strub U, Colleoni M, Kennedy MJ, Von Moos R, Cortés J, Vidal MJ, Hennessy B, Walshe J, Parraga KA, Ribi K, Bernhard J, Murillo SM, Pagani O, Barbeaux A, Borstnar S, Rabaglio-Poretti M, Maibach R, Regan MM, Jerusalem G; International Breast Cancer Study Group, Cancer Trials Ireland and SOLTI Group.	ANN ONCOL	7.040
	Vitamin D levels in Swiss breast cancer survivors.	Dani SU, Dietrich D, Hochstrasser A, Klingbiel D, Mark MT, Riesen WF, Ruhstaller T, Templeton AJ, Thürlimann B.	SWISS MED WKLY	1.895
IBCSG 22-00	Mutational analysis of triple-negative breast cancers within the International Breast Cancer Study Group (IBCSG) Trial 22-00.	Munzone E, Gray KP, Fumagalli C, Guerini-Rocco E, Láng I, Ruhstaller T, Gianni L, Kammler R, Viale G, Di Leo A, Coates AS, Gelber RD, Regan MM, Goldhirsch A, Barberis M, Colleoni M.	BREAST CANCER RES TR	3.940
ATAC	Integration of Clinical Variables for the Prediction of Late Distant Recurrence in Patients. With Estrogen Receptor-Positive Breast Cancer Treated With 5 Years of Endocrine Therapy: CTS5.	Dowsett M, Sestak I, Regan MM, Dodson A, Viale G, Thürlimann B, Colleoni M, Cuzick J.	J CLIN ONCOL	18.428
SAKK 23/16	Tailored AXIllary Surgery with or without axillary lymph node dissection followed by radiotherapy in patients with clinically node-positive breast cancer (TAXIS): study protocol for a multicenter randomized phase III trial.	Henke G, Knauer M, Ribi K, Hayoz S, Gérard MA, Ruhstaller T, Zwahlen DR, Muenst S, Ackerknecht M, Hawle H, Fitzal F, Gnant M, Mátrai Z, Ballardini B, Gyr A, Kurzeder C, Weber WP.	TRIALS	1.969

