

Helen Rollason **Cancer Charity**

Annual Report 2010/11



Neville Davidson - Chairman



David Annetts



John Booth



Linda Brien



David Houghton



Elaine Oddie - Treasurer



Barry Plowman



Paul Sauven



Richard Wollaston

Trustees' Foreword

2010 continued to be a challenging year for charities as the recession continued, we are so grateful to everyone for their support. There were several highlights from a fundraising perspective.

At the end of 2009, Angela Lodge joined the charity as Community Relations Manager/Head of Fundraising – Angela has introduced many new fundraising initiatives to the charity including Tea For Helen, Helen's Club and the North Essex Circular Walk, which we hope will increase our income throughout the years to come. Angela also encourages sponsorship on all of our events and the team work hard with Corporate and Grant Applications.

Throughout 2010 the fundraising team were out in the community, carrying out street and railway collections and keeping the charity name in the public domain.

The Helen Rollason Garden was planted in Central Park, Chelmsford in November 2010, assisted by TV Gardener, Christine Walkden. Volunteers from BDO Stoy Hayward, charity supporters and Chelmsford Borough Council were all involved in the planting of 28,000 narcissus and muscari bulbs. Our supporters were encouraged to sponsor the bulbs in memory of a loved one and we hope this will be a legacy for the people of Chelmsford and the charity for many years to come.

We are so grateful to all the businesses and corporates who support us. Thanks must go to members of staff at RBS Bishopsgate, London who gave up their time to re-decorate the cancer support centre at the North Middlesex Hospital. As their charity of the year in 2010, they fundraised to replace bedding and chairs for the therapy rooms, they have also made donations from their "Tea for Helen" parties and "dress down" days. Cofunds, M&G Investments and UPS Parcels enabled us to replace the fascia boards on all our shops providing greater visibility and a more consistent image. Patient and supporter, Jacki Ithier introduced the charity to snooker legends, Ronnie O'Sullivan and Jimmy White – an amazing £13,000 was raised from their snooker event.

The London Marathon was as popular as ever. Thank you to everyone who took part in 2010 and to Major Phil Packer who chose us as one of his charities and culminated in an amazing £34,722 being raised.

We have been actively searching the district for another building to incorporate Rochelle House, Springfield and our offices. We hope to secure a freehold building in 2011 by way of our 'Go for Gold' account and the help of the YJS Trust, this will make a real difference to the charity and make more space for patient care.

As many of you will know several years ago we raised thousands of pounds to open the Helen Rollason Chemotherapy Unit at Broomfield Hospital. The chemotherapy unit has been relocated within the new hospital building at Broomfield and Professor Davidson and his team are now converting the original unit into the Helen Rollason Research Centre where patients on clinical trials will receive their treatment.

At the end of the financial year, the charity celebrated a very successful result for the retail side, the net contribution from our network of 12 shops increased from £70,786 to £154,797. The shops provide the charity with exposure on the high street as well as contributing to our income and we are looking to significantly develop this sector by way of new initiatives which are being considered in 2011/2012.

As always there is still much work to be done, the charity remains fully committed to providing much needed services to people whose lives are touched by cancer in Essex, Herts and London.

A huge thank you must be extended to all our volunteers who work in the charity shops, office, centres and our community fundraising supporters, without whom this charity could not exist.

HRCC Board of Trustees

Trustees

Our charitable services

Our supporting business

Support Centres	Clinical Research	Research Laboratory	Admin. & Finance	Marketing	Fundraising	Retail
Essex (Springfield)	Broomfield Hospital	Anglia Ruskin University Chelmsford	Charity Manager Barry Plowman	Marketing Manager Tracy Saunders	Head of Fundraising Angela Lodge	Coordinators Alison Matthews Anne Brown Donna Fordham
London (North Middlesex University Hospital)	North Middlesex University Hospital		Financial Controller Sue Hayden	PR Officer Tracy Saunders	Community & Corporate Fundraising Michael Baim	Shops Barkingside Braintree Burnham-on-Crouch (two shops) Chingford Collier Row Danbury Ongar Sawbridgeworth South Woodford Wickford Witham
Hertfordshire (Rivers Hospital)			Office Assistants Anna Felton Liz Chappell		Community Fundraiser Rosemary Jensen	
See pages 4-5	See pages 6-8	See pages 9-12	See pages 17-18	See page 16	See page 13	See pages 14-15

Organisational structure

As Charity Manager, I oversee the support centres and all of the charity's 'supporting business' functions (finance, marketing, fundraising, retail, administration). The clinical research departments report to the management teams within their respective hospitals, and the scientists at the research laboratory report to Professor Paul Sauven, one of the charity's trustees.

The support centres and business areas comprise permanent employees, self employed persons and volunteers. There is a diverse mix of full time and part time staff.

The charity has activities spread over a total of 17 different geographical locations (including 12 shops). The main charity office is based at Broomfield Hospital in Chelmsford and fundraising activities take place across the three counties – Essex, London and Hertfordshire.

The main goal of the new organisational structure that was put in place in 2009 was to achieve a greater sense of 'teamwork' across all areas. Although this takes time to accomplish, feedback from staff has been positive and the charity is benefiting from better internal

communication and smaller teams working together, more efficiently and effectively.

A further goal was to make the office more efficient and professional. The creation of the Office Assistant position (one full time role which is job shared) has helped enormously in this regard.

Our volunteers

The work of the charity is heavily supported by an army of volunteers. Volunteers undertake a vast array of tasks including greeting clients at any one of our support centres, counselling clients, providing administration support, organising local community events and initiatives, or working in one of the 12 charity shops.

I am indebted to each and every person who gives their time voluntarily to HRCC. Their support is greatly appreciated.

Barry Plowman

Charity Manager

Cancer Support Centres

Our Centres Manager and Centre Coordinators



Lorna Ellis
Cancer Support Centres Manager



Helen Bridle
(Essex Springfield)



Rebecca Brainerd
(London)



Linda Bowler
(Hertfordshire)

The cancer support centres are peaceful and tranquil environments in which clients can benefit from massage, aromatherapy, reflexology, counselling and support groups. Our Springfield and Hertfordshire centres also offer manual lymph drainage (MLD), a therapy that is not widely available.

In 2010 we have offered over 8,500 treatments to clients.

We continue to work with a wide variety of patients. Around 20% of our clientele is male, ages range from 18 to 90 and we see many different types of cancer. Clients attend the centres at all stages of their cancer journey – when newly diagnosed, whilst undergoing treatment and when their medical treatment is complete. Around 15% of the work we do is with patients who require palliative care.

