

## Examples of Research Questions

- What is the natural history of these syndromes?
- Genotype/phenotype alignment?
- Why is there a difference in presentation between siblings?
- Are *de novo* mutations more aggressive?
- What is the role of epigenetics?
- What is the role of environmental factors?
- What role does lifestyle play?
  - Anxiety/Stress/Depression, Nutrition/Diet, Exercise
- Do medications impact tumor growth?
- Is thyroid disease associated with VHL?
- Does tumor aggression correlate with ...?
- Does oral health correlate with ...?
- Does treatment with targeted therapies or SRS modify the course of the disease?
- Does pregnancy modify the course?
  - What about other sources of hormones?
- Does early pre-symptomatic screening really help?



To participate,  
log on to

[www.vhl.org/databank](http://www.vhl.org/databank)



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# CANCER IN OUR GENES

## *International Patient Databank*



Patient participation  
helping to find a cure

**VHL  
BHD  
HLRCC  
SDHB**

*and other related  
cancers*

A Partnership  
between Patients  
and Clinical  
Researchers

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## Goals of the CGIP Databank

- Create a unified resource for both researchers and participants
- Include a significant number of patients to allow meaningful statistical analysis.
- Give a complete “picture” of each VHL, HLRCC, BHD, SHDB patient
- Provide a natural history of genetic disorders leading to kidney and/or adrenal tumors
- Reveal correlations between known effects and other conditions and between diseases, learning from commonalities and differences
- Expedite matching patients to clinical trials

## Why Multiple Conditions?

- VHL, HLRCC, BHD, and SDHB all increase the odds of getting kidney cancer.
- Each is caused by a different genetic alteration, in a different gene
- If any one of these four genes can cause kidney cancer, what do they have in common? What is it that they all help to control?
- What can be learned from their similarities and differences?

## Advantages of a Patient-Driven Databank

- Only the patient can provide the complete “picture” of their experience and quality of life
- Provides insights into lifestyle and quality of life (i.e., nutrition, exercise, mental outlook)
- Includes usage of both prescription and non-prescription medications
- Shows family history (blood relatives)



## Data Privacy and Confidentiality

- The VHL Alliance specifically owns and controls the data
- Authorized third parties, including researchers, will receive only “**de-identified**” data
  - No names
  - No addresses or phone numbers
  - No other identifying information

## Benefits to the Participants

- Expedited matching to clinical trials
  - Participants will be notified of researcher interest by the VHLA and must initiate contact if they want to be considered for a clinical trial or other research project
- Documents on medical history and medications can be downloaded to share with physicians during office visits
- Optional Screening reminders sent to participants

## Contribute Your Experiences to Advance Research

- Today researchers are limited to the data compiled by a single hospital or research team
- This clinician-sourced data provides only a limited picture of the disease, often focused on a single organ
- With the global CGIP databank, researchers have access to the annually updated compiled information of thousands of patients
- ***We need as many people as possible to contribute experiences and information!***

## CGIP: Support of Clinical Trials

- Expedite Clinical Trials
  - Identify candidate patients
    - Includes questions recommended by the FDA for clinical drug trials
  - Linked to tissue bank
- Provide natural history data for comparison
  - Help determine promising approaches for drug development
  - Define “normal” to know if the drug make a difference
- Learn from all experimentation
  - Learn from off-label use experiences and interactions with other prescribed or over-the-counter drugs and supplements
- Better and more harmonized collection of outcomes



## Global Rare Disease Initiative

- VHLA is working with NORD and others around the world to create a global repository for rare disease information
- Many sources of data will feed into this common data set
- Incorporates FDA feedback on questionnaire design