Trial name	Trial title	Authors	Journal	IF*
EORTC 10994	Do patients whose tumor achieved a pathological response relapse at specific sites? A substudy of the EORTC 10994/BIG-1-00 trial.	Aalders KC, Touati N, Tryfonidis K, Annonay M, Litiere S, Bergh J, Bodmer A, Cameron DA, Bonnefoi HR; EORTC 10994/BIG 1-00 Study Investigators.	BREAST CANCER RES TR	3.940
	4th ESO-ESMO International Consensus Guidelines for Advanced Breast Cancer (ABC4).	Cardoso F, Senkus E, Costa A, Papadopoulos E, Aapro M, André F, Harbeck N, Aguilar Lopez B, Barrios CH, Bergh J, Biganzoli L, Boers-Doets CB, Cardoso MJ, Carey LA, Cortés J, Curigliano G, Diéras V, El Saghir NS, Eniu A, Fallowfield L, Francis PA, Gelmon K, Johnston SRD, Kaufman B, Koppikar S, Krop IE, Mayer M, Nakigudde G, Offersen BV, Ohno S, Pagani O, Paluch-Shimon S, Penault-Llorca F, Prat A, Rugo HS, Sledge GW, Spence D, Thomssen C, Vorobiof DA, Xu B, Norton L, Winer EP.	ANN ONCOL	7.040
SAKK 23/13	ASO Author Reflections: Abandoning the Drains by Eliminating the Radical Procedures Necessitating the Drains.	Weber W	ANN SURG ONCOL	3.930
BIG 1-98	Prognostic Value of the Progesterone Receptor by Subtype in Patients with Estrogen Receptor-Positive, HER-2 Negative Breast Cancer.	van Asten K, Slembrouck L, Olbrecht S, Jongen L, Brouckaert O, Wildiers H, Floris G, Van Limbergen E, Weltens C, Smeets A, Paridaens R, Giobbie-Hurder A, Regan MM, Viale G, Thürlimann B, Vergote I, Christodoulou E, Van Calster B, Neven P.	ONCOLOGIST	5.306
IBCSG 27-02	Efficacy of Chemotherapy for ER-Negative and ER-Positive Isolated Locoregional Recurrence of Breast Cancer: Final Analysis of the CALOR Trial.	Wapnir IL, Price KN, Anderson SJ, Robidoux A, Martin M, Nortier JWR, Paterson AHG, Rimawi MF, Lang I, Baena-Canada JM, Thürlimann B, Mamounas EP, Geyer CE, Jr., Gelber S, Coates AS, Gelber RD, Rastogi P, Regan MM, Wolmark N, Aebi S	J CLIN ONCOL	18.428
	Atypical ductal hyperplasia (ADH) and risk of underestimation: Method of tissue sampling, multicentricity and associated calcifications significantly influence upgrade rate in subsequent surgical specimens.	Rageth CJ, Rubenov R, Bronz C, Dietrich D, Tausch C, Rodewald AK, Varga Z.	BREAST CANCER	1.772
SOFT, TEXT	Tailoring Adjuvant Endocrine Therapy for Premenopausal Breast Cancer.	Francis PA, Pagani O, Fleming GF, Walley BA, Colleoni M, Láng I, Gómez HL, Tondini C, Ciruelos E, Burstein HJ, Bonnefoi HR, Bellet M, Martino S, Geyer CE Jr, Goetz MP, Stearns V, Pinotti G, Puglisi F, Spazzapan S, Climent MA, Pavesi L, Ruhstaller T, Davidson NE, Coleman R, Debled M, Buchholz S, Ingle JN, Winer EP, Maibach R, Rabaglio-Poretti M, Ruepp B, Di Leo A, Coates AS, Gelber RD, Goldhirsch A, Regan MM	NEW ENGL J MED	59.558