The majority of clients attend for a period of months and it is rare for a client to come just once. They express great satisfaction with the service they receive. This was evidenced by a client survey undertaken for the charity at the end of 2010 which showed clients as being full of praise for all aspects of the care that they had or were still receiving.

We currently have 26 practitioners in post. Some receive payment for their services while others give their time and skills voluntarily for which we are very grateful.

In addition to the practitioner team we have 12 volunteers who undertake general duties at the centres – meeting and greeting clients, talking with them, making tea and helping with other housekeeping and administrative tasks. Late cancellation and failure to attend continues to be a problem. In line with previous years, although measures have been taken to address this we are still losing around 90 sessions a month, approximately 20% of the total sessions

offered. Because of the nature of our work we understand that clients may be unable to attend due to illness or a conflicting medical appointment but there is still a significant number who fail to attend without letting us know.

What our clients say

*Wonderful, calming place
with lovely, caring people.*

*Wonderful treatments
caring staff
such good listeners!*

*A lovely, peaceful haven.
Wonderful people I feel I can
call my friends.*

*The warm, calm and relaxed
welcome together with
first class treatment has
become my weekly escape.
The genuine feeling
of care is extraordinary.*

*This is a place where I feel very
supported. Thank you.*

*The staff are very friendly and
everyone really cares.*

Cancer Support Centres

We have continued to search for new premises for our Springfield centre and head office. Appropriate sites have been very difficult to source.

Fundraising has continued in all centres. Each centre held a very successful 'Tea for Helen' tea party this year and individual initiatives have continued. The North Middlesex centre was redecorated and received new furniture courtesy of RBS and its staff.

We continue to receive part-funding from Mid-Essex Primary Care Trust for our lymphoedema service at the Springfield centre. The number of 'out

of area' referrals for lymphoedema treatment continues to increase significantly and dialogue has been commenced with two other primary care trusts to explore the possibility of them similarly funding patients from their areas.

We are delighted to report that in the face of stiff competition, the charity won the Institute of Complementary and Natural Medicine (ICNM) national award for Best Complementary Medicine Business of 2010.

Our Practitioners



Jill Newton



Kerry Northam



Sue Cronley-Dillon



Geoff Bowen

2010/11 facts and figures	Essex (Springfield)	Essex (Broomfield) now closed	Hertfordshire	London	TOTAL
Total no. of treatments	5269	369	1080	1967	8685



Mina Parmar



Maria Fleet



Margaret Idoux



Rachael Hart



Lawrence Carberry



Wendy Gemmell



Ann Baldwin



Carol Ellis



Latifa Gawi



Lesley Guilfoyle



Maureen O'Brien



Anne Hayes



Lucy Barwick



Karen Peters



Stella Jellis



Nicola Drew



Sarah Fitch



Elaine Harrison

Clinical Research

I was fortunate to be invited to join a research project and from that point on, I had the comforting feeling that someone was fighting my corner.

The research nurses are friendly and I really felt like I could ask them questions about anything.

The Broomfield Oncology Research Department is managed by Tracey Camburn, who in the past year has successfully completed an MSc in Cancer Clinical Research at the Royal Marsden and was the only student left on the course to achieve this.

Clinical trials are ongoing in the following cancer types: breast, melanoma, lung, upper gastrointestinal, lower gastrointestinal, urology and gynaecological.

In 2010 the department was funded by the following organisations:

- Helen Rollason Cancer Charity
- The CLRN - Comprehensive Local Research Network (a government body which aims to recruit patients onto local clinical trials)
- The NCRN - National Cancer Research Network (a government body which aims to provide the NHS with an infrastructure to support high quality cancer clinical studies). The NCRN is made up of 32 Local Cancer Research Networks.
- NIHR – National Institute of Health Research Flexibility and Sustainability Funding.

The contribution of the charity towards the cost of the Broomfield clinical research department in 2010/11 was £136,000.

The Helen Rollason charity have kindly agreed to support the refurbishment of the Helen Rollason chemotherapy unit which has been vacant since November last year when the chemotherapy unit moved into the main hospital building.

Mid Essex are supporting this venture which will be the only one of its kind in the Essex Cancer Research Network (ECRN) as it will allow patients access to

clinical trial treatments in a purpose built building. Not only cancer patients will have access to this research building but it will also allow patients participating in stroke, diabetes, ITU and any other research taking part in this trust.

Verbally we have been given local planning permission from Chelmsford County Council before refurbishment can take place. Building works should commence in July 2011.

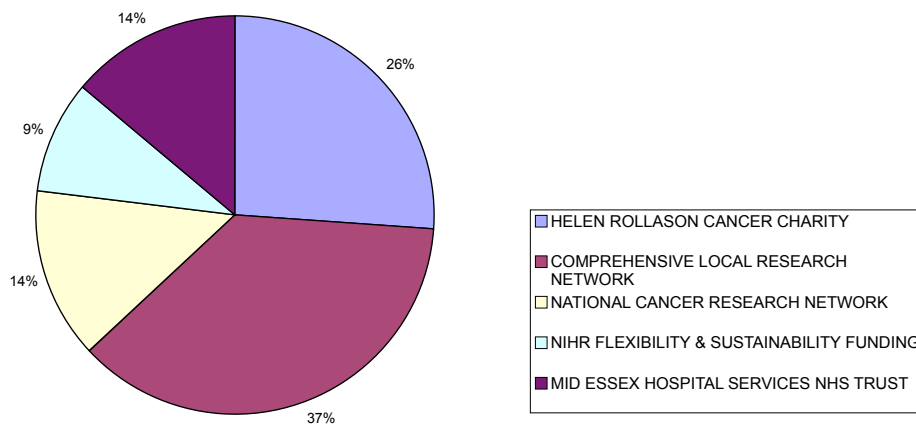
This year the drive has been to support and achieve an active clinical trials portfolio for all cancer specialities. Urology trial accrual has increased by 50% and in melanoma we are one of the top recruiters for an adjuvant melanoma trial sponsored by Addenbrookes in Cambridge.

We have recently recruited a research oncology consultant dedicated to research which should certainly help with clinical trial accrual.

