January 2012

700 women to donate breast tissue during Indy's Super Cure Jan. 28 and 29

Before two NFL football teams descend on Indianapolis for Super Bowl LXVI, two other teams will be in the Circle City to help defeat breast cancer.

One team will be composed of 700 women who will selflessly donate breast tissue to the Susan G. Komen for the Cure® Tissue Bank at the IU Simon Cancer Center, and the other team will include the 600 volunteers needed to help the donations happen.

The two are coming together Saturday, Jan. 28 and Sunday, Jan. 29 for Indy's Super Cure, a bold initiative developed by the 2012 Indianapolis Super Bowl Host Committee to raise awareness about the tissue bank, increase the diversity of donors and raise $1 million to help support the tissue bank, the first and only healthy breast tissue bank in the world.

Collecting 700 tissue samples in two days is significant, especially when compared to the average yearly number of collections, which typically is 500. Emphasis has also been placed on recruiting women from minority populations, including race, ethnicity, age and body type.

Indy's Super Cure Day

Indy's Super Cure Day in the Super Bowl Village is 11 a.m. to midnight Saturday, Jan. 28.

The day includes a pink pep rally with Indianapolis Colts cheerleaders, a drum line, and local celebrities. Drs. Storniolo and Clare, co-directors of the tissue bank, will be presented with pink scarves. A team of volunteers has created more than 10,000 Super Scarves to keep visitors warm while in Indy for the Super Bowl. See the day's schedule of events.

More about tissue bank

Women selflessly donate breast tissue to unique bank

More than a game: Super Bowl initiative helps scientists study the "normal" breast

Why is it important for researchers to have breast tissue samples from a diverse population?

"There are a number of questions that can be answered only if we have samples that represent all women," **Susan Clare**, MD, PhD, a co-principle investigator of the tissue bank, said. "For example, although African-American women get breast cancer at a lower rate than American women of European descent, they are more likely to die from it. Why is this so? Socioeconomic factors are only a part of the explanation."

Dr. Clare added: "We want the Komen Tissue Bank to look like America as far as demographics. We need samples from African Americans, Hispanics, Asians and other nationalities. We also need age diversity, especially from women ages 55 to 85."

By collecting samples from women without breast cancer, researchers may be able to determine the differences between healthy and cancerous tissue, which will lead to a better understanding of the disease.

When are the next collections?

The next breast tissue collection events at the IU Simon Cancer Center are March 10 and Nov. 3. On June 9, a

collection event will take place at the Norton Cancer Institute in Louisville, Ky., while one will take place Sept. 29 at Cook County Health & Hospitals System in Chicago. Visit www.komentissuebank.iu.edu to join the interested donor list. Interested donors will receive regular updates after joining the list.

January 2012

News briefs

Dr. Linda Han leads breast surgical oncology program


Han

Linda K. Han, MD, has been named professor of clinical surgery at the Indiana University School of Medicine and director of the IU Simon Cancer Center's breast surgical oncology program. She is an associate member of the breast cancer research program.

Before joining the IU medical school faculty, Dr. Han practiced at St. Ann's Hospital in Westerville, Ohio.

A fellow with the American College of Surgeons, Dr. Han received her bachelor's and medical degrees from Indiana University. She completed a general surgery residency at Ohio State University Hospitals and a research fellowship in the Division of Transplantation at Ohio State University.

2011 scientific report is available

The cancer center's 2011 scientific report has been published. Cancer center members should have received a copy in campus mail. If you haven't already received a copy, expect one soon. The report is also available online.

IURTC grants rights for thymoma test

Castle Biosciences Inc. has acquired a worldwide exclusive license from Indiana University Research and Technology Corp. (IURTC) for the intellectual property and technology rights related to a gene expression profiling test for use in thymoma. **Sunil Badve**, MBBS, MD, **Patrick Loehrer**, Sr., MD, and colleagues presented their preliminary results at the American Society of Clinical Oncology in 2011, suggesting that a gene signature could reliably predict the clinical behavior of thymomas.

Data have shown that the test, branded DecisionDx-Thymoma test, accurately predicts metastatic risk in patients with thymoma. The test has also been shown to accurately confirm the stage of the disease at diagnosis.

Castle Biosciences recently completed the technical validation. In collaboration with Indiana University, the company is completing the clinical validation on an independent test set and targeting clinical availability at the end of the first quarter of 2012.

The studies were supported in part by the Indiana Clinical Translational Sciences Institute (CTSI), a National Institutes of Health-supported partnership between IU, Purdue University and the University of Notre to translate laboratory research into new medical treatments and therapies.

