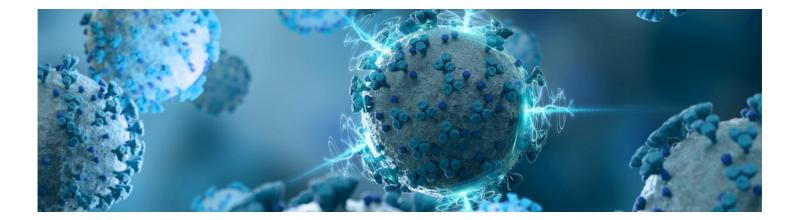
## BCNetter Issue No. 13, October 2020





Dear BCNet Members,

It is becoming increasingly clear that we are facing the greatest healthcare challenge of our times. In France, and Europe as a whole, a second wave of infections is taking hold and once more biobanks, research and clinical institutions are directly affected in their routine operations.

Through necessity, the field of biobanking has been recognized as an integral part of the global research infrastructure and the response to the COVID-19 pandemic. The adaptations in biobanking include the streamlining of workflows for the rapid and safe collection of high-quality samples and associated data from areas of high transmission, rapid sharing of data globally, and supporting research to understand the biology of the virus, as well as its clinical management and vaccine development.

A special issue has been arranged on "Biobanking during the times of COVID-19" for the journal *Biopreservation and Biobanking*, where Marianne Henderson and I provide the guest editorial, and also contribute to a number of manuscripts in collaboration with our colleagues from across the world. The complete journal issue is expected to be released in a couple of months, though some of the manuscripts will be made available online ahead of print. The challenges we faced over the last few months highlight the need for taking wider, collective action so that our efforts can be impactful. The existence of strong networks provides the cornerstone, as well as the opportunity to share experiences and expertise. The ability to share information across our network gives us strength and a continued empowerment.

In this BCNetter you will read about the experiences in Egypt; the call for IARC postdoctoral Fellowships as well as the most up-to-date development on funding opportunities, and highlighted papers by our colleagues.

We are grateful for all our members' contributions and keen to highlight much-needed success stories where possible.

We will continue steadfast through these unpredictable times, with the communication lines always open while pursuing new activities for the benefit of our network. We look forward to the continued cooperation of the members and even more successful initiatives in the coming weeks and months.

Zisis Kozlakidis BCNet Coordinator Yerevan State Medical University (YSMU), Armenia wins the EU Twinning Program for its ARICE project





Yerevan State Medical University (YSMU) won the "Building Cancer Research Infrastructure for Armenia" (ARICE) Twinning Program. This 3-year project aims to increase the capacity of research infrastructure in Armenia in the field of cancer research by developing modern biobank data and research. This goal can be achieved through close cooperation with leading universities in this field.

YSMU, as a coordinator, will implement the program with the participation of the Austrian Medical University of Graz, the International Agency for Cancer Research, and Karlova University in the Czech Republic, spreading its capabilities at the institutional, national and regional levels.

The establishment of the mentioned research infrastructure in Armenia is conditioned by the very high rates of cancer morbidity, mortality, and rare malignancies, compared to the researches carried out in the European countries. The ARICE project will ensure the development of cancer research infrastructure both in Armenia and in the region.

Extensive population research on cancer prevention, particularly biomarkers, will contribute to new scientific breakthroughs in treatment success.

The implementation of the ARICE project will lay the foundations for the development of clinical medicine, biology, medical ethics, medical economics, and biostatistics.

Recent publications from our Members

Henderson MK, Kozlakidis Z, Fachiroh J, Wiafe Addai B, Xu X, Ezzat S, Wagner H, Marques MM, Yadav BK. The Responses of Biobanks to COVID-19. Biopreserv Biobank. 2020 Aug 31

Jazieh AR, Kozlakidis Z. Healthcare transformation in the post-coronavirus pandemic era. Front Med. 2020 Jul 28;7:429

Eichler SE, Hopperton AP, Alava JJ, Pereira Jr A, Ahmed R, Kozlakidis Z, Ilic S, Rodriguez-Palacios A. A Citizen science facemask experiment and educational modules to improve coronavirus safety in communities and schools. Front Med. 2020 Sep 3;7:486

