

# RAIDS

Rational molecular  
Assessment  
Innovative Drug  
selection

RAIDS 1 - RAIDS 2



## RATIONAL ASSESSMENT

## INNOVATIVE DRUG SELECTION





## FROM RAIDS1 to RAIDS 2 CURE

### RAIDS 1

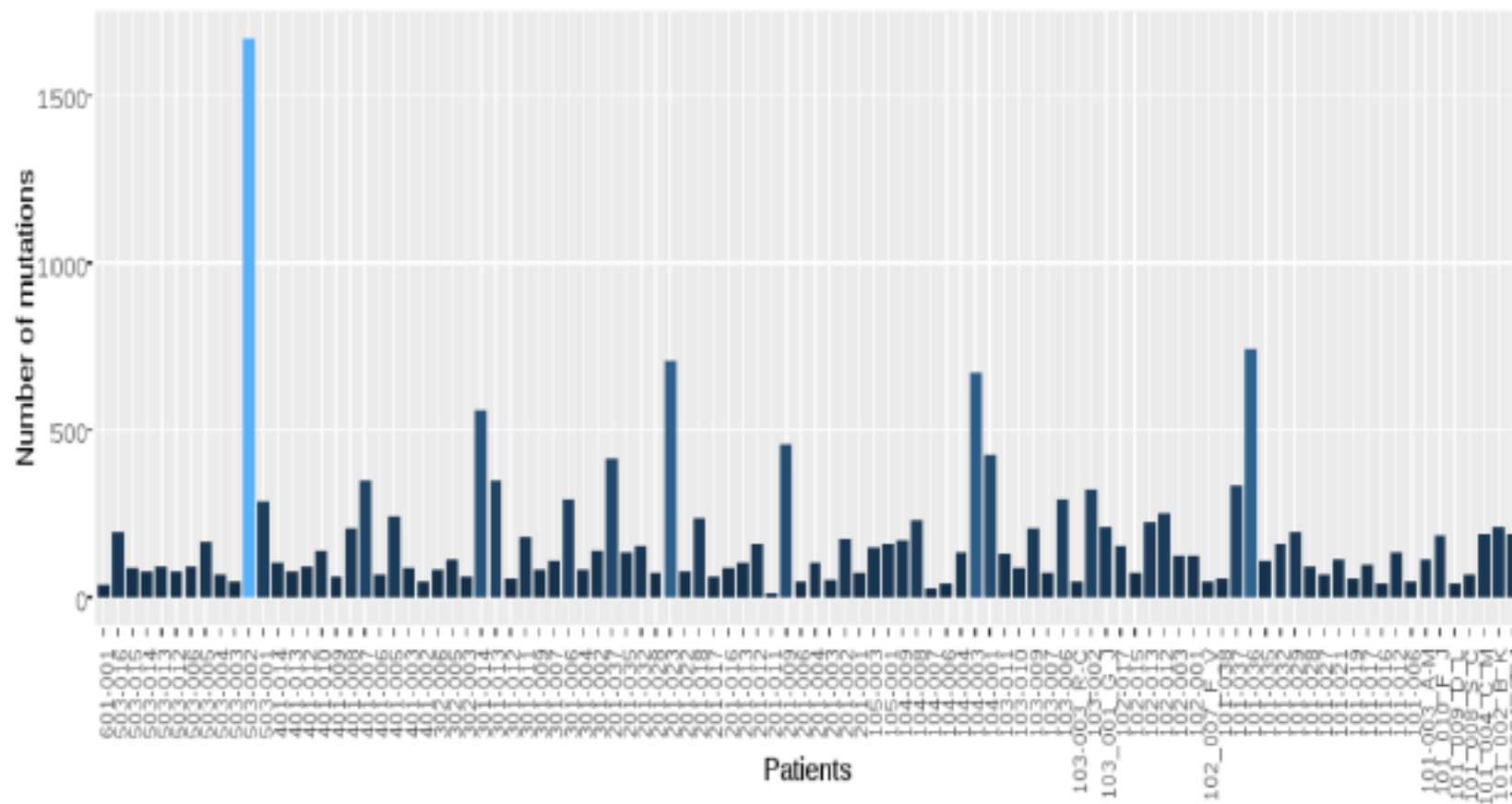
Fact finding on tumour molecular drivers  
Medication discovery on cell lines