Located in Friendswood, Texas, Castle Biosciences is a cancer-based molecular diagnostics company. Its mission is to serve individuals afflicted with rare or orphan cancers and those who care for them.

Reminders

Grants available to researchers

For the latest grant opportunities, visit the Funding Opportunities page on the IUSCC Web site.

IU Simon Cancer Center seeks high school, college applicants for summer research program

Do you know of high school or college students who have an interest in cancer research? If so, tell them about the IU Simon Cancer Center's 2012 Summer Research Program. The cancer center's annual Summer Research Program, held in partnership with the IUPUI Center for Research and Learning, places students with a mentor physician or researcher for nine weeks on the IUPUI campus. Additional information and an online application is available at www.cancer.iu.edu/srp. Applications are due Feb. 17.

People Mover out of service

The IU Health People Mover went out of service Jan. 15 and will remain so for approximately 12 weeks. More details.

Indiana CTSI 2011 Fall Core Pilot Grant recipients announced

The Indiana Clinical and Translational Science Institute (ICTSI) has announced the recipients of its biannual program to provide small grants to investigators whose projects will benefit from access to cutting-edge scientific expertise and technology.

The 2011 Fall Core Pilot Grant Program will provide nearly $170,000 to 19 researchers at Indiana and Purdue universities and the University of Notre Dame. Lab technologies available to recipients will range from biological microscopy to mass spectrometry and proteomics analysis, all provided by Indiana CTSI-designated cores -- laboratories whose operations have been reviewed and approved by the Indiana CTSI. Awardees include three IU Simon Cancer Center members:

- **Melissa Fishel**, PhD, research assistant professor of pediatrics, IUSM, will receive $10,000 to support a project titled “Preclinical Studies of a Novel Dual Targeting Strategy for Pancreatic Cancer.” Core services will be provided by IUSCC’s Clinical Pharmacology Analytical Core and In Vivo Therapeutics Core, directed by **David Jones**, PhD, and **Karen Pollok**, PhD.

- **Laura Haneline**, MD, professor of pediatrics and microbiology and immunology, IUSM, will receive $10,000 to support a project titled “Cellular Biomarkers of Sinusoidal Obstructive Syndrome.” Core services will be provided by IUSCC’s Angiogenesis, Endothelial and Pro-Angiogenic Cell Core, directed by **Jamie Case**, PhD.

- **Jian-Ting Zhang**, PhD, professor of pharmacology and toxicology, IUSM, will receive $10,000 to support a project titled “Mechanism of eIF3a Action in Translational Control and Drug Resistance.” Core services will be provided by IUSCC’s Center for Medical Genomics, directed by Howard Edenberg, PhD.

Cancer center members in the news

- **Rafat Siddiqui**, MD, along with two other researchers, has developed a compound that has earned a patent for Indiana University Health. The compound may help combat the toxic effects of some cancer drugs. Siddiqui and his colleagues initially tested the compound on breast cancer cells. Their more recent studies indicate that these compounds are also effective against T-cell leukemia, and they are testing other types of cancer cells. “We have based our anti-cancer approach on the Mediterranean diet,”


Siddiqui

Dr. Siddiqui said. “Various nutrients such as resveratrol, a compound present in red wine, and/or drugs with phenolic structures can be made more efficacious by conjugating with fatty acids.” Conjugating these compounds with fatty acids improves their uptake by cells and greatly enhances their anti-cancer properties.

- **Shadia Jalal**, MD, **Lawrence Einhorn**, MD, **Nasser Hanna**, MD and colleagues concluded: “Consolidation docetaxel after etoposide and cisplatin does not improve survival in locally advanced non-small-cell lung cancer (LA-NSCLC). Fit older adults with LA-NSCLC benefit from concurrent chemoradiation similarly as younger patients but experience higher rates of hospitalization and toxicity.” Their study appeared in the *Annals of Oncology*.
- **Noah Hahn**, MD, and colleagues wrote “Double-Blind, Randomized Trial of Docetaxel Plus Vandetanib Versus Docetaxel Plus Placebo in Platinum-Pretreated Metastatic Urothelial Cancer,” which was published in the *Journal of Clinical Oncology*.
- In the *Journal of the National Cancer Institute*, **George Sledge**, MD, and colleagues concluded: “Factors other than disparities in care or aggressive disease contribute to increased recurrence in black women with hormone receptor–positive breast cancer.
- **Kenneth Nephew**, PhD, and colleagues reported in *Nature Medicine* that targeted drugs such as gefitnib might more effectively treat non-small cell lung cancer if they could be combined with agents that block certain microRNAs.