

outlook

THE NEWSLETTER FOR SUPPORTERS OF THE INSTITUTE FOR CANCER VACCINES & IMMUNOTHERAPY (ICVI)

FROM THE CHAIRMAN



Sir Harry Cotterell Bt OBE
Chair of Trustees

WELCOME TO OUR SPRING 2022 ISSUE OF OUTLOOK

Many of you will have read in previous issues of Outlook about Professor Dalglish's long held interest in LDN as a treatment for cancer. In light of the appointment of our new team member Dr Liu, we thought it would be interesting to read more about it. We explain what LDN is, our current research, and, importantly, its potential for supporting those with long Covid.

We are most grateful to Sue Fox, one of Professor Dalglish's patients who shares her remarkable story inside. Sue is convinced that had Professor Dalglish not prescribed LDN for her she would not be here today.

On to fundraising and I was delighted to hear that the Lucy Sands Tribute Fund has benefitted from those of you who signed up for a case of Corney and Barrow wine at Christmas, also that many of you have become members of the ICVI wine club. Many thanks to George Bouwens for organising the club and raising much needed funds towards our research.

A Christmas Miracle!

Thank you to everyone who bought and sent our Christmas cards this year. We recently heard from someone who had received one of our Christmas cards, having never heard of the ICVI, looked us up online and decided to support us to the tune of £3,000! So do keep buying and sending – we will send out the order form as usual with our Autumn newsletter.



Christmas Appeal

Thanks so much to everyone who donated – we raised almost £15,000 which will support Dr Wai Liu's project which he talks about in this issue of Outlook.



ICVI Wine Club

We are so grateful to long term supporter George Bouwens who has very kindly started the ICVI Wine Club in partnership with wine merchants Corney and Barrow with the first delivery arriving in time for Christmas. ICVI supporters can choose to have either one off or quarterly deliveries of a mixed 12 bottle case of wine with a donation going to the ICVI for each order. This initiative has raised £800 just with Christmas orders – there is a lot of potential for it to raise more! If you would like more details please email abi@icvi.org.uk

New Volunteer

We are delighted to welcome Sami Mason as our new office volunteer. Sami has taken over our social media accounts and organised the Reddit question/answer session. Sami is also running the London Marathon for us this year, having been delayed due to Covid. If you would like to sponsor him please go to <https://www.justgiving.com/fundraising/sami-mason>



Text **CANCER10** to **70191** to donate **£10**

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New Tribute Fund – Ann-Marie Clifford

Ann-Marie was diagnosed with Stage 4 metastatic melanoma in Jan 2018 and was treated at Barts Hospital in London. Ann-Marie did receive immunotherapy treatment thanks to her consultant. Sadly Ann-Marie passed away at home on the 9th of June 2021.

Ann-Marie's sister Ciara and friend Mally decided to support the ICVI following her death because they saw how effective the immunotherapy was; "Ann Marie was so brave. When asked how she was, she would always reply "not too bad", no matter how much pain she was in. There were some challenging days but with the therapy she would suddenly bounce back to life. It gave her hope and strength to fight the disease. She was often able to maintain mobility and do some of the things she enjoyed, including driving. She was able to meet her first granddaughter and be with her on her first birthday. We were able to have one last trip to Ireland.

"The progress we witnessed year in, year out, in terms of new drugs and treatments was encouraging. Many clinical trials are underway to find new ways to engage the body's immune system. Ann-Marie herself took part in such trials. Unfortunately, the 'magic' formula for Ann-Marie wasn't found in time.

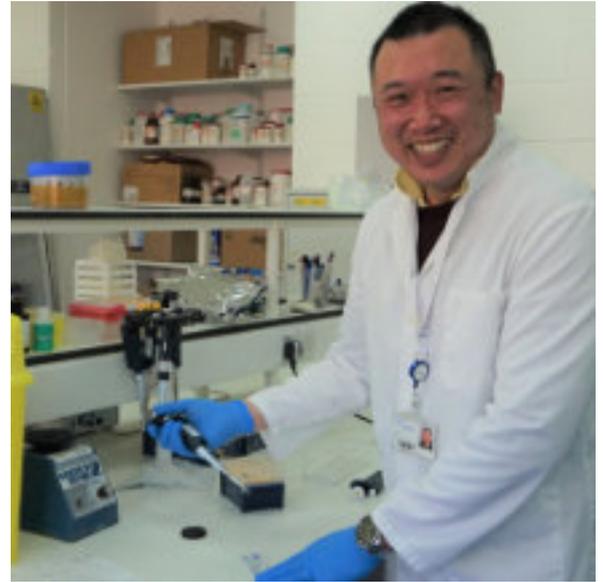
"Too many of our loved ones are being taken too early. Ann-Marie was a young granny. She was 44. Let's support the ICVI in continuing to try and solve this problem and in keeping our loved ones here for a little while longer."