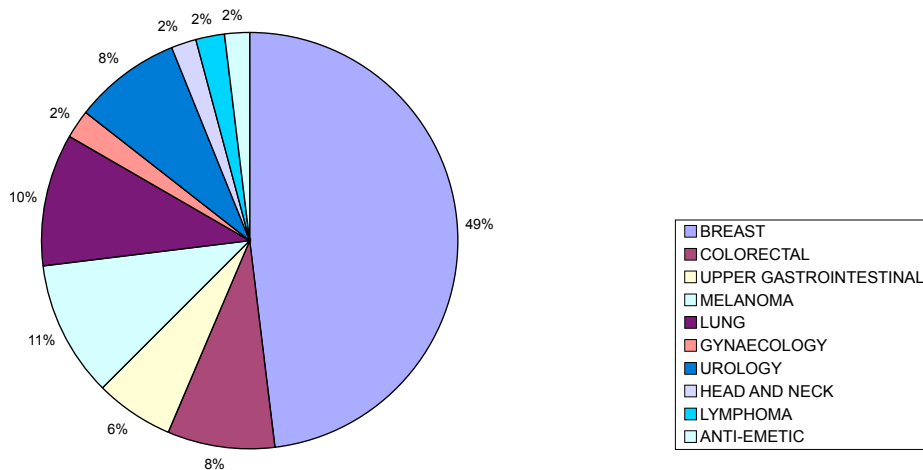


Dawn Beaumont-Jewell in celebration of being funded by the charity for ten years successfully abseiled down the water tower at Church Langley dressed as wonder woman which raised a staggering £500.00.

Proportion of staff funding received in 2010 by the Oncology Research Department at Broomfield Hospital

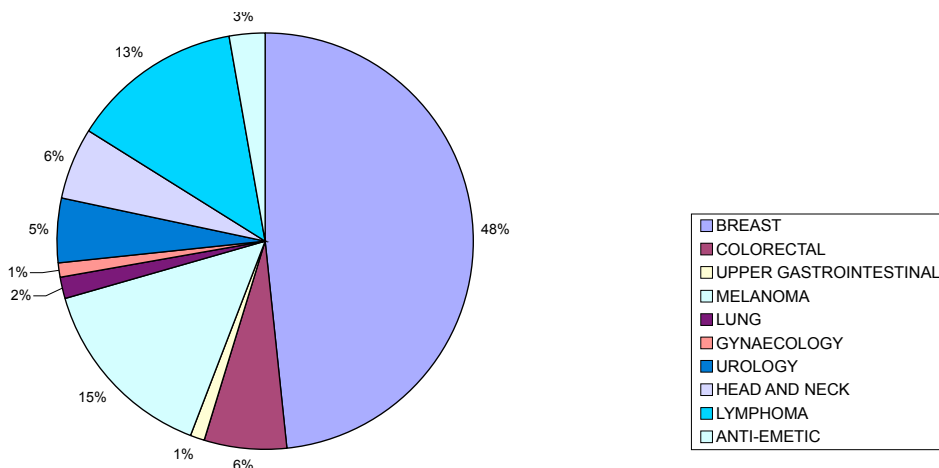


Proportion of clinical trials open to recruitment in 2010 by Tumour Group



The Broomfield Oncology Research Department Team

Proportion of patients recruited to clinical trials in 2010 by Tumour Group



The North Middlesex University Hospital Oncology Research Department

The North Middlesex University Hospital Oncology Research Department is funded in a similar way to the Broomfield Oncology Department.



Judy Hill

In 2010/11 the Helen Rollason Cancer Charity funded one nurse, Judy Hill (Oncology Research Sister).

The charity's contribution towards the cost of the North Middlesex Research Department in 2010/11 was approx. £54,000.

The clinical lead for oncology at the North Middlesex University Hospital is Dr Sian Davies, Consultant Clinical Oncologist who supports research activity together with the recruiting consultants: Dr J Bridgewater, Dr S Karp, Dr D Chao and Dr J Newby.

Dr Farhad Neave retired in June 2010 after many years of association with the charity and research. Dr Girija Anand and Dr Anna Thompson, Consultant Clinical Oncologists, have joined the staff at North Middlesex and are actively recruiting into clinical trials.

The North Middlesex Trust is a member of the North London Cancer Research Network (NLCRN), which consists of University College London, Barnet and Chase Farm Hospitals, North Middlesex Hospital, Royal Free Hampstead,

Whittington Hospital, Great Ormond Street and Princess Alexandra Hospital NHS Trust.

For further information and contact details see the NCRN web site:

<http://ncrndev.org.uk>

The Research Department at North Middlesex maintains a balanced portfolio of both national trials and commercial studies within breast, urology, colorectal, upper gastrointestinal and lung cancers, with the aim to offer a variety of studies suitable for each patient.

There are currently 30 studies open that are a mixture of randomised trials (where the treatment is randomly selected from known treatment arms) and genetic studies involving a blood test and questionnaire. Last year 83 patients were recruited. Furthermore, there is ongoing follow-up within studies which are now closed to recruitment but are still collecting data and this aspect is a vital part of quality and credibility within clinical trials.

The individual trials are sponsored and supported by various groups such as the Medical Research Council and Cancer Research UK, as well as organisations including Imperial College London and Addenbrooke's Hospital, Cambridge.

The overall aim for the research team is to provide holistic care to patients within clinical studies and those considering recruitment to them. This approach within clinical research will enhance both knowledge in cancer treatment and improve the quality of care of patients affected by this disease and patients should be invited to participate wherever possible.

The aim for the year 2010/11 is to increase recruitment into a balanced trials portfolio building on the established strong foundation.

*I was often frightened
worried & anxious
about the future but
there was always
someone to talk to who
really listened...gave
me the courage to
continue.*

*Without access to your
drug trials, I don't
think I would
be here today.*

*Words cannot express
our gratitude.*

*Thank you to you all
for your kindness,
cheerfulness and
compassionate
understanding. We
appreciate you all
and thank you
for your care.*

Research Laboratory

1. Introduction: Research aims

Breast cancer affects millions of women worldwide and is on the rise in the UK, with one in eight women developing the disease. Although survival rates have significantly improved and mortality rates have fallen over recent years, breast cancer still remains a major cause of death. Early detection, more effective treatments, together with a better understanding of the molecular mechanisms of breast cancer development are key to improving the survival rate.

The Helen Rollason Research Team works closely with the medical community to achieve this goal. The scientists and clinicians use very modern and accurate techniques to identify (i) novel indicators (markers) for the early diagnosis of the disease, (ii) molecules which are involved in the spread (metastasis) of breast cancer, (iii) indicators (markers) derived from breast tissues and blood to predict and monitor the effectiveness of pre-operative chemotherapy treatment. The laboratory also works closely with Rochelle House (Springfield cancer support centre) in developing research based around complementary therapies. It is expected that all these studies will pave the way to the development of novel diagnostic tools and the establishment of improved and more personalised curative regimes to combat breast cancer.