Trial name	Trial title	Authors	Journal	IF*
BIG 1-98	Adjuvant Letrozole and Tamoxifen Alone or Sequentially for Postmenopausal Women With Hormone Receptor-Positive Breast Cancer: Long-Term Follow-Up of the BIG 1-98 Trial.	7. Ruhstaller T, Giobbie-Hurder A, Colleoni M, Jensen MB, Ejlertsen B, de Azambuja E, Neven P, Láng I, Jakobsen EH, Gladieff L, Bonnefoi H, Harvey VJ, Spazzapan S, Tondini C, Del Mastro L, Veyret C, Simoncini E, Gianni L, Rochlitz C, Kralidis E, Zaman K, Jassem J, Piccart-Gebhart M, Di Leo A, Gelber RD, Coates AS, Goldhirsch A, Thürlimann B, Regan MM	J CLIN ONCOL	18.428
Leukemias				
SAKK 33/14	Mirabegron Reduced Fibrosis and Restored Nestin-positive cells in Patients with Myeloproliferative Neoplasms (SAKK 33/14).	Drexler B, Passweg JR, Tzankov A, Bigler M, Theocharides APA, Cantoni N, Keller P, Stussi G, Ruefer A, Benz R, Favre G, Lundberg P, Nienhold R, Fuhrer A, Biaggi C, Manz MG, Bargetzi M, Mendez-Ferrer S, Skoda RC	HAEMATOLOGICA	5.814
GRAALL 2005	Intensified Therapy of Acute Lymphoblastic Leukemia in Adults: Report of the Randomized GRAALL-2005 Clinical Trial.	Huguet-Rigal F, Chevret S, Leguay T, Thomas X, Boissel N, Escoffre-Barbe M, Chevallier P, Hunault M, Vey N, Bonmati C, Lepretre S, Marolleau JP, Pabst T, Rousselot P, Buzyn A, Cahn JY, Lhéritier V, Béné MC, Asnafi V, Delabesse E, Macintyre E, Chalandon Y, Ifrah N, Dombret H; Group of Research on Adult ALL (GRAALL).	J CLIN ONCOL	18.428
HOVON	Distinct factors determine the kinetics of disease relapse in adults transplanted for acute myeloid leukaemia.	Craddock C, Versluis J, Labopin M, Socie G, Huynh A, Deconinck E, Volin L, Milpied N, Bourhis JH, Rambaldi A, Chevallier P, Blaise D, Manz M, Vellenga E, Vekemans MC, Maertens J, Passweg J, Vyas P, Schmid C, Löwenberg B, Ossenkoppele G, Mohty M, Cornelissen JJ, Nagler A; Acute Leukemia Working Party of the European Society for Blood and Marrow Transplantation and HOVON-SAKK	J INTERN MED	7.598
GRAALL-2003, GRAALL-2005	PAX5 P80R mutation identifies a novel subtype of B-cell precursor acute lymphoblastic leukemia with favorable outcome.	Passet M, Boissel N, Sigaux F, Saillard C, Bargetzi M, Ba I, Thomas X, Graux C, Chalandon Y, Leguay T, Lengliné E, Konopacki J, Quentin S, Delabesse E, Lafage-Pochitaloff M, Pastoret C, Grardel N, Asnafi V, Lhéritier V, Soulier J, Dombret H, Clappier E	BLOOD	10.452
HOVON 102	CD34+CD38 – leukemic stem cell frequency to predict outcome in acute myeloid leukemia.	Zeijlemaker W, Grob T, Meijer R, Hanekamp D, Kelder A, Carbaat-Ham JC, Oussoren-Brockhoff YJM, Snel AN, Veldhuizen D, Scholten WJ, Maertens J, Breems DA, Pabst T, Manz MG, van der Velden VHJ, Slomp J, Preijers F, Cloos J, van de Loosdrecht AA, Löwenberg B, Valk PJM, Jongen-Lavrencic M, Ossenkoppele GJ, Schuurhuis GJ	LEUKEMIA	10.431