Thank you so much to Ann-Marie's family and friends for thinking of our charity at such a painful time. If you would like to donate to Ann-Marie's tribute fund please visit <https://icvi.org.uk/funds/the-ann-marie-teresa-clifford-tribute-fund/> where you can read Ciara's beautiful tribute to her sister in full.



Welcome to Wai

We welcome Dr Wai Liu back to the ICVI team. Wai received his PhD in Medical Oncology from St Bartholomew's Hospital, University of London in 2001. During this time he developed models to assess the effect of combining chemotherapies with other treatment modalities as a way to enhancing activity. Wai has worked in a cancer research environment for over twenty years. He is a prominent scientist in the field of cannabinoid research, an area he has been actively engaged in for over fifteen years. His team was the first to demonstrate a benefit in combining cannabinoids and irradiation in models of brain cancer. Like Professor Dalgleish, Wai is interested in developing new combination strategies that utilise re-purposed drugs, including Naltrexone, anti-malarial drugs and immunomodulatory drugs like Thalidomide. He has also investigated ways in enhancing anticancer activity by modifying the pathological associations between immune and tumour cells by using immune-targeting drugs. Wai is a key opinion leader on cannabis research and is regularly contacted by the media for his opinions on cannabinoids as a cancer treatment.



Reddit AMA

Wai recently hosted a Reddit Ask Me Anything which discussed the use of cannabinoids as a treatment for cancer. The discussion received over a thousand up votes, over 300 comments and hopefully raised awareness of the charity. You can read the thread here: https://www.reddit.com/r/ICVI/comments/sp42k6/is_there_a_role_for_cannabinoids_in_the_treatment/

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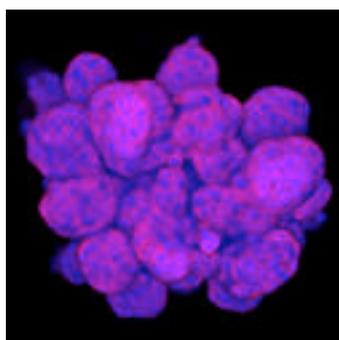
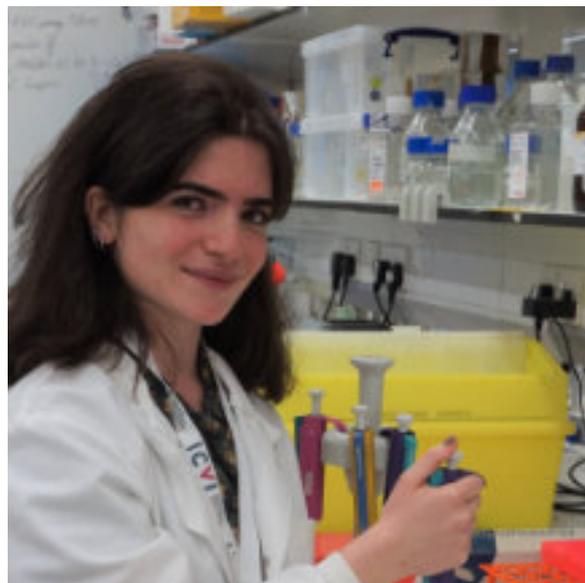
Welcome to Aurora

Aurora is our most recent PhD student who started in October 2021. A graduate of the University of Milan, she joined SGUL in 2020 to study for an MSc in Translational Medicine before successfully applying to become an ICVI funded PhD student.

Aurora's project focuses on interrogating the potential of gamma-delta T cells in infiltrating and killing prostate cancer. The tumour killing capabilities of gamma-delta T cells will be investigated in a 3D system which faithfully recapitulates the complexity of the prostate tumour.

We firmly believe that this project will bring us closer to developing a vaccine as a treatment option for prostate cancer and will enrich our understanding on the killing abilities of gamma-delta T cells, as well as the cancer behaviour.

Aurora says, "I am immensely thankful to be a part of the ICVI's team and to all the donors who are funding my project, to allow my team and I to keep working on developing new immunotherapy-based solutions to fight prostate cancer".



'This is a prostate tumour organoid grown in our laboratory by Aurora. This image shows a cluster of prostate cancer cells organising themselves into a lobed structure that mimics the complex architecture of a solid tumour. This technology will allow us to investigate the way in which we can improve the infiltration of solid tumours by immune killer cells.'

Ovarian Cancer Trial update

We have started work on our ovarian cancer clinical study where we intend to identify markers of immune responses in patients and associate these with patient survival. These data will allow us to identify which patients with ovarian cancer might benefit from immunotherapy and where patient immune responses might need to be supported.

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LDN RESEARCH SPECIAL

What is LDN?

LDN is an abbreviation for Low Dose Naltrexone. Naltrexone is a drug that was initially used as a way of treating drug and alcohol addictions. Then it was discovered that patients using much lower doses of the drug experienced enhancement in immune function. Since then, a number of university research groups have focused on understanding how this drug with a clearly defined anti-morphine effect could also modulate the immune system.

LDN can bind to a specific group of proteins found on the surface of white blood cells causing them to switch off their production of inflammatory chemicals. By doing so, a number of diseases driven and fed by these chemicals can also be treated by using LDN.

