



Clatterbridge
Cancer Charity

Donor Update

Spring 2025

RESEARCH BOOST FOR SECONDARY BREAST CANCER TREATMENT

Dear supporters, my name is Prof Carlo Palmieri and I am hugely excited this year to receive funding from Clatterbridge Cancer Charity to carry out research which will help future patients with secondary breast cancer.

When breast cancer spreads to other areas of the body (or metastasizes), it is called secondary breast cancer. Around 30% of patients with early breast cancer will develop secondary breast cancer, this is when the disease spreads to other areas of the body including the bones, lungs, liver or brain.

It can be treated, but at present it cannot be cured and each month in the UK around 1,000 patients die from secondary breast cancer, a shocking figure.

As a Consultant Oncologist I see these patients every day in my clinics and observe the devastating effect that this secondary disease has on their health, their lives and their loved ones. Secondary breast cancer involving the brain is becoming more common as women and men live longer with the disease given the improvements in drug treatments.

Treating disease that has spread to the brain can be particularly challenging for medical staff and is associated with a poorer prognosis or outcome for the women and men affected.

We suspect that some of the answers we seek lie in the cerebral spinal fluid, which is the fluid that surrounds the brain and this can be sampled by a procedure called a lumbar puncture.

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“ I am hugely excited and very thankful to receive research funding from Clatterbridge Cancer Charity.”

Carlo Palmieri
Prof of Translational
Oncology and
Medical Oncologist

Continued...

By looking for and extracting cancer DNA shed into this fluid by brain secondaries we hope to achieve a number of things:

1. To try and help predict who may be at higher risk of developing breast cancer brain secondaries in the future.
2. To detect spread to the brain before it appears on scans, with the aim of introducing treatments to prevent the secondaries causing any issues.
3. To develop better, more targeted treatments when the disease has spread to the brain and appears on scans, and needs treatment.

All of this aims to reduce the impact and devastation of breast cancer brain secondaries. Only in learning more about this awful disease can we hope to reduce the devastating impact of brain metastasis on patients and their families and offer them the hope and healing that they need.

We can't do this work without the support of donors like yourselves and we look forward to keeping you updated with our progress, thank you so much for your support.

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As Clinical Nurse Specialists in Breast Cancer we see women every week in clinic who are affected by brain metastasis, as well as those who are worried about their cancer progressing in this way. It can be a devastating diagnosis which has a huge effect not only on the individual patient but on a whole family.

It is so important for these patients that we try to improve our knowledge about how the disease progresses to the brain, and this knowledge will hopefully pave the way for better treatments in the future.”

Jo Francis

Advanced Breast Cancer Practitioner



Professor Palmieri's research into secondary brain cancers is one of a number of Clatterbridge projects being supported by charity donations this year.

Other funded projects include Prof Isabel Syndikus's work to improve care for high-risk prostate cancer patients using AI, and Dr Laura Cossar's research into better understanding the management of long term side effects of immunotherapy treatments.

IMPROVED ACCESS TO CLINICAL TRIALS

Offering patients improved access to drug and treatment advancements through clinical trials is one of the most important aspects of Clatterbridge's long term strategy and the centre has now cemented itself as a national leader in a number of areas of cancer research and clinical trials.

With scientific research sitting outside normal NHS funding, the Charity plays a vital role in delivering this mission by committing funding of £5m over the next five years to projects and programmes which seek what every patient wants – ever improving, kinder, more effective, faster treatments.

We are pleased to introduce you here to Lee Testrow, whose role as a Trainee Research Advanced Nurse Practitioner is supported by the Charity thanks to our friends at Medicash Foundation.

Lee, tell us a bit about yourself:

My role was introduced, thanks to the Charity, to help us to deliver clinical trials to more patients at Clatterbridge. Myself and the team are responsible for safely administering new, experimental treatments which are under development to patients, in the hope that this will lead to new and improved standards of care in the future.

That sounds exciting:

It really is. A lot of our work is in experimental medicines, exciting treatments which are newly developed. In some cases the patients who receive these at Clatterbridge are the first patients in the world to be treated with them. And that's so exciting. It is such a privilege to know that we are giving our patients access to a new medicine which could potentially save or prolong their life.



Lee Testrow

Trainee Research Advanced Nurse Practitioner

So you spend most of your time on the ward with patients?

Yes, the patients who enter onto these experimental trials require a high degree of care. The new immunotherapy drugs which we specialise in at Clatterbridge can have some incredible effects against the disease, but they can also cause quite complex side effects so patients have to be closely monitored during the drug trials as well as afterwards. This is why my role was introduced, to ensure that we can give the best care to as many patients as possible who might be eligible for these trials.

How do you think treatments will change in the future?

I'm sure we will see a huge expansion in the use of immunotherapies. These drugs are still fairly new but their potential is just so huge. Every year we have new treatments coming through and it is a real privilege to be a part of that process. The future really is brighter and brighter for patients.

The Charity is proud to have funded Lee's role and very thankful to our partners, Medicash Foundation, for part-funding this vital project.



NEW EQUIPMENT WILL REDUCE RELIANCE ON PERMANENT TATTOOS

A £75,000 investment by the charity this spring will help bring new technology to Clatterbridge in the form of Surface Guided Radiotherapy (SGRT).

Radiotherapy involves the focusing of high-energy rays onto the tumour in order to kill the cancer cells. Like all cancer treatments, surrounding healthy tissue can be at risk of damage during this process. To limit this, and ensure the highest dose of therapy reaches the cancer, patients are currently given three or four small permanent tattoos, which act as a guide for where their treatment needs to be delivered.

Unfortunately, these permanent tattoos can cause distress to patients by acting as a

continual reminder for the patient of their diagnosis and treatment long after it has finished.

Recent technological advances mean that this could change. SGRT is an evolution in radiotherapy treatment which will remove the need for tattoos in some patients as the machine is able to scan the patient in real-time and continuously adjust itself to precisely target the tumour. The technology will particularly benefit those with breast and throat cancer and patients with darker skin – for whom the current tattoo system in place causes real health inequalities.

The radiotherapy team hope to take delivery of the new SGRT in March 2025.

CHARITY FUNDS IMPROVEMENT IN BLOOD TESTING

Another vital piece of kit which will improve patient experience are the vein finder devices which are now deployed across the Clatterbridge network including at clinics in Ormskirk, Liverpool, Aintree, Halton and Wirral. Having cancer treatment can involve frequent visits to give blood samples, but some patients have blood vessels which are difficult to locate and this can mean extra time spent travelling to specialist clinics just to provide a simple blood sample which can become not just a burden on a patient's time but also on finances.

These eight new devices work by projecting an image of the patient's veins onto the skin surface for the staff to see more clearly and will mean that patients with challenging blood vessels may be able to have treatment at a clinic much closer to home. This will be a wonderful improvement to their treatment.

**As always we thank you for your continued support of our work.
If you would like to discuss your current or future support then
please contact paul.winter5@nhs.net**

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