

News

EORTC Receptor Study Group 1990–1991

The aims of the group were initially to establish a common methodology for steroid receptor assays, establish routine external quality assessment of these assays, compare new methods with the standard procedure and accumulate multicentre clinical data to permit better assessment of both the prognostic value and the most effective clinical cut-off value. An annual meeting is held to review the activities of the group. At a recent meeting, we received the following reports and comments.

Steroid receptor assay quality assessment was continued and the following points were made by Theo Benraad (Nijmegen): coefficient of variation remained high, though it was less for laboratories within the group than for all participating European laboratories [e.g. for one batch of oestrogen receptor quality control (QC) material assayed by the ligand binding assay (LBA), the coefficient was 23.5% within the study group but 39.4% for all participating European groups]. The inclusion of an extra vial of QC material, with designated values for oestrogen and progesterone receptor (ER and PR) content, was found to reduce coefficients of variation by half. It was recommended that these should be included in all future rounds of QC within the group. Subject to adequate financing, such vials should also be available to any other, interested European groups. The Abbott enzyme immunoassay (EIA) gave similar coefficients of variation to the LBA. 2 years ago, the absolute value with EIA was nearly twice that by LBA. However, (presumably because of changes in kit production) EIA and LBA values in 1990 were much more comparable. Group data showed that the EIA:LBA ratio was dependent on the EIA batch used. Clinical cut-off values for EIA cannot yet be independently evaluated. Dr Foekens (Rotterdam) showed good correlation between the immunocytochemical assay for ER (ERICA) and EIA. Dr Leake (Glasgow) showed good correlation between the LBA and ERICA on paraffin-embedded material. Dr Magdelenat recommended that ERICA assessment be made on the proportion of cells staining, rather than on intensity of stain. ICA for PR (PRICA) was not found to add any useful information. Most groups (Thorpe, Blankenstein, Leake, Benraad, Piffanelli, etc.) continue to find that the predictive value of receptor is strongly related to concentration, rather than just to status and so the group issued a strong recommendation that ERICA is only used for clinical prediction in conjunction with biochemical receptor data. Joint studies with the Breast and Gynaecology Groups are planned.

The first two rounds of QC of cathepsin D gave coefficients of variation within laboratories of around 6% and the worst interlaboratory coefficient of variation was only 19%. A prospective study of the value of cathepsin D determination will be carried out in node-negative patients (to avoid the complications of adjuvant therapy). These studies were again coordinated by Dr Benraad.

The studies on the reproducibility of epidermal growth factor receptor (EGF receptor) assays continued. Interlaboratory coefficients of variation were still around 25% and there were often big differences in the concentration determined from single-point compared with Scatchard analysis. This was principally due to the curvilinear nature of (some of) the plots. Future studies will use a central supplied gentle iodination kit to generate labelled EGF, though each laboratory will supply its

own ^{125}I to avoid postal complications. The common methodology is being refined to include hydroxyapatite and washing $\times 2$ at 20° . Staining of sections with the R-1 antibody, in conjunction with the biochemical assay has good potential but requires further study. We shall also use the multicentre basis of the group to extend studies on the clinical value of this and other markers.

A workshop on EGFR and *c-erb-B-2* methodology was held in Nijmegen in January 1991. The proceedings of the workshop will shortly be published, as a book, and a 10-year review of steroid receptor quality assessment is also being prepared for publication.

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Surgical Oncology Course

A course on surgical oncology will be held at the Royal Marsden Hospital (Fulham Road, London) on 2–5 October 1991. The course is being organised by the Royal Marsden Hospital and Westminster Hospital in association with the European School of Oncology, and is suitable for general surgeons at the consultant and senior registrar levels. For further information, contact Miss June Mountstevens, Education and Conference Centre, Royal Marsden Hospital, Fulham Road, London, SW3 6JJ. Tel. (071) 352 8171 ext 2921, fax (071) 351 2191.

Mutant Oncogenes and Cell Adhesion Molecules

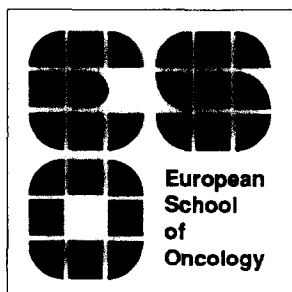
The ICRF is organising two international conferences—one on Mutant Oncogenes: Targets for Therapy (9–10 September, 1991) and the other on Cell Adhesion Molecules (12–13 December 1991), at the Royal College of Obstetricians and Gynaecologists, London. For further information, contact Miss Ruth Parks, Department of Clinical Oncology, Hammersmith Hospital, Du Cane Road, London W12 0HS. Tel (81) 740 3149, fax (81) 746 2021.