How can LDN treat cancer?

LDN is able to enter cancer cells and boost the proteins that are necessary to kill them. It is often the case that these proteins are turned off in cancer, and so using LDN as a way of restoring killing in these cells is exciting. Dr Liu and Prof Dalgleish have recently published a review of LDN and its potential as a cancer therapy, which focuses on how LDN can exert its anticancer effect by: a) boosting the ability of cancer cells to die thus supporting the actions of other cancer treatments; and b) correcting immune functions in patients.

What is the focus of our current research into LDN?

Professor Dalgleish and Dr Liu published a study last year which showed that cancer patients who did not respond to immunotherapy treatment had significantly higher inflammatory markers than those who did. This suggests that anti-inflammatories could play an important role in improving responses to immunotherapy. Three drugs, IMM-101, LDN2 and CBD3 exert significant anti-inflammatory activity in cancer and, alone and in combination, enhance the response to chemotherapy. This can allow the chemotherapy to be effective at half the normal dose and hence avoid significant toxicity. So many patients are unable to tolerate their chemotherapy because of sickness or other side effects. These findings could revolutionise cancer treatment. We are now looking at the effect on immunotherapy. Professor Dalgleish has noted exceptional disease control in his patients when IMM-101 and LDN is given with or without CBD in a number of tumour types.

LDN and Long Covid – an insight from Professor Dalgleish

With current estimates of 1.3 million sufferers in the UK, there is no doubt that the public health burden of Long Covid could have a huge impact both nationally and globally.

A most unexpected observation has been the improvement of patients with long Covid upon starting LDN. The reason for trying LDN in patients who have suffered many months of fatigue is based on our observation that LDN reduces IL-6 production which as well as being the major driver of cancer progression is associated with severe Covid and persists in long Covid patients as well.

In addition, I had become aware that patients with chronic fatigue syndrome (CFS) were reporting improvement with LDN, with 3 cases written up in the BMJ last year. Another more recent paper citing a further 6 cases all improving on LDN adds to this justification as Long Covid and CFS are nearly identical. I am delighted to report several complete improvements to LDN which is no quick cure. It takes 3-4 weeks to kick in as it were, and needs to be continued for many weeks, especially in those patients who have suffered for a long time, over a year in many cases.

I am most impressed with many reporting a reversal of brain fog as one of the first effects with improvement in breathlessness being another early feature. We are trying to get our colleagues in the Long Covid clinics to run a trial on this as they confirm nothing else works!

This is another interesting example of a repurposed drug impacting not only on cancer but also on a condition affecting millions.



Sue Fox's story

I was so lucky to meet Professor Dalglish. That might sound strange as I have a stage 4 melanoma diagnosis, but my luck changed the day I was referred to Professor Dalglish. My excellent consultant had no more ideas as to how my rampant metastasised melanoma could be treated.

In 1994 I had a small spot removed from my right calf but my GP told me the pathology results showed no abnormality. Six years later, when a lump appeared in my groin, my GP suspected an insect bite but luckily I also saw an ENT specialist for a cauterisation of a vein in my nose. I mentioned the "insect bite" and he ordered an ultrasound scan as a precaution.

A few days later, the result showed that the lump was cancerous but the diagnosis of the primary proved difficult. Many other cancers were ruled out but a very diligent radiologist went back to that 1994 report, which said there were some atypical cells which should have been removed to extend the radius from the spot.

The lump turned out to be melanoma in the lymph glands, which were stripped out, and I was put on a five year trial of weekly injections of Interferon.

In Spring 2008 I had pain and spasms in my right arm. The same GP suggested steroid injections, but when I had a spasm in my leg a few months later I asked for a referral. I was sent for an MRI scan which showed several brain tumours. Further scans showed tumours on my right adrenal gland and in each lung. My consultant explained that this was how melanoma showered through the body.

The next few months were taken over with treatments and surgery. I took the whole family away for a very luxurious Christmas celebration as I was warned it was probably my last.

Things remained stable for a while but then it was decided that I would need more surgery to remove some of the tumours. At this point my consultant decided to send me to Professor Dalglish. He had heard that the professor was involved with some exciting trials developing immunotherapy drugs for melanoma. I was tested and screened but unfortunately my type of melanoma didn't meet the criteria. Although I was disappointed, Professor Dalglish immediately prescribed high dose vitamin D3 and LDN and has continued to look after and inspire me. I am so lucky! Eighteen months after starting on LDN, the tumours in my lungs disappeared and although I continue to monitor my showered melanoma with scans, I am living the good life and have 6 grandchildren I never thought I would meet.

I tell everyone to check out LDN as I don't think I would still be here without it. As Covid-19 has highlighted the importance of our immune system for everyone I hope that this non-toxic drug will at long last be appreciated as a cheap but highly effective treatment.



"Eighteen months after starting on LDN, the tumours in my lungs disappeared."

DONATING - PLEASE HELP US FIGHT CANCER TODAY



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