### TRANSITION

Consolidate and merge data  
Medication finding (2) &  
algorithm for treatment

### RAIDS 2 CURE NEW CLINICAL TRIAL

# Only 5 patients of RAIDs dataset present more than 500 mutations



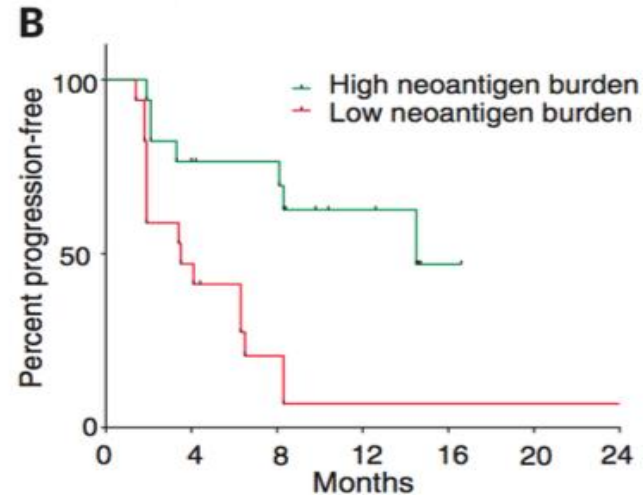
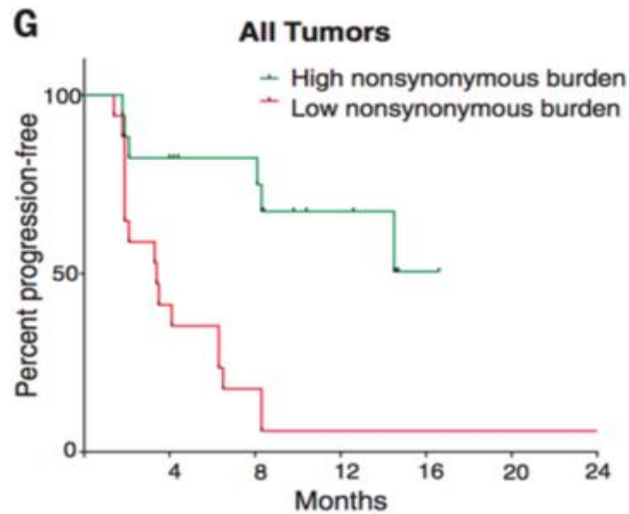


