

## **Summary of the FH01 collaborator's meeting, November 2007, London.**

The FH01 collaborators' meeting in London at the end of November 2007 was very successful with representatives coming from all over the UK.

Talks were presented from Wales, Leeds, Bristol, London and Cambridge with time for questions and answers at the end of each.

Stephen Duffy, Professor of cancer screening, opened the meeting, welcoming and thanking all for coming. He then went on to present Sue Thomas' report on the progress of the FH01 study as Sue, the National Co-ordinator of FH01, was unable to attend due to a broken leg. A grand total of 6,669 women from 77 centres have been recruited into the study; approximately 4,500 from England, 1,000 each from Scotland and Wales and the rest from Northern Ireland. This is fantastic and well over the 6,000 needed. He congratulated everyone involved and talked about what we needed to do now.

Stephen was followed by Sue Hartup, Breast Care Research Sister from St James' Hospital in Leeds, and Julie Miller, Genetics Research co-ordinator from the Leeds Infirmary, who described their successful collaboration in the family history clinics in Leeds and their participation in the FH01 study. Their future developments included participating in the FH02 study which will be looking at women aged 35-40 years of age with a family history of breast cancer.

The Bristol Experience was next with a presentation from breast clinician Dr Mike Shere. He talked about the setting up of high risk clinics within the Bristol breast screening service and the problems of screening young women.

After coffee, Drs Kate Gower-Thomas, breast consultant from Breast Test Wales and Louise Jones, pathologist from the Institute of Cancer in London, gave their presentations.

Kate spoke about MRI scanning in women with a significant family history in Wales. She explained the selection process of these women, brca 1 and 2 gene mutations and carriers, results from important MRI studies, who should be screened with MRI and associated costs.

Louise spoke passionately about the pathology and specific features of breast tumours in high-risk groups, molecular profiling, genetic risk associations and biological correlates with mammographic density and questions surrounding these issues that still needed to be answered.

After lunch, Dr James Mackay reported from the HTA conference and spoke of possible new and exciting studies. He described how a Norwegian company called DiaGenic have developed a diagnostic test based on gene expression in peripheral blood for breast cancer that could possibly be used as an adjunct to mammography and ultrasound to diagnose breast cancer in young women with dense breasts. He asked if the FH01 study

could, in any way, provide evidence for this. This is an extremely exciting development – watch this space!

Ruth Warren, breast consultant at Cambridge, then discussed the radiology review in FH01: what they would look at, how they would do it, the process and suggested procedure. She asked if we could use previous experience from other studies such as MARIBS and POSH and other groups in other countries. She also asked for volunteer centres.

Finally, Stephen Duffy concluded the presentations by talking about breast density. This component of the radiology review will look at the typical range of breast densities in FH01 women, and aims to find out whether density predicts risk and if changes in density are important.

The meeting finished with a general discussion of the topics covered and with a general feeling that this had been a very worthwhile day.

The full power point presentations of the day will appear on this website soon.