Chronobiology

A symposium on Chronobiology: Mechanisms and Therapeutic Applications is being organised by the Paul Brousse Hospital and the Association for Research in Biological Time and Chronotherapy on 17–18 October, 1991, in Villejuif, France. For further information, contact Francis Lévi, Espace Congrès Les Esselières, 3 Boulevard Chastenot-de-Géry, 94800 Villejuif, France. Tel (1) 47 26 27 73, fax (1) 46 78 57 01.

AACR and EACR Joint Conference

The American and the European Associations for Cancer Research (AACR and EACR) are holding their first joint conference on Concepts and Molecular Mechanisms of Multistage Carcinogenesis in Santa Margherita, Italy, on 6–9 November, 1991. (This meeting follows EACR-XI in Genoa.) For further information, contact: (from North and South America) AACR Secretariat, Public Ledger Building, Suite 816, Sixth and Chestnut Streets, Philadelphia, PA 19106, USA (fax 215 440 9313) or (from other countries) EACR Secretariat, c/o Italiana Congressi, Via Bensa 2, 16124 Genoa, Italy (fax 10 299382).



The European School of Oncology **FELLOWSHIPS AND EDUCATIONAL GRANTS** **1991 - 1992**

FELLOWSHIPS and EDUCATIONAL GRANTS to attend ESO educational activities are offered to health professionals by several European organisations:

For *Belgian* doctors, the Association Contre le Cancer offers fellowships. Contact Dr. Ziant, Place du Samedi 13, 1000 Brussels.

For *British* doctors, the ESO-UK fellowship scheme offers fellowships. Contact ESO Secretariat, Via Venezian 18, 20133 Milan.

For *Dutch* doctors, the Dutch Cancer Society offers bi-annual fellowships and, if requested, an ESO course can be an integral part of the programme. Contact Dr. Van de Poll, Dutch Cancer Society, Sophialaan 8-10, 1075 BR Amsterdam.

For *Finnish* doctors, the Cancer Society of Finland offers five fellowships. Contact Dr. Elovainio, Cancer Society of Finland, Liisankatu 21 B, P.O.Box 169, 00171 Helsinki.

For *French* doctors, the Association pour le développement de la Recherche sur le Cancer offers 40 fellowships. Contact Mme Dafour, ARC, avenue Paul-Vaillant Couturier 16, 94801 Villejuif Cedex.

For *German* doctors, the Deutsche Krebshilfe and the Mildred Scheel Stiftung offer 40 fellowships. Contact Prof. Munk, Dr. Mildred Scheel Stiftung für Krebsforschung, Thomas Mann Str. 40/42, 5300 Bonn 1.

For *Greek* doctors, the Hellenic Cancer Society offers five fellowships for ESO activities in Italy. Contact Prof. Dontas, George St., 6, 10677 Athens. Four fellowships are also offered by the Maria Pantelis Lemos Foundation. For information, contact the ESO Secretariat, Via Venezian 18, 20133 Milan.

For *Israeli* doctors, the Israel Cancer Association offers fellowships. Contact Prof. E. Robinson, P.O. Box 20018, Tel Aviv 61200.

For *Italian* doctors, the Fondazione Italiana per la Ricerca sul Cancro supports Italian participation in ESO activities with various types of grants. Contact ESO Secretariat, Via Venezian 18, 20133 Milan.

For *Polish* doctors, the Polish Foundation of the European School of Oncology offers 10 fellowships for the ESO courses held every year in Poland. Contact W. Rozycki-Gerlach, ul. Wawelska 15, 00-973 Warsaw.

For *Portuguese* doctors, the Portuguese League against Cancer offers fellowships for participation in ESO Courses. For information, contact the ESO Secretariat, Via Venezian 18, 20133 Milan.

For *Swiss* doctors, the Schweizerische Krebsliga offers two fellowships. Contact the ESO Secretariat, Via Venezian 18, 20133 Milan.

For *East European* doctors, the Boehringer Ingelheim Fonds offers fellowships. Contact Dr. H. Fröhlich, Staffenbergstrasse 32, 7000 Stuttgart 1.

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