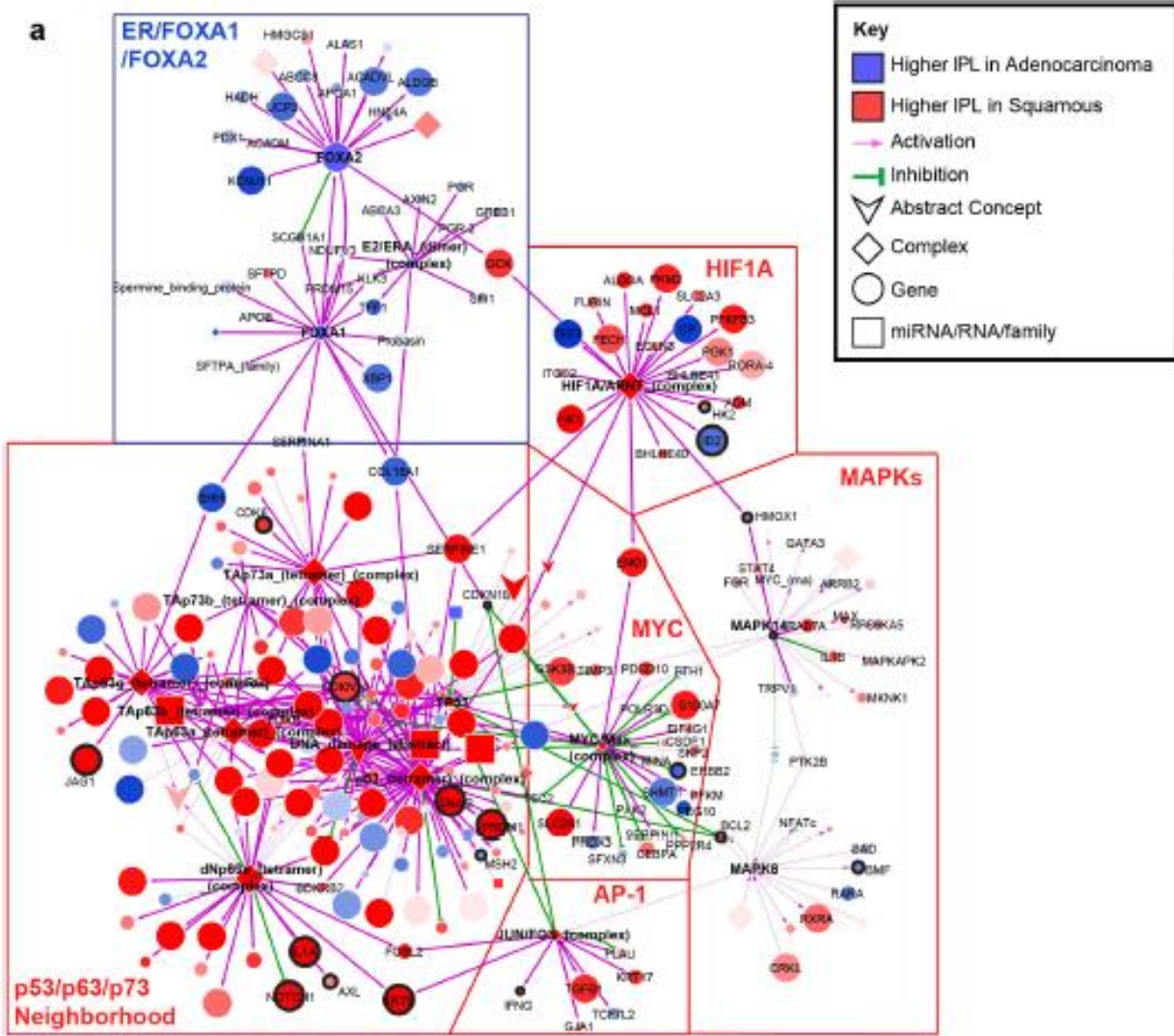
## Immunological Biomarkers

Predictive biomarkers of immune checkpoint blockade  
- mutational and neoantigen load