Trial name	Trial title	Authors	Journal	IF*
HOVON 102	Molecular Minimal Residual Disease in Acute Myeloid Leukemia.	Jongen-Lavrencic M, Grob T, Hanekamp D, Kavelaars FG, Al Hinai A, Zeilemaker A, Erpelinck-Verschueren CAJ, Gradowska PL, Meijer R, Cloos J, Biemond BJ, Graux C, van Marwijk Kooy M, Manz MG, Pabst T, Passweg JR, Havelange V, Ossenkoppele GJ, Sanders MA, Schuurhuis GJ, Löwenberg B, Valk PJM.	NEW ENGL J MED	59.558
HOVON 42A, 92, 102	Molecular Minimal Residual Disease in Acute Myeloid Leukemia.	Jongen-Lavrencic M, Grob T, Hanekamp D, Kavelaars FG, Al Hinai A, Zeilemaker A, Erpelinck-Verschueren CAJ, Gradowska PL, Meijer R, Cloos J, Biemond BJ, Graux C, van Marwijk Kooy M, Manz MG, Pabst T, Passweg JR, Havelange V, Ossenkoppele GJ, Sanders MA, Schuurhuis GJ, Löwenberg B, Valk PJM.	NEW ENGL J MED	59.558
CML-IV	Imatinib dose reduction in major molecular response of chronic myeloid leukemia: results from the German Chronic Myeloid Leukemia-Study IV.	Michel C, Burchert A, Hochhaus A, Saussele S, Neubauer A, Lauseker M, Krause SW, Kolb HJ, Hossfeld DK, Nerl C, Baerlocher GM, Heim D, Brümmendorf TH, Fabarius A, Haferlach C, Schlegelberger B, Balleisen L, Goebeler ME, Hänel M, Ho A, Dengler J, Falge C, Möhle R, Kremers S, Kneba M, Stegelmann F, Köhne CH, Lindemann HW, Waller CF, Spiekermann K, Berdel WE, Müller L, Edinger M, Mayer J, Beelen DW, Bentz M, Link H, Hertenstein B, Fuchs R, Wernli M, Schlegel F, Schlag R, de Wit M, Trümper L, Hebart H, Hahn M, T	HAEMATOLOGICA	5.814
CML-IV	Defining therapy goals for major molecular remission in chronic myeloid leukemia: results of the randomized CML Study IV.	Saussele S, Hehlmann R, Fabarius A, Jeromin S, Proetel U, Rinaldetti S, Kohlbrenner K, Einsele H, Falge C, Kanz L, Neubauer A, Kneba M, Stegelmann F, Pfreundschuh M, Waller CF, Oppliger Leibundgut E, Heim D, Krause SW, Hofmann WK, Hasford J, Pfirrmann M, Müller MC, Hochhaus A, Lauseker M.	LEUKEMIA	10.431
APL 2006	Arsenic trioxide is required in the treatment of newly diagnosed acute promyelocytic leukemia. Analysis of a randomized trial (APL 2006) by the French Belgian Swiss APL group.	Lionel Adès, Xavier Thomas, Agnes Guerci Bresler, Emmanuel Raffoux, Olivier Spertini, Norbert Vey, Tony Marchand, Christian Récher, Arnaud Pigneux, Stephane Girault, Eric Deconinck, Claude Gardin, Olivier Tournilhac, Jean Francois Lambert, Patrice Chevallier, Stephane de Botton, Julie Lejeune, Hervé Dombret, Sylvie Chevret, Pierre Fenaux	HAEMATOLOGICA	5.814
APL 2006	Reducing mortality in newly diagnosed standard-risk acute promyelocytic leukemia in elderly patients treated with arsenic trioxide requires major reduction of chemotherapy: a report by the French Belgian Swiss APL group (APL 2006 trial).	Ramy Rahmé, Lionel Ades, Xavier Thomas, Agnès Guerci-Bresler, Arnaud Pigneux, Norbert Vey, Emmanuel Raffoux, Sylvie Castaigne, Olivier Spertini, Sebastian Wittnebel, Jean Pierre Marolleau, Gandhi Damaj, Dominique Bordessoule, Julie Lejeune, Sylvie Chevret, Pierre Fenaux	HAEMATOLOGICA	5.814