2. New developments

The Helen Rollason Research Laboratory has seen new developments in the past year. At the end of February 2011, the laboratory was relocated from the Sawyers Building to the newly built Postgraduate Medical Institute (PMI) on the Rivermead Campus at Anglia Ruskin University in Chelmsford. The new laboratory has now expanded, including three separate rooms (a preparation room, the "wet lab" and a tissue culture room). In addition, £250,000 was specifically allocated to the laboratory from the Higher Education Funding Council for England (HEFCE) to purchase new equipment (see Appendix 5.1 on page 12). Finally, since September 2010,

three students, including two full-time PhD students and a 1-year placement student, have joined the research team (see Appendix 5.2 on page 12).

3. Research projects

3.1. Update on ongoing projects

Three different research projects were actively being pursued last year (please refer to the 2009/10 annual report).

Project 1: "Leukocyte-based biomarkers for monitoring the efficacy of preoperative chemotherapy treatment in breast cancer"

Lead: Dr France Docquier

Circulating markers are substances that can be detected at abnormally high amounts in body fluids (such as urine and blood). They are much sought after for screening diseases, choosing and monitoring therapies, assessing the recurrence of diseases and estimating overall survival rate (prognosis). Although a few of these circulating markers are currently used for breast cancer, they are neither very sensitive, nor reliable.

The primary aim of this study is to identify new markers present in blood from breast cancer patients undergoing pre-operative chemotherapy, which could be used to monitor the response to treatment in an easier and more accurate manner. One blood marker candidate studied in the laboratory is called BORIS (or CTCFL). So far, 61 patients have been recruited at Broomfield Hospital into this clinical trial and recruitment is still continuing (recruitment target: 150 patients). Blood samples (taken before and after treatment) from patients responding and not responding to the treatment are being currently compared. This analysis is expected to generate strong preliminary data in 6 months' time.

The costs of this study are entirely covered by funding from the Research and Development (R&D) Department at Mid Essex Hospital NHS Trust (£10,000 from September 2010 to September 2011). Collaboration with Dr Elena Klenova (University of Essex).

The Helen Rollason Research Laboratory has superb equipment for us to conduct cancer research. Our scientists, who work in collaboration with many other world-class research centres across the UK and Europe, are currently researching the mechanisms allowing breast tumours to spread, possible markers for diagnosis and prognosis of the disease, and whether we can predict responses to chemotherapy.

Professor Paul Sauven

Research Laboratory

Project 2: “The identification of signalling pathways involved in chemotherapy resistance of breast tumours using proteomic technologies”.

Lead: Dr Chrissy Greenwood

Currently, it is not known why certain tumours respond better than others to primary chemotherapy (chemotherapy given before any other treatment). This project aims to compare responsive with non-responsive tumours in order to identify key proteins and mechanisms that may be important in determining the outcome of treatment.

We are currently focusing on confirming our previous results, which identified a number of proteins potentially involved in primary chemotherapy response. We have been carrying out a full literature review on these proteins to ascertain any known involvement in breast cancer and chemotherapy treatment. We are now aiming to confirm the presence of these proteins in additional patients who showed different responses to primary chemotherapy. Once these have been validated, we will look at the mechanistic functions of these proteins.

This project is funded by CMERT who awarded £15,000 for consumables (funds released Jan 2011) and from £4,076 awarded by the Research Enhancement Fund to employ Helen Moor in the laboratory for an 2 extra days a week from April to August 2011.

Project 3: “Investigation of the early molecular mechanisms that regulate breast tumour cell invasion and identification of Triple Negative breast cancer protein signatures”.

Lead: Dr Chrissy Greenwood

Most breast cancer patients die because the cancer cells initially present in the breast move to other parts of the body (metastasis) where secondary tumours can then form. The mechanisms that trigger and allow this spreading to occur are poorly understood. In this study, we propose to profile and compare the signal transduction events that occur in metastatic and non-metastatic tumour cells.

We are currently researching into ‘triple negative’ breast cancer, which is a type of breast cancer that is particularly malignant and hard to treat. At present, there are neither established biomarkers nor drug targets to aid the diagnosis, prognosis and treatment options of triple negative breast cancer. We are validating a number of proteins that are specifically over-produced in metastatic, triple negative breast cancer. We hope to submit a paper for publication in the next few months on this work.

This project is partly funded by a NIH grant of £220,000 awarded to our collaborator Dr Metodi Metodiev (University of Essex). Dr Christina Greenwood and Dr Khalid Al-Janabi (Mid Essex Hospital NHS Trust) are named collaborators on this NIH grant. Other collaborators include Dr Louise Alldridge (Griffith University).

3.2 New projects

Due to the recruitment of additional members (students), the laboratory was able to set up and start developing several research projects over the past year.

Project 1: “Investigation of the different functions of CTCF isoforms in breast tumorigenesis”.

Lead: Dr France Docquier

Dr Docquier previously found that a gene called CTCF is involved in breast cancer. This gene can produce two different proteins: only one CTCF protein is present in normal breast, while an additional CTCF protein is present in breast tumours. Using a very modern technique, we aim to further understand the role of CTCF in breast cancer development, in particular by identifying genes regulated by the two forms of the CTCF protein.

Initially, this technique will be optimised in a breast cancer cell line model. Subsequently, it will be applied to tissues, specifically normal breast tissues and breast tumours. The genes identified by this research are expected to serve as new biological markers for breast cancer and represent specific targets for novel breast cancer therapies.



The Research Team

Research Laboratory

This project was awarded £5,000 of funding from the Faculty of Health & Social Care Support Fund. It will also be partly funded by the charity. Collaboration with Dr Elena Klenova (University of Essex).

Project 2: "Identification of novel protein partners of CTCF involved in cell proliferation".

Lead: Dr France Docquier

Proliferation markers such as Ki67 and PCNA are proteins which are detected in dividing cells and indicate the rate at which the cells are growing within a tumour. Evaluation of the cell proliferation index (% of cells positive for the marker) in tumours may be very valuable as a prognostic indicator (i.e. predictive of patient's survival) and could play an important part in choosing the best treatment option for a cancer patient. Preliminary data in our laboratory suggest that the CTCF protein(s) may interact with Ki67 and PCNA in breast tumours. The aim of this project is to confirm that CTCF binds directly to Ki67 and PCNA, as well as to understand the role of these interactions in breast cancer. It is hoped that the results obtained will help targeting and developing more effective treatment strategies.

Currently, the costs of this project are entirely covered by £4,000 of funding from the Faculty of Health & Social Care Support Fund. Collaboration with Dr Elena Klenova (University of Essex).