Cree IA, Indave I, Zavadil J, McKay J, Olivier M, Kozlakidis Z, Lazar AJ, Hyde C, Holdenrieder S, Hastings R, Rajpoot N. The International Collaboration for Cancer Classification and Research (IC3R). Int J Cancer. 2020 Aug 20

Di Lorenzo G, Di Trolio R, Kozlakidis Z, Busto G, Ingenito C, Buonerba L, Ferrara C, Libroia A, Ragone G, dello Ioio C, Savastano B. COVID 19 therapies and anti-cancer drugs: A systematic review of recent literature. Crit Rev Oncol Hematol. 2020 Aug:152:102991

Kozlakidis Z, Abduljawad J, Al Khathaami AM, Schaper L, Stelling J. Global health and data-driven policies for emergency responses to infectious disease outbreaks. Lancet Glob Health. 2020 Aug 10

Di Lorenzo G, Buonerba L, Ingenito C, Crocetto F, Buonerba C, Libroia A, Sciarra A, Ragone G, Sanseverino R, Iaccarino S, Napodano G. Clinical Characteristics of Metastatic Prostate Cancer Patients Infected with COVID-19 in South Italy. Oncology. 2020;98(10):743-7 How did Egyptian hospitals and doctors respond to COVID-19 pandemic?



Coronavirus Disease (COVID-19) was recognized as a pandemic by the World Health Organization just over six months ago. The disease spreads rapidly, affecting millions of people worldwide. Egypt was no exception: the first coronavirus case in an Egyptian national was detected in early March 2020. Since then, the numbers of cases grew rapidly to reach about 100,000 cases by the first week of September 2020. COVID-19 has impacted healthcare systems all over the world. Here we report very briefly some of the responses by the hospitals and medical personnel in Egypt, and providing the links to the published papers on the subject by BCNet members, where the information has come from.

- Many hospitals in Egypt were repurposed as COVID-19-only hospitals.
- Outpatient clinics as well as elective operations were widely cancelled.
- Emergency departments were divided into COVID and non-COVID sections.
- Hospitals used different strategies to protect their staff members. While some of them allowed a service/isolation rotation for their staff, others worked to full capacity, allowing sick leaves for any suspected cases or contacts.
- Infection control measures were strictly implemented, incorporating the expertise and infrastructure already existing before the pandemic.
- Healthcare personnel provided free teleservices for patients (chronic and acute patients), as well as COVID-19 suspected cases.

• The civil society participated through providing PPE, medical equipment, and supporting telehealth services.

The immediate impact of COVID-19 in Egypt continues to be documented. It is interesting to see against this backdrop how the healthcare services of other patient groups have been affected. Especially of cancer patients, where the impact might be more complex to assess and as such remains to be quantified.

Further publications on COVID-19 from the <u>National Cancer Institute, Cairo University</u>, Egypt:

Knowledge, Perceptions, and Attitude of Egyptians Towards the Novel Coronavirus Disease (COVID-19)

Social Stigma: The Hidden Threat of COVID-19



The call for applications for IARC Postdoctoral Fellowships in 2021-2023 is now open until 30 November 2020.

Candidates are required to prepare their research proposal in line with IARC's three emerging priorities, as stated below:

- > Evolving cancer risk factors and populations in transition
- Implementation research
- > Economic and societal impacts of cancer

Proposals focusing on cancer and COVID-19 will also be considered.

Interdisciplinary projects are encouraged. Only candidates from LMICs are eligible (according to the <u>World</u> <u>Bank Classification list</u>).

Fellowships are tenable at the International Agency for Research on Cancer (IARC) in Lyon, France. The fellowship is for a period of two years (a brief interim report during the 1<sup>st</sup> year of the Fellowship as well as a final report at the end will be required) and should be taken up before the end of 2021 (flexibility will be granted according to the global health situation).

Applications are to be submitted online by 30 November 2020.

Further information and contact details here.

Who Are We?