Trial name	Trial title	Authors	Journal	IF*
Lymphomas				
REMoDL-B	Gene expression profiling in an open-label randomised phase 3 trial (REMoDL-B) of bortezomib added to standard chemoimmunotherapy for diffuse large B-cell lymphoma.	Davies A, Cummin T, Barrans S. Maishman T, Mamot C, Novak U, Caddy J, Stanton L, Kazmi-Stokes S, McMillan A. Fields P, Pocock C, Collins G, Stephens R, Cucco, Clipson A, Sha C, Tooze R, Care M, Johnson P	LANCET ONCOL	24.690
	Diagnosis and treatment of follicular lymphoma: an update.	Bargetzi M, Baumann R, Cogliatti S, Dietrich PY, Duchosal M, Goede J, Hitz F, Konermann C, Lohri A, Mey U, Novak U, Papachristofilou A, Stenner F, Taverna C, Zander T, Renner C.	SWISS MED WKLY	1.895
HD 16, HD 17, HD 18	Value of bone marrow biopsy in Hodgkin lymphoma patients staged by FDG PET: Results from the German Hodgkin Study Group trials HD16, HD17, and HD18.	Voltin CA, Goergen H, Baues C, Fuchs M, Mettler J, Kreissl S, Oertl J, Klaeser B, Moccia A, Drzezga A, Engert A, Borchmann P, Dietlein M, Kobe C.	ANN ONCOL	7.040
HD 9, HD 12	Intensive treatment strategies in advanced-stage Hodgkin's lymphoma (HD9 and HD12): analysis of long-term survival in two randomised trials.	von Tresckow B, Kreissl S, Goergen H, Bröckelmann PJ, Pabst T, Fridrik M, Rummel M, Jung W, Thiemer J, Sasse S, Bürkle C, Baues C, Diehl V, Engert A, Borchmann P; German Hodgkin Study Group.	LANCET HAEMATOL	10.698
SAKK 39/13	Promising activity of nelfinavir-bortezomib-dexamethasone in proteasome inhibitor–refractory multiple myeloma.	Driessen C, Müller R, Novak U, Cantoni N, Betticher D, Mach N, Rüfer A, Mey U, Samaras P, Ribi K, Besse L, Besse A, Berset C, Rondeau S, Hawle H, Hitz F, Pabst T, Zander T	BLOOD	15.132
REMoDL-B	Molecular High-Grade B-Cell Lymphoma: Defining a Poor-Risk Group That Requires Different Approaches to Therapy.	Sha C, Barrans S, Cucco F, Bentley MA, Care MA, Cummin T, Kennedy H, Thompson JS, Uddin R, Worrillow L, Chalkley R, van Hoppe M, Ahmed S, Maishman T, Caddy J, Schuh A, Mamot C, Burton C, Tooze R, Davies A, Du MQ, Johnson PWM, Westhead DR	J CLIN ONCOL	18.428
Gastrointestinal Cancers				
SAKK 75/08	Neoadjuvant chemotherapy followed by chemoradiation and surgery with and without cetuximab in patients with resectable esophageal cancer: a randomized, open-label, phase III trial (SAKK 75/08).	Ruhstaller T, Thuss-Patience P, Hayoz S, Schacher S, Knorrenschild JR, Schnider A, Plasswilm L, Budach W, Eisterer W, Hawle H, Mariette C, Hess V, Mingrone W, Montemurro M, Girschikofsky M, Schmidt SC, Bitzer M, Bedenne L, Brauchli P, Stahl M	ANN ONCOL	11.855
SAKK 44/00	Predicting mortality and adverse events in patients with advanced pancreatic cancer (APC) treated with palliative Gemcitabine-based chemotherapy in a multicentre phase III randomized clinical trial: the APC-SAKK risk scores.	Gargiulo P, Dietrich D, Herrmann R, Bodoky G, Ruhstaller T, Scheithauer W, Glimelius B, Berardi S, Pignata S, Brauchli P	THER ADV MED ONCOL	0.955
SAKK 40/04	Equal Clinical function after total mesorectal excision and rectal replacement with side-to-end, colon-J-pouch or straight coloanal reconstruction. Results of the Swiss prospective randomized multicenter trial (SAKK 40/04).	Marti WR, Curti G, Wehrli H, Grieder F, Graf M, Gloor B, Zuber M, Demartines N, Fasolini F, Lerf B, Kettelhack C, Andrieu C, Bigler, M, Hayoz S, Ribi K, Hamel C	ANN SURG	8.569