CANCER IMMUNOLOGY

**Mutational landscape determines sensitivity to PD-1 blockade in non-small cell lung cancer**







## FROM RAIDS1 to RAIDS PRECISION IN 4 STEPS

### TRANSITION

Consolidate and merge data

Medication finding (2) & algorithm for treatment

**RAIDS 2 consortium**

RAIDS1

&

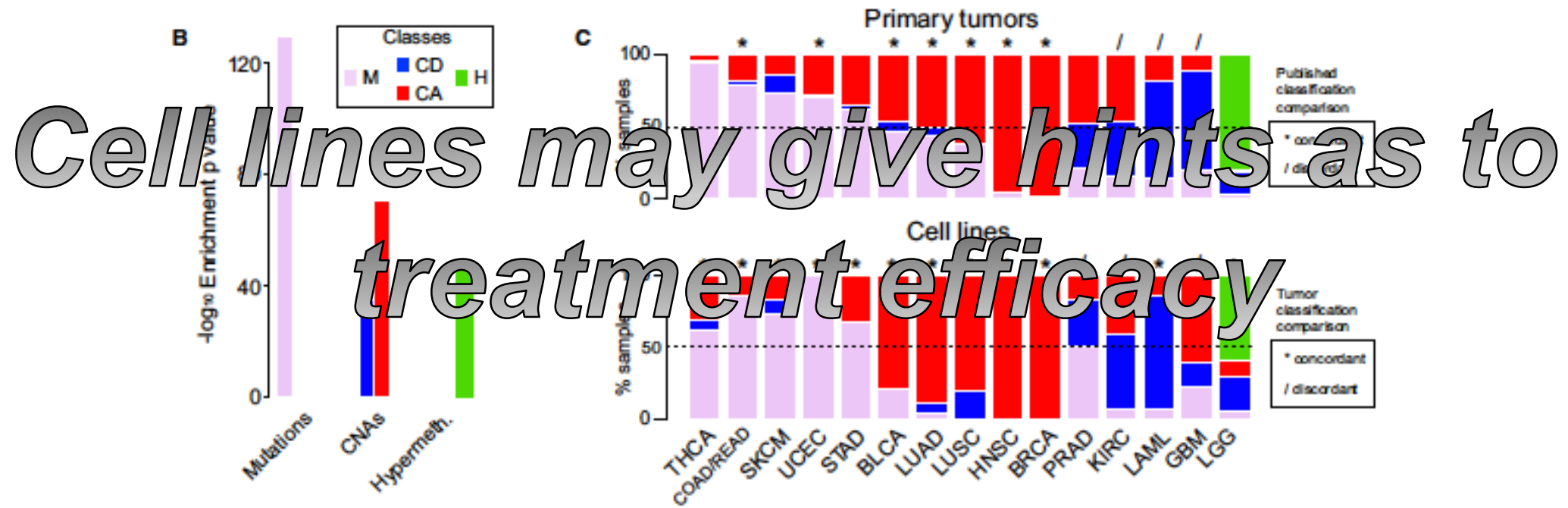
LIH/UNI

&

**RAIDS CONSULTING**



## Comparative molecular analysis of cell lines and tumours

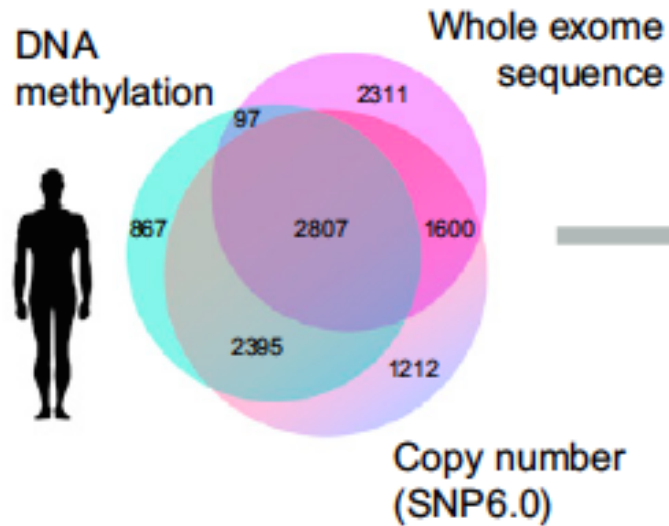


Iorio F, Garnett MJ et al: CELL 2016

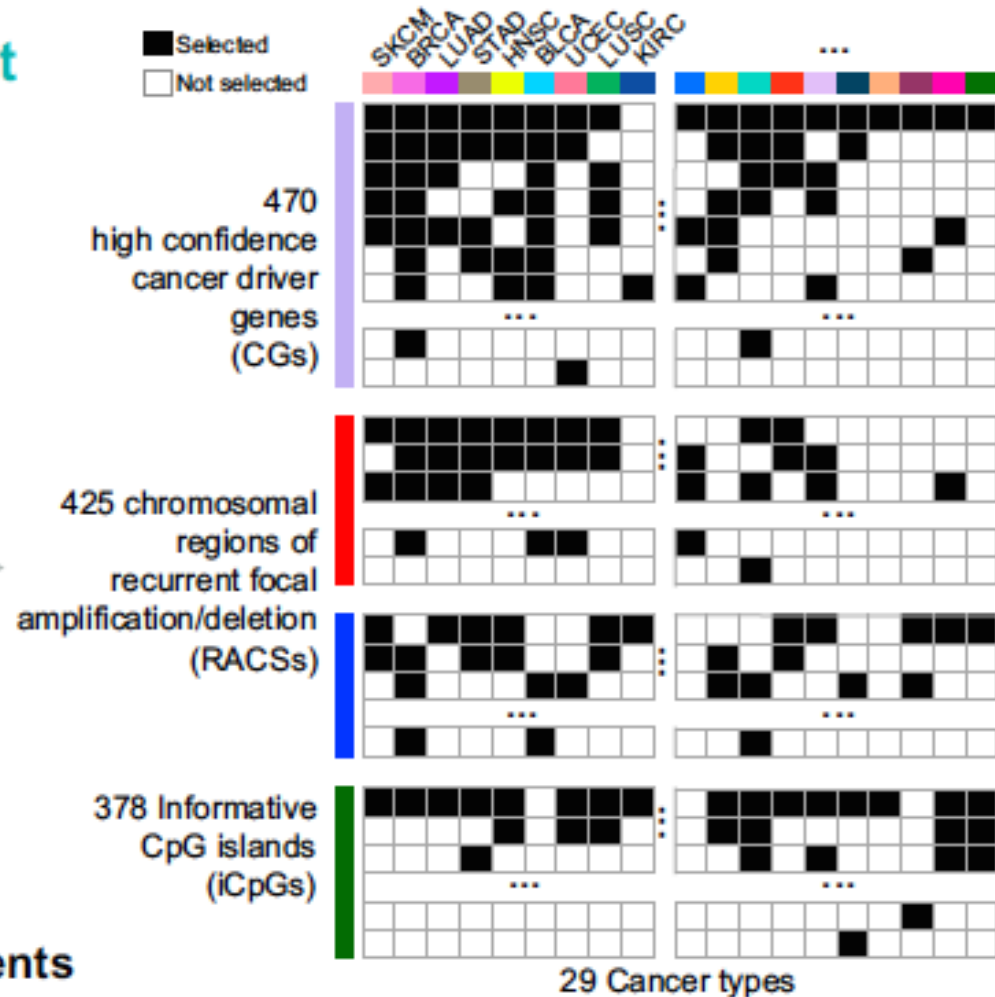


## CFE = integration of 3 technical platforms

### A Cancer Functional Event (CFE) selection from the analysis of patient tumor data



Multi-omics data from 11,289 Patients



Iorio F, Garnett MJ et al: CELL 2016





## FROM RAIDS1 to RAIDS PRECISION IN 4 STEPS

---

RAIDS 2 CURE NEW CLINICAL TRIAL

RAIDS 2 CURE

RAIDS1/2  
&  
PHARMA

**Protocol Title:** A Multicenter International Trial using Rational Molecular Assessments (RA) for *innovative drug selections (IDs)* in a 1:1 randomization into standard or innovative therapies according to a predefined treatment algorithm for high risk patients with cancer of the uterine cervix, vagina, vulva, anal canal (CVVA) and Squamous Cell Carcinoma of the Head and Neck (SCCHN)