Project 3: "Characterisation of novel targets of BORIS (also called CTCFL) in breast cancer".

Lead: Dr France Docquier

Tests checking the Estrogen Receptor (ER) and Progesterone Receptor (PR) status are routinely performed in breast cancer specimens in order to determine whether the growth of the tumour is sensitive to Estrogen and Progesterone hormones. Patients with breast tumours positive for both ER and PR (~40% of cases) have a better prospect of overall survival. This is because the tumours are less aggressive and these patients

can be treated with hormonal therapies. Previous work performed by us and our collaborators showed that BORIS is present in a majority of breast tumours (while absent in healthy breasts) and that its levels correlate with those of ER and PR. The aim of this study is to examine whether BORIS is capable of directly regulating the production of both ER and PR. This research project will help understanding the function of BORIS in breast cancer and could potentially give rise to alternative treatment options. Collaboration with Dr Elena Klenova (University of Essex).

Project 4: "Investigation into the psychological, physiological and biochemical impact on breast cancer patients receiving reflexology treatment".

Lead: Dr Chrissy Greenwood

Increasingly, complementary therapy treatments, such as reflexology, are being used in health care settings to support the treatment of cancer patients and ease the side effects of conventional treatments. However, scientific evidence to support the efficiency of these alternative treatments is limited. This pilot project aims to investigate the psychological, physiological and biochemical impact of reflexology on breast cancer patients following surgery. We will measure levels of anxiety, quality of life, blood pressure, heart pulse and cortisol levels (a hormone related to stress) found in saliva. Participants are being recruited from the Breast Unit at Broomfield Hospital and the reflexology treatments will be carried out at Rochelle House (Springfield cancer support centre).

The first patient was recruited to this study in April 2011 and 5 patients have consented to date (the recruitment target is 40 patients). This project is funded by £13,000 from the Research Assessment Exercise (RAE) funds allocated to the laboratory for its previous academic outputs. Collaborators involved: Dr Andrew McVicar and Carol Ellis (ARU), Lorna Ellis



To have scientists undertaking world class cancer research on this campus is a real coup for the university. We are delighted to be part of this research programme and look forward to building on our relationship with the Helen Rollason Cancer Charity in the future.

**Professor David Humber,
Pro Vice Chancellor &
Executive Dean,
Faculty of Social Care,
Anglia Ruskin University**



Research projects 2010/2011



(Rochelle House), Simon Smith (Oncoplastic Surgeon, Broomfield Hospital) Kathy Rooke (Research Sister-Breast Care, Broomfield Hospital) Dr Louise Alldridge (Griffith University, Australia) and Chandra Sekharan (Colchester Hospital University Foundation NHS Trust).

4. Scientific dissemination in 2010/11

4.1 Articles published

Meta-data analysis as a strategy to evaluate individual and common features of proteomic changes in breast cancer. *Cancer Genomics Proteomics* 2011; 8(1):1-14.

Researcher Involved: Dr Chrissy Greenwood.



Optimised Protocol for Protein Extraction from the Breast Tissue that is Compatible with Two-Dimensional Gel Electrophoresis. *Breast Cancer: Basic and Clinical Research* 2011; 5:37-42.

Researcher Involved: Dr Chrissy Greenwood.

4.2. Poster presentations

Novel protein biomarkers and drug target candidates for triple negative breast cancer. HUP0 10th Annual World Congress, Sydney, Australia, September 19-23 2010.

By Dr Chrissy Greenwood.

4.3. Conferences attended

CAMSTRAND (Complementary and Alternative Medicine Research) Annual Conference, Southampton, UK, March 31, 2011.

By Dr Chrissy Greenwood.

4.4. Verbal Presentations

Phosphoproteomics: Towards the Discovery of Novel Cancer Biomarkers. Karolinska Institute, Stockholm, Sweden, April 5, 2011.

By Dr Chrissy Greenwood.



5. Appendix

5.1. Personnel of the Helen Rollason Research Laboratory in 2010/11

Dr France Docquier

Senior Research Fellow, HRCC funded

Dr Christina Greenwood

Research Fellow, HRCC funded

Dr Sushma Rai

Research Technician, HRCC funded

Dr Helen Moor

Laboratory Technician

Miss Ioanna Pavlaki, PhD student

Mr Okezie Ofor, PhD student

Miss Natalie Ring

Visiting student (placement)

Prof Paul Sauven

Laboratory Director, Professor of Surgical Oncology

Mr Chandra Sekharan

Consultant Breast & Oncoplastic Surgeon at Colchester Hospital University Foundation NHS Trust, is also actively involved in the research projects

5.2. Major equipment acquired at the laboratory in 2010/11

- **Flowcytometer cell sorter** - this equipment enables us to separate ("sort") individual cells of particular interest from a cellular mixture, depending on a number of factors (such as size). Cost: £94,500.00.
- **Real-Time PCR Thermal Cycler** – this apparatus allows to visualise "in live" the increase in quantity of a particular DNA or RNA molecule. Cost: £28,000.00.
- **Bioanalyzer** – this platform makes possible to determine the size, amount and quality of DNA, RNA and proteins within a sample. Cost: £10,230.30.
- **2D analysis software** – this tool quantifies individual proteins that have been separated on gels in two dimensions (by size and electric charge) and can analyse the difference between gels (example: before and after treatment). Cost: £13,370.00.

Fundraising

We are very grateful to everyone who supported us through a testing and challenging year. With the help of supporters, businesses and sponsors income from the many events held during the year included the following:

2010/11 fundraising

London Marathon	£40,266
Vintage Fayre	£14,905
London Triathlon	£7,234
Tea For Helen	£25,195
Great North Run	£3,403
Group events	£27,687
Walks	£11,337
Treks	£30,782
Rob Bonnet Golf Day	£24,315
Donations of £263,283 were received during the financial year:	
Donations for clinical trials in memoriam	£32,882
Research laboratory	£1,945
General donations	£80,462
Friends of Heal	£15,110
Collection tins	£11,545
Grants and trusts	£46,180
Corporate donations	£64,471
Legacies	£10,688

2010/11 fundraising

Key highlights for 2010/11 included Tea for Helen, supported by Wilkin & Sons of Tiptree which raised over £25,000 in its first year. Helen's Club was launched last year to encourage supporters to give regularly. Over 90 people have signed up to have the opportunity to win £100 in a monthly draw by donating £5 per month. We will continue to drive this project forward in 2011/12. We are very

grateful to supporter John Edwards who handed over the North Essex Circular Walk, consisting of 7, 16 or 26.2 mile walks through picturesque countryside. The event raised over £5,000 in its first year. Our first ever Vintage Fayre sponsored by Barratt Homes was a huge success and a popular event for those who attended.