Trial name	Trial title	Authors	Journal	IF*
SAKK 60/00	Association of Patient Sex With Chemotherapy-Related Toxic Effects: A Retrospective Analysis of the PETACC-3 Trial Conducted by the EORTC Gastrointestinal Group.	Valérie C, Mahachie J, Mauer M, Buclin T, Van Cutsem E, Roth A, Wagner AD	JAMA ONCOL	20.871
SAKK 60/00	Clinical and pharmacogenetic determinants of FOLFIRI toxicity: results of the PETACC-3 trial.	Tejpar S, Yan P, Piessevaux H, Dietrich D, Brauchli P, Klingbiel D, Fiocca R, Delorenzi M, Bosman F, Roth AD	EUR J CANCER	5.417
SAKK 60/00	Bcl-xL as a poor prognostic biomarker and predictor of response to adjuvant chemotherapy specifically in BRAF-mutant stage II and III colon cancer.	Dunne PD, Coleman HG, Bankhead P, Alderdice M, Gray RT, McQuaid S, Bingham V, Loughrey MB, James JA, McCorry AMB, Gilmore A, Holohan C, Klingbiel D, Tejpar S, Johnston PG, McArt DG, Di Nicolantonio F, Longley DB, Lawler M.	ONCOTARGET	5.168
SAKK 56/07	Long-Term Outcome of Dasatinib First-Line Treatment in Gastrointestinal Stromal Tumor: A Multicenter, 2-Stage Phase 2 Trial (Swiss Group for Clinical Cancer Research 56/07).	Montemurro M, Cioffi A, Dômont J, Rutkowski P, Roth AD, von Moos R, Inauen R, Toulmonde M, Burkhard RO, Knuesli C, Bauer S, Cassier P, Schwarb H, Le Cesne A, Koeberle D, Bärtschi D, Dietrich D, Biaggi C, Prior J, Leyvraz S	CANCER	6.537
SAKK 41/10	Cetuximab monotherapy and cetuximab plus capecitabine as first-line treatment in el-derly patients with RAS- and BRAF wild-type metastatic colorectal cancer. Results of the multicenter phase II trial SAKK 41/10.	Kienle D, Dietrich D, Ribi K, Wicki A, Quagliata L, Winterhalder R C, Koeberle D, Horber D, Bastian S, Kueng M, Saletti P, Helbling D, Baertschi D, Lugli A, Bernhard J, Andrieu A, von Moos R	J GERIATR ONCOL	3.359
New Anticancer Treatments				
SAKK 67/13	First in Human, Phase 1, Dose Escalation Pharmacokinetic and Pharmacodynamic Study of the Oral Dual PI3K and mTORC1/2 Inhibitor PQR309 in Patients with Advanced Solid Tumors (SAKK 67/13).	Wicki A, Brown N, Xyrafas A, Bize V, Hawle H, Berardi S, Cmiljanović N, Cmiljanović V, Stumm M, Dimitrijević S, Herrmann R, Prêtre V, Ritschard R, Tzankov A, Hess V, Childs A, Hierro C, Rodon J, Hess D, Joerger M, von Moos R, Sessa C, Kristeleit R	EUR J CANCER	5.417
Surgery				
	The Growing Discrepancy between Resident Training in Colon Surgery and Rising Numbers of General Surgery Graduates.	Käser SA, Rickenbacher A, Cabalzar-Wondberg D, Schneider M, Dietrich D, Misselwitz B, Clavien PA, Turina M	INT J COLORECTAL DIS	2.383

* Impact factor

Presentations of SAKK trials (without cooperative groups)

American Society of Clinical Oncology (ASCO) Annual Meeting

Poster
Cathomas R. et al. A phase 2 trial of darolutamide maintenance therapy in patients with metastatic castration resistant prostate cancer (mCRPC) previously treated with AR targeting agents and non-progressive on a subsequent taxane (SAKK 08/16)

Poster
Früh M. et al. Multimodal treatment in operable stage III non-small cell lung cancer using the new TNM staging classification version 8: Long term results of a pooled analysis of three SAKK trials (SAKK 16/96, 16/00, 16/01)

Poster
Hess V. et al. Physical activity program in patients with metastatic colorectal cancer who receive palliative first-line chemotherapy. A randomized controlled phase III trial (ACTIVE-2 SAKK 41/14)

Poster
Jörger M. et al. Phase 1/2a study of BAL101553, a novel tumor checkpoint controller (TCC), administered as 48-hour infusion in adult patients with advanced solid tumors (SAKK 67/15)

Poster
Rothermundt C. et al. Investigation of metformin in patients with castration resistant prostate cancer in combination with enzalutamide vs. enzalutamide alone. A randomized, open label, phase II trial (SAKK 08/14 – IMPROVE)