## Clinical trial: RAIDS 2 CURE LIH/IBBL/HCTC



Informed consent  
N=500-900



MRI 1

T Biopsy  
Blood  
**Mutation  
Panel**

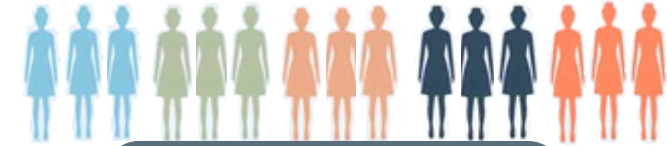
RANDO 1:1  
N=800

*Bioinformatics:*

Primary treatment  
Radio chemo or  
Taxol/Carbo

MRI  
2 weeks  
Optional

MRI 3



Adjuvant 4-6 Mo  
Therapy based on  
molecular findings



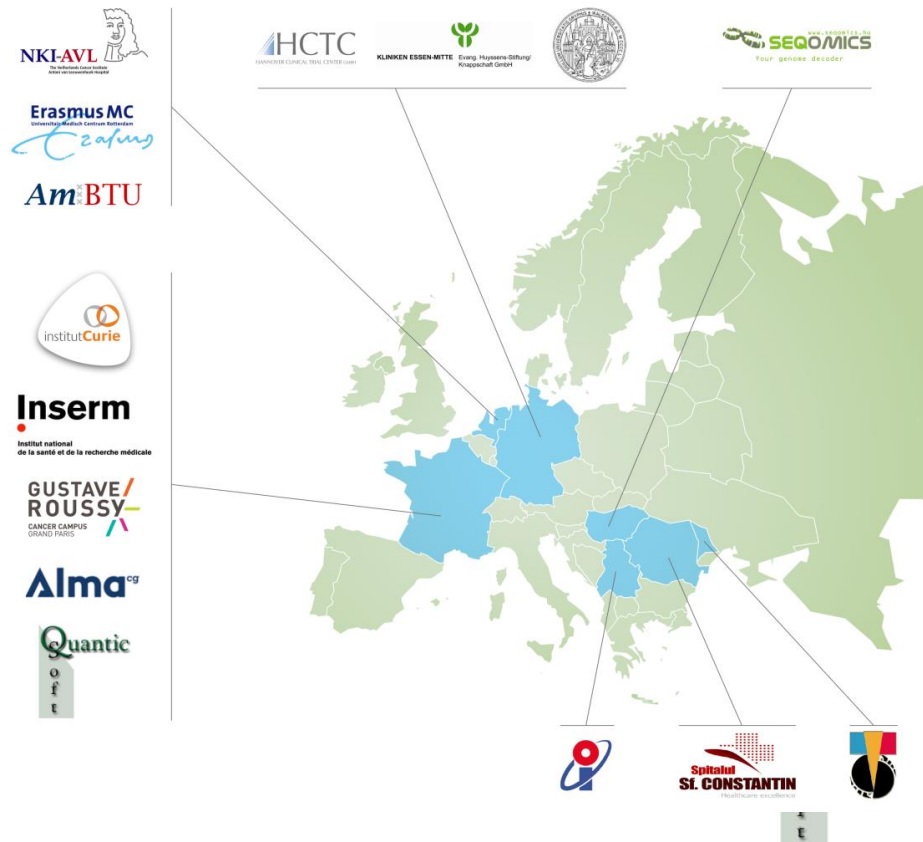
Adjuvant 4-6 Mo  
Best Standard  
therapy  
Same for all



## PARTICIPATING COUNTRIES

### RAIDS 1

### RAIDS 2 CURE





## RAIDS PRECISION: PATIENT & DATABASE PROTECTION

---

- **Data protection:** All data will be collected by qualified study personnel. Clinical data base is entered via an eCRF by authorized and trained staff. All changes of data entered in the eCRF can be followed by an audit trail.
- All samples and clinical data are barcoded at the center of origin.
- **Data is pseudonymized** (de-identified) rather than permanently (and irreversibly) anonymized in the data retention process. De-identification means that data with identifying information is collected, but the personally identifying information is then severed from the health information in the research database and stored separately in a second database.
- **Access to data is permitted according to role** (i.e. physicians from study centers have full access to their patients data and researchers have access only to de-identified data). The collection, transfer, storage and analysis of personal study-related data will be performed in pseudonymized manner according to national regulations.
- **Data transferred between all local sites and the central data repository will be encrypted.** This will be realized with the help of HTTPS (HTTP over SSL). To prevent unauthorized access to the research Database, each user has to login with his personal user name and password. Passwords have to be changed in a regular manner and have to meet a defined complexity (minimum length, mix of characters, numbers and special characters). All study staff have to give due consideration to data protection and medical confidentiality.



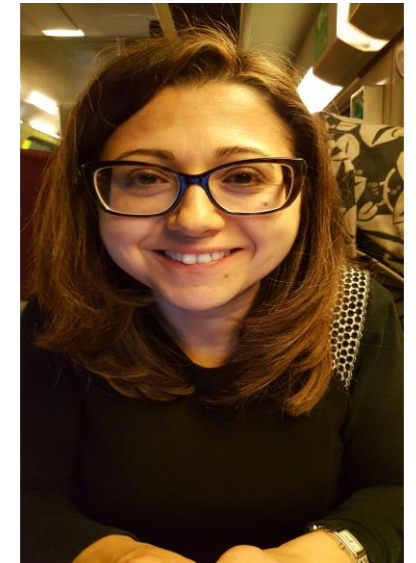
## Dissemination to the wider public

- Informal discussion and presentation of RAIDs
- Press
- Videos to view [at the same link](http://curie.fr/actualites/echange-avec-patients-autour-projet-entreprise-2015-2020-007181)

<http://curie.fr/actualites/echange-avec-patients-autour-projet-entreprise-2015-2020-007181>



Too much information kills information:  
smartphone application My Curie, web site





## INTERNATIONAL DISSEMINATION

NETWORKING: CCRN – CHICAGO 2017



*Participation  
in the  
Cervical Cancer  
Brainstorming Meeting  
Lisbon, Nov 2016*



[http://www. RAIDS-FP7](http://www.RAIDS-FP7)