The Helen Rollason Friends Groups based in Braintree, Burnham-on-Crouch, Chelmsford, Colchester, Danbury, Springfield and Takeley continue to raise much needed funds for the charity and we appreciate all the hard work and time given by the volunteers.

Loyal supporters David and Polly Buckle with the popular Enfield Brass Band have raised funds for the charity by holding an annual concert and have raised over £20,000 over 11 years.

Sporting events – marathons, skydives, treks, cycle rides, golf days, walks and runs raise valuable funds for us, we appreciate everyone who takes part in these projects.

We are very proud of the Helen Rollason Garden which was created in Central Park, Chelmsford through our "Bloomin Spring" campaign in November. Many supporters sponsored bulbs in memory of a loved one.

Work continues on trust and grant funds, thanks to Cofunds, UPS Parcels, The Eric Robey House Charity and the Ripley Trust for supporting us by way of generous grants in 2010/11. The fundraising team continues to work with corporates and encourage companies to adopt us as their "charity of the year". Thank you to RBS Chelmsford and RBS Bishopsgate, London for all their fundraising initiatives and to the London team who refurbished the London cancer support centre.

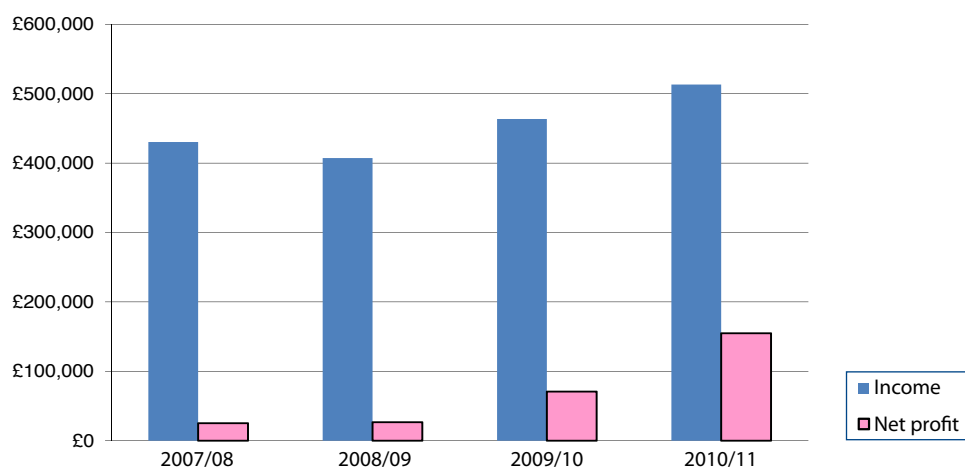


Retail

Our charity shops achieved a staggering 30% profit on sales last year, doubling last year's profit to £150,949, with a total sales income of £509,673. This was achieved by careful monitoring of expenditure and continuing to

ensure that every shop is operating to maximum efficiency and the sheer hard work and support of all our volunteers. During the year we closed down our furniture business.

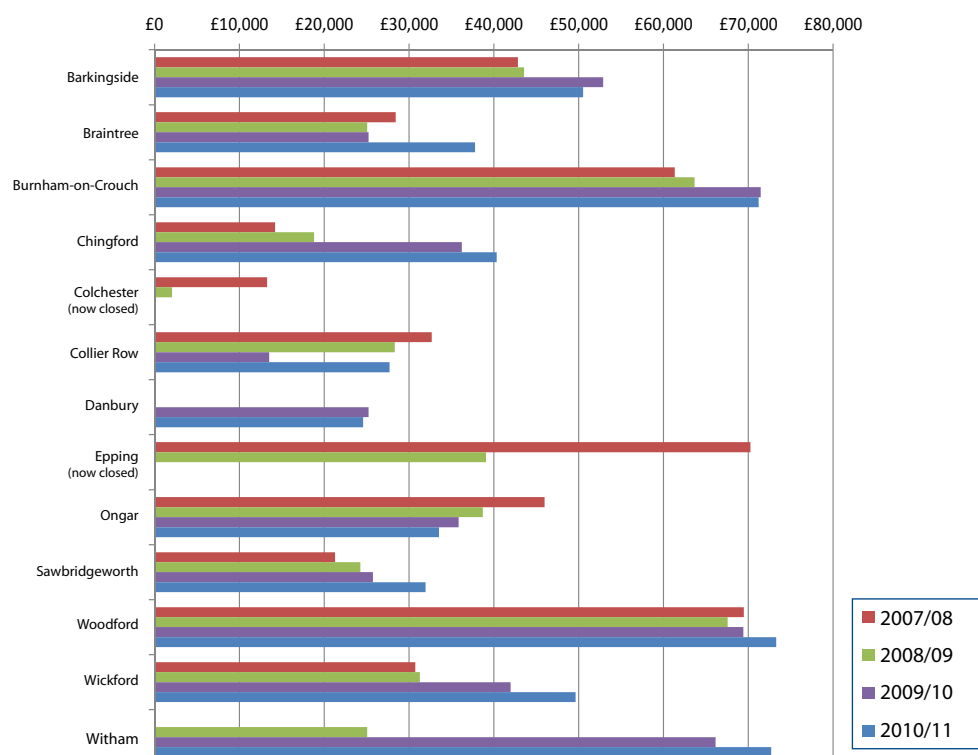
HRCC retail total income & net profit - 2007/08 vs 2008/09 vs 2009/10 vs 2010/11



This year we will again be working closely to monitor costs and ensuring our shops are run to maximum efficiency, we have recognised the need to provide a substantial budget for health and safety matters and for

ensuring our buildings are brought up to the standards required by our leases as a significant backlog of work has built up. Even with this additional expenditure we still aim to achieve a similar profit on sales as last year.

Sales per HRCC shop - 2007/08 vs 2008/09 vs 2009/10 vs 2010/11



Retail

One of our biggest achievements last year was the refurbishment of our Braintree shop, in September. The second floor has now been opened up to customers and feedback is very positive and we are now achieving average sales of over £1,000 per week from this shop. An additional shop has been opened at Burnham-on-Crouch.

Last year also saw big changes in our retail team and we now have a team of Area Retail Managers.

Their goal is to increase the profits within their individual areas, increase the number of volunteers in certain shops and improve overall standards within the shops. For this to be successful we rely on each individual shop manager and all the volunteers.

We were also pleased to see all shop fascias changed to the new branding this year which was kindly sponsored by the following companies, UPS Parcels, Cofunds, M&G and Church and Hawes. This has helped to give the shops a fresh new look.