Poster
Rothschild S. et al. SAKK 16/14: Anti-PD-L1 antibody durvalumab (MEDI4736) in addition to neoadjuvant chemotherapy in patients with stage IIIA(N2) non-small cell lung cancer (NSCLC) – A multicenter single-arm phase II trial

American Society of Clinical Oncology Genitourinary Cancers (ASCO GU) Annual Meeting

Poster
Dal Pra A. et al. SAKK 08/15-PROMET – Multicenter, randomized phase II trial of salvage radiotherapy +/- metformin for patients with prostate cancer after prostatectomy

Poster
Gillessen S. et al. A phase 2 trial of ODM-201 maintenance therapy in patients with metastatic castration resistant prostate cancer (mCRPC) previously treated with a AR targeting agent and non-progressive on a second line taxane (SAKK 08/16)

American Society of Hematology (ASH) Annual Meeting

Poster
Benz R. et al. Prospective long-term follow-up after first-line subcutaneous cladribine treatment in patients with hairy cell leukemia – A study of the SAKK (Swiss Group for Clinical Cancer Research) (SAKK 31/98, 32/93, 32/95, 32/98)

Poster
Taverna C. et al. Rituximab maintenance treatment for a maximum of 5 years in follicular lymphoma: Final results of the randomized phase III trial SAKK 35/03

Jahrestagung der Deutschen Gesellschaft für Senologie (DGS)

Oral presentation
Weber W. et al. Impact of a surgical sealing patch on lymphatic drainage after axillary dissection for breast cancer. Multicenter randomized phase III Swiss Group for Clinical Cancer Research (SAKK) 23/13 trial

Jahreskongress der Deutschen Gesellschaft für Urologie (DGU)

Poster

Rentsch C. et al. A phase I/II open label clinical trial assessing safety and efficacy of intravesical instillation of VPM1002BC in patients with recurrent non-muscle invasive bladder cancer after standard BCG therapy (SAKK 06/14)

Deutscher Krebskongress (DKK)

Poster

Ghadjar P. et al. Impact of dose intensified salvage radiation therapy on urinary continence recovery after radical prostatectomy (SAKK 09/10)

European Association of Urology (EAU) Congress

Poster

Rentsch C. et al. Results of the phase-I open-label clinical trial SAKK 06/14 assessing safety of intravesical instillation of the recombinant BCG VPM1002BC in patients with non-muscle invasive bladder cancer and previous failure to conventional BCG therapy

European Lung Cancer Congress (ELCC)

Poster

Rothschild S. et al. SAKK 16/14: Anti-PD-L1 antibody durvalumab (MEDI4736) in addition to neoadjuvant chemotherapy in patients with stage IIIA(N2) non-small cell lung cancer (NSCLC) – A multicenter single-arm phase II trial

European Society for Medical Oncology (ESMO) Congress

Poster discussion

Huober J. et al. PERNETTA – A non comparative randomized open label phase II trial of pertuzumab (P) + trastuzumab (T) with or without chemotherapy both followed by T-DM1 in case of progression, in patients with HER2-positive metastatic breast cancer (MBC) (SAKK 22/10 / UNICANCER UC-0140/1207)

Poster discussion

Vees H. et al. Impact of early prophylactic cranial irradiation with hippocampal avoidance on neurocognitive function in patients with limited disease small cell lung cancer: A multicenter phase II trial (SAKK 15/12)

Poster

Metaxas I. et al. SAKK 17/16: Lurbinectedin monotherapy in patients with progressive malignant pleural mesothelioma. A multicenter, single-arm phase II trial

Poster

Von Moos R. et al. Prevention of symptomatic skeletal events with Denosumab (DN) administered every 4 weeks (q4w) versus every 12 weeks (q12w): a non-inferiority phase III trial: SAKK 96/12 (REDUSE)

International Association for the Study of Lung Cancer (IASLC) – Word Conference on Lung Cancer