BCNet is the Low- and Middle-Income Countries (LMIC) Biobank and Cohort Building Network, which was established in 2013 to provide a platform for collaboration between its members, partners, IARC, and the international community. BCNet aims to support biobanking and cohort-building activities and to develop sustainable infrastructures for the management of high-quality biological samples and data for research, using best practice principles and guidelines.

## Funding Opportunities

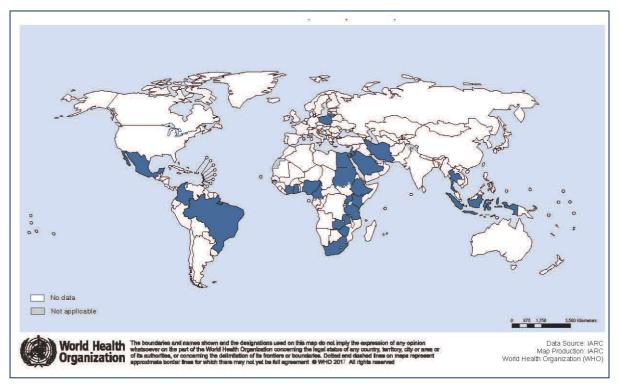


Here is a selection of funding opportunities of interest:

- <u>Harnessing Data Science for Health Discovery and Innovation in Africa (DS-I Africa)</u> Common Fund program and its subsequent calls for projects:
  - <u>Research Hubs</u> (U54 Clinical Trial Optional) RFA-RM-20-015. Letter of intent due date: 09-Nov-2020.
  - Research Training Program (U2R Clinical Trial Optional) RFA-RM-20-016. Letter of intent due date: 23-Oct-2020.
  - Ethical, Legal, and Social Implications Research (U01 Clinical Trial Not Allowed) RFA-RM-20-017. Letter of intent due date: 02-Nov-2020.
  - Open Data Science Platform and Coordinating Center (U2C Clinical Trial Not Allowed) RFA-RM-20-018. Letter of intent due date: 03-Nov-2020
- <u>NCI's Cancer Research Training Travel Awards for LMIC Investigators</u>. Deadline 30-Oct-2020
- <u>NCI and Cancer Research UK launch the Cancer Grand Challenges partnership</u> to support bold new ideas for cancer research (call for proposals soon to be published)



## **BCNet Members**



BRAZIL: Barretos Cancer Hospital; CAMEROON: Faculty of Medicine and Biomedical Sciences, Université de Yaoundé; Université des Montagnes; COLOMBIA: Clinica de la Costa Ltda; CÔTE D'IVOIRE: Institut Pasteur de Côte d'Ivoire; EGYPT: Children's Cancer Hospital Egypt – 57357, Faculty of Medicine Cairo University, Medical Research Institute Ain Shams University, Medical Research Institute Alexandria University, National Cancer Institute, National Liver Institute, South Egypt Cancer Institute Assiut University; ETHIOPIA: Jigjiga University; GHANA: Breast Care International, University of Health and Allied Sciences; INDONESIA: Faculty of Medicine Universitas Gadjah Mada; IRAN: Golestan Cancer Biobank; JORDAN: King Hussein Cancer Center Biobank; KENYA: Ampath Reference Laboratory; LITHUANIA: National Cancer Institute; MEXICO: Instituto Nacional de Cancerología; NIGERIA: College of Medicine University of Ibadan, Obafemi Awolowo University Teaching Hospitals Complex; POLAND: Biobank Lab Department of Molecular Biophysics University of Lodz, Wrocław Research Centre EIT + Biobank; SOUTH AFRICA: National Cancer Institute; THE GAMBIA: Medical Research Council (MRC) The Gambia Unit, MRC International Nutrition Group; UGANDA: Makerere University College of Health Sciences; UNITED REPUBLIC OF TANZANIA: Kilimanjaro Clinical Research Institute; ZAMBIA: Centre for Infectious Disease Research in Zambia; ZIMBABWE: African Institute of Biomedical Science & Technology; University of Zimbabwe College of Health Sciences.

## **BCNet Partners**





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