The coming year

Two new trials are underway, a Gift Aid trial has taken place in our Witham shop, enabling customers to donate a product and sign up to Gift Aid. If this product is then sold through our shops we will be able to claim back an additional 25% of the sale price from the Inland Revenue. Depending on funding availability Gift Aid is expected to be rolled out to three shops this year.

PAT testing of electrical goods is also being trialled in our London shops, South Woodford, Barkingside and Collier Row.

It is clear that the shops are very much part of the community and have an important role in developing the charity's image, working closely with the marketing team. These community connections provide great opportunities

for fundraising activities through the shops and this will help to maximise the contribution the shops can make to the charity.

So with the continued help and support of all our volunteers we look forward with anticipation to the coming year and sharing our successes with you in 2012.

One young volunteer at our Braintree shop said:

"What stood out about the Helen Rollason Cancer Charity was quality and teamwork. It made me want to know more about the charity. I have lost somebody close to me through cancer so felt it was my place to come and help out and do something good for somebody else and the community.

I would like to say that I 'like' working at the Helen Rollason Cancer Charity shop but I don't, I LOVE it! Everything about it is so friendly and inviting. Everybody works here are absolutely lovely and I have made some new friends as well as fellow employees. I go to college 2 days a week and then help out at the charity shop as and when I can. I am studying hairdressing and although I'm always busy I still manage to fit in my shift at the shop.

People think that charity shops are just for the elderly but what makes the Helen Rollason Cancer Charity so special is that we are all different ages from 15 onwards.



Alison Matthews
Burnham-on-Crouch
(Two shops)
Chingford
Sawbridgeworth
Wickford
Witham



Anne Brown
Braintree
Danbury
Ongar



Donna Fordham
Barkingside
Collier Row
South Woodford

Marketing



Charity Branding

During 2010/11 the new brand image roll-out was complete and included:

- New fascia boards for the 12 shops (M&G sponsored Braintree, Cofunds sponsored Barking and UPS Parcels sponsored the fascia boards for the remaining ten shops)
- Internal point of sale signage for the 12 shops
- Internal and external signage for cancer support centres
- Clothing including running vests and fleeces
- Banners for fundraising events



Thank Q

A new database system called ThankQ was also installed with the aim of gaining a greater understanding of our supporters, donors, corporate partners, competitors, celebrity supporters and vice patrons. ThankQ will assist charity staff to integrate activities, reduce administration costs, increase efficiency, communicate more effectively with supporters and ultimately maximise fundraising opportunities. Initially the database system was installed at the head office in Chelmsford during 2010/11 and the plan is to implement ThankQ across all areas of the charity including shops administration and cancer support centres.

PR

During 2010/11 66 press releases were written and distributed to the media including newspapers, radio stations and magazines across Essex, Hertfordshire and London. These releases covered fundraising events, cancer support centres, research and shops. The events that received notable coverage included

the Heddingham Castle wedding raffle prize, Vintage Fayre, Tea for Helen and Bloomin Spring campaign.

The charity secured a regular slot in Essex Life magazine each month for 2011. This has provided some excellent exposure to the publication's readers that boasts a circulation of 15,000 and will continue to do so during the rest of the year.

The charity launched a Facebook page and signed up to Twitter (which currently has 55 followers) with the aim of raising awareness and increasing support.

Plans for 2011/12 are to:

- Raise awareness of our services through various distribution channels including hospitals, doctors' surgeries and medical journals.
- Raise the profile of the charity by broadening our relationships with corporate partners and tapping into new geographical areas (within the south-east).
- Assist the fundraising team and shops to market their activities.



Financial Overview

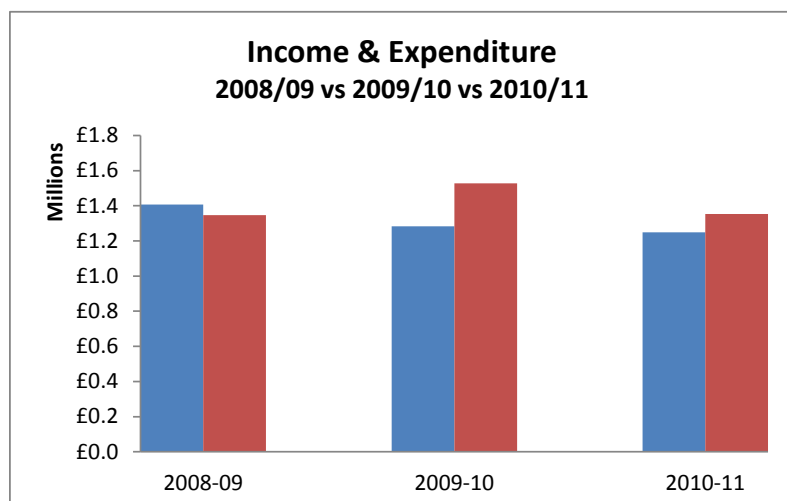
	2008-09	2009-10	2010-11
Income	1,407,283	1,283,669	1,249,793
Expenditure	1,347,561	1,528,353	1,353,915
Net surplus / (deficit)	59,722	(244,684)	(104,122)
RESERVES	834,449	589,764	485,642
Restricted	301,207	276,076	290,509
Unrestricted	533,242	313,688	195,133
INCOME			
Clinical Trials	96,527	61,171	32,464
Research Laboratory	16,224	26,361	2,736
Support Centres	175,107	47,468	42,916
CT Scanner	115,030	129,328	78,503
Brachytherapy	27,035	9,488	10,350
Live Well Centre	7,782	0	0
Shops	407,389	463,634	515,747
Fundraising	547,897	545,635	565,204
Other	14,292	584	1,873
TOTAL	1,407,283	1,283,669	1,249,793
EXPENDITURE			
Clinical Trials	220,201	222,508	191,105
Research Laboratory	92,086	154,423	122,926
Support Centres	192,587	166,569	219,793 ⁽¹⁾
CT Scanner	85,714	85,714	35,716
Brachytherapy	19,736	9,998	12,554
Live Well Centre	15,154	0	0
Shops	380,794	392,848	360,950
Fundraising	234,708	323,871	221,719 ⁽²⁾
Administration	99,081	164,464	191,742 ⁽³⁾
Memorial Lecture	7,500	7,958	7,500
TOTAL	1,347,561	1,528,353	1,353,915
Charitable Expenditure	40%	36%	40%
Net contributions			
Fundraising	313,189	195,669	353,485
Shops	26,595	70,786	154,797

Notes for Expenditure

⁽¹⁾ Increased costs due to Sawbridgeworth and Broomfield centres which opened in the previous year.