Poster

Rothschild S. et al. SAKK 16/14: Anti-PD-L1 antibody durvalumab (MEDI4736) in addition to neoadjuvant chemotherapy in patients with stage IIIA(N2) non-small cell lung cancer (NSCLC) – A multicenter single-arm phase II trial

The International Society for Diseases of the Esophagus (ISDE) Congress

Oral presentation

Ruhstaller T. et al. Neoadjuvant chemotherapy followed by chemoradiation and surgery with and without cetuximab in patients with resectable esophageal cancer: Randomized, open-label, phase III trial (SAKK 75/08)

San Antonio Breast Cancer Symposium (SABCS)

Poster

Müller A. et al. Incidence of hypocalcemia in patients with metastatic breast cancer: A non-inferiority Phase III trial assessing prevention of symptomatic skeletal events (SSE) with Denosumab (DN) administered every 4 weeks (q4w) versus every 12 weeks (q12w): SAKK 96/12 (REDUSE)

Swiss Urology (SGU) Annual Congress

Oral presentation

Rentsch C. et al. Extended pelvic lymph node dissection vs. no pelvic lymph node dissection at radical prostatectomy for intermediate- and high-risk prostate cancer: A randomized multicenter international trial – SAKK 09/18

Swiss Oncology and Hematology Congress (SOHC)

Oral presentation

Früh M. et al. Multimodal treatment in operable stage III non-small cell lung cancer using the new TNM staging classification version 8: Long term results of a pooled analysis of three SAKK trials (SAKK 16/96, 16/00, 16/01)

Oral presentation

Jörger M. et al. Phase 1/2a study of BAL101553, a novel tumor checkpoint controller (TCC), administered as 48-hour infusion in adult patients with advanced solid tumors (SAKK 67/15)

Poster discussion

Hess V. et al. Prognostic value of exercise in patients with metastatic colorectal cancer undergoing firstline chemotherapy (SAKK 41/14)

Poster discussion

Novak U. et al. SAKK 35/14 trial: Rituximab with or without Ibrutinib for advanced follicular lymphoma in need of first-line therapy

Poster discussion

Novak U. et al. SAKK 36/13 – Ibrutinib and bortezomib and ibrutinib maintenance for relapsed/refractory mantle cell lymphoma: an ongoing trial

Poster discussion

Stathis A. et al. SAKK 35/15: A phase I trial of obinutuzumab with venetoclax in previously untreated follicular lymphoma patients

Poster

Cathomas R. et al. A phase 2 trial of darolutamide maintenance therapy in patients with metastatic castration resistant prostate cancer (mCRPC) previously treated with AR targeting agents and non-progressive on a subsequent taxane (SAKK 08/16)

Poster

Rothermundt C. et al. Investigation of metformin in patients with castration resistant prostate cancer in combination with enzalutamide vs. enzalutamide alone. A randomized, open label, phase II trial. SAKK 08/14 – IMPROVE

Society of Surgical Oncology (SSO) Annual Cancer Symposium

Oral presentation

Von Holzen U. et al. Surgical outcomes after neoadjuvant chemoradiation followed by curative surgery in patients with esophageal cancer: An intergroup phase-III trial of the Swiss Group for Clinical Cancer Research (SAKK 75/08)

Oral presentation

Weber W. et al. Impact of a surgical sealing patch on lymphatic drainage after axillary dissection for breast cancer. Multicenter randomized phase III Swiss Group for Clinical Cancer Research (SAKK) 23/13 trial

Swiss Society of Radiobiology and Medical Physics (SSRMP) Annual Meeting

Oral presentation

Vuong D. et al. Do we need standardized imaging protocols or robust radiomic features for the development of image-biomarker based prognostic models? (SAKK 16/00)

SAKK Coordinating Center
Effingerstrasse 33
3008 Bern
Tel. +41 31 389 91 91
Fax +41 31 508 41 42
sakk.ch
info@sakk.ch