⁽²⁾ Reduction in costs due to the London Ball not being held in the year and the reduction in number of fundraisers from the restructure.

⁽³⁾ Increased costs due to the provision of Human Resource consultant, the installation costs in respect of ThankQ (new database purchased) and the office admin post created in the restructure in the previous financial year.



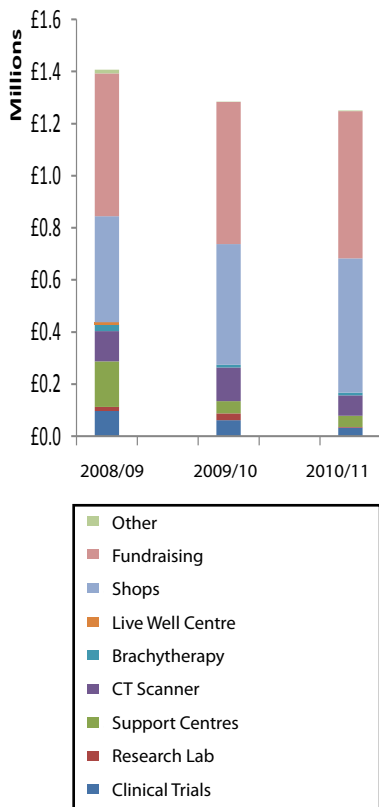
Financial Overview

Brachytherapy

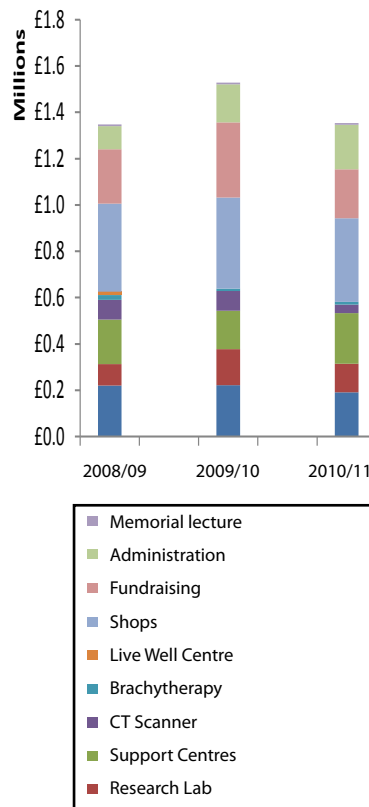
Brachytherapy - or implantation of radioactive iodine "seeds" into the prostate - is one form of curative treatment for early stage prostate cancer. In this procedure, the radioactive seeds are permanently implanted into the prostate after careful computerised dose planning and under ultrasound and x-ray guidance. A Consultant Oncologist, Consultant Urologist in conjunction with a medical physicist supervise the treatment, which is carried out under general anaesthetic in the operating theatre. The radiation seed implants may sometimes be followed by a short course of conventional external beam radiotherapy. Brachytherapy is generally a well tolerated procedure with excellent long term results.

In 2004, the charity purchased a variety of small items specifically for brachytherapy, together with an ultrasound machine. This equipment has been used at Rivers Hospital, Sawbridgeworth and the charity derives an income fee for each procedure performed.

Sources of Income



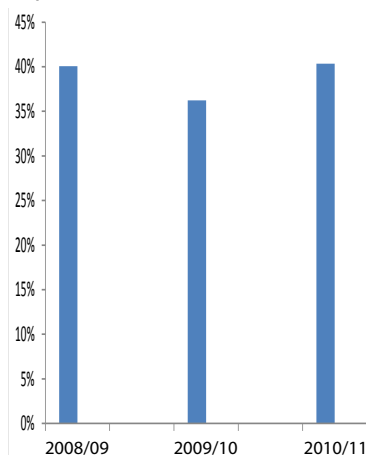
Types of Expenditure



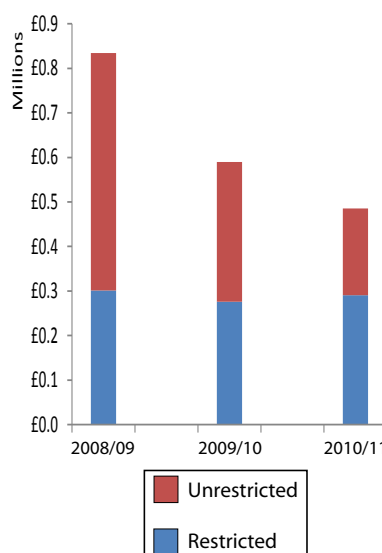
We aim to maximise the proportion of our total expenditure on charitable activities, as do all charities. Our total expenditure includes all fundraising costs, including the running costs of our shops, which leads to a relatively low percentage of our total expenditure being spent on charitable activities.

The percentage of our expenditure on charitable activities increased to 40% in 2010/11. In 2011/12 we aim make a further improvement on this percentage. To achieve this we will continue monitor fundraising and administration costs and further increase the profitability of the shops.

% expenditure on charitable activities



Reserves



Looking Forward

The trustees, management and staff remain fully committed to the five aims of the charity:

- To improve prevention and screening.
- To improve diagnosis and treatment.
- To conduct leading edge research into new treatments.
- To provide holistic therapies in conjunction with conventional medicine.
- To provide environments where those touched by cancer feel comfort and security.

Our 2011 financial budget has been based on the following commitments to our services:

Research Centre	£52,000
Support Centres	£203,000
Clinical Trials	£200,000
Research Laboratory	£109,000

Our expenditure commitments to support our income streams are as follows:

Retail	£418,000
Fundraising	£206,000
Administration*	£187,000

The charity has achieved a great deal over the past 11 years and the foundations are in place to take us through the next decade. 2011 will be a further year of consolidation. We need to ensure all our income streams are maximised to the full, that our overheads are controlled effectively and that our services are operating at maximum efficiency. We need to regain financial stability after a difficult 2010 and the results so far in 2011 have been very encouraging.

I have every faith in the management and staff to carry the charity forward. I would like to take this opportunity to call upon each and every supporter of the charity to help in whatever way you can to ensure we can continue to provide the care and support to people living with cancer. I see at first hand what a difference our services can make to the quality of people's lives and I am very proud of the work we are doing.

Please help us continue the good work.

Neville Davidson

Professor Neville Davidson FRCP FRCR
Chairman

* Includes management, administration and finance salaries, marketing & promotional expenses, office running costs, travel, legal, HR, accountancy, IT (including ThankQ a new database).

Helen Rollason **Cancer Charity**