ARGO Accelerating Research in Genomic Oncology

International Cancer Genome Consortium

International Cancer Genome Consortium

17th Scientific Workshop & 4th ARGO Meeting

May 14-15, 2021

Hosted in conjunction with
Peking University Cancer Hospital & Institute

DAY ONE - PLENARY SESSION

#ICGCPlenary21

ICGC ARGO

University of Glasgow

WORKSHOP PLANNING COMMITTEE

Carol Nicol (United Kingdom)
Amber Johns (Australia)
Jianmin Wu (China)
Qimin Zhan (China)
Huanming Yang (China)
Keunchil Park (South Korea)
Andrew Biankin (United Kingdom)
Amanda Ewing (United Kingdom)
Lincoln Stein (Canada)
Christina Yung (Canada)
Jan Korbel (Germany)
Rita Lawlor (Italy)

WELCOME

May 14, 2021

Dear Colleagues,

It is with great pleasure that we welcome you to the 17th International Cancer Genome Consortium (ICGC) / 4th ICGC ARGO Meeting taking place May 14 to May 15, 2021 virtually.

The last 12 months have been a challenge for all of us. Almost all aspects of our daily lives have been turned upside down due to the COVID-19 pandemic. Optimistically COVID-19 has also thrust research and its importance to our society into the spotlight. From social media to mainstream news outlets, science is in the public domain like never before and public awareness and interest in medical research is at unprecedented levels. The pandemic has also shown the importance of sharing high-quality data in a responsible way to accelerate new treatments. This collaborative and multi-national approach to solving urgent health challenges is the founding concept for this next phase of the International Cancer Genome Consortium- the ARGO Project.

The ICGC comprehensively mapped the structural aberrations of cancer genomes and advanced our understanding of the molecular basis of cancer through delivering 21,000 cancer genomes of primary cancers and 2,600 Whole cancer Genomes through the Pan-Cancer Analysis of Whole genomes project. The ARGO project is the new phase of the ICGC; translating genomic knowledge to improve outcomes for people affected by cancer. ICGC ARGO will analyse specimens from over 100,000 cancer patients with high quality clinical data to address outstanding questions that are vital to our quest to defeat cancer.

This ICGC meeting will bring together more than 350 scientists, clinicians and supporters from 21 countries to discuss and coordinate a range of issues relating to accelerating research in genomic oncology. The two-day program commences with a Plenary session on Friday, May 15, which for the first time we are pleased to share our progress with all members of the scientific, clinical, patient and supporter communities. The second day is an internal workshop session consisting of reporting from research groups and working groups.

I am sure you are all as excited as we are about progress to date, and look forward to working with you all closely in the future.

Yours sincerely,

Andrew Biankin
Executive Director- International Cancer Genome Consortium
University of Glasgow

Image of Seventeen-Arch bridge, Summer Palace, Beijing.
Credit: Jianmin Wu.

WELCOME from host country - China

Dear Delegates of the 17th Scientific workshop and 4th ICGC ARGO Meeting 2021,

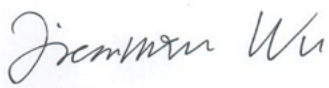
It is with great pleasure that we host the 17th workshop together with ICGC ARGO colleagues.

ICGC is well on track with its new initiative: Accelerating Research in Genomic Oncology and tremendous progress has been made in the last 12 months. ARGO builds on the enormous success of the ICGC's initial 25k project and the subsequent Pan-Cancer Analysis of Whole Genomes project.

Chinese colleagues have been enthusiastic about ICGC since its inauguration, and are leading four ARGO projects with more under development. Thus, to help the broader community better acquaint with the ICGC ARGO initiative, the 1st day plenary session is open for public registration this year.

Whilst current circumstances do not allow us to be together in Beijing this year, we hope you enjoy the updates and we look forward to connecting with our colleagues far and wide again in the very near future.

With best wishes,
Yours Sincerely,



Jianmin Wu, PhD

Head, Center for Cancer Bioinformatics,
Peking University Cancer Hospital & Institute

DAY ONE - PLENARY SESSION INFORMATION FOR ATTENDEES

We will be running the Virtual 17th ICGC Workshop / 4th ARGO Meeting as a webinar via Zoom. To assist your preparation for your participation we are providing information with some key tips for consideration before and during the meeting:

Information for All Attendees

- Our Twitter hashtag for the meeting is #ICGCPlenary21, we encourage you to introduce yourself and your work to the virtual community. Please follow along and share our progress widely.
- Please ensure your laptop is fully charged or has a power supply connected.
- The Zoom webinar is similar to the Zoom meeting facility that we all use however in webinar as an attendee you will not be able to unmute your microphone or share your video, please use the "Chat" function to communicate with the Webinar Facilitator directly if you need assistance. The Chair will not monitor this function so please do not submit questions through here.
- Questions can be submitted through the "Q&A" facility in the webinar, there will be no verbal questions from the floor or discussion sessions. The Chair will monitor the Q&A facility and identify some questions to ask at the end of the presentation. Questions that are not addressed during the webinar will be answered and circulated to all attendees in a FAQ sheet format.
- Presentation slides and supporting documentation will be made available to attendees after the webinar.
- We are encouraging all attendees to live tweet the Preview Meeting through the hashtag #ICGCPlenary21, please respect speakers who advise at the start of their presentation that they do not want their presentation to be tweeted.

Should you have any questions or concerns, please contact secretariat@icgc-argo.org as soon as they arise.

AGENDA

17th ICGC/4th ARGO
Virtual Scientific Workshop

May 14-15, 2021

Hosted in conjunction with
Peking University Cancer Hospital & Institute

Day 1: Friday May 14, 2021	Day 2: Saturday May 15, 2021
05:00-07:30hrs PDT	05:00-07:45hrs PDT
08:00-10:30hrs EDT	08:00-10:45hrs EDT
13:00-15:30hrs BST	13:00-15:45hrs BST
14:00-16:30hrs CEST	14:00-16:45hrs CEST
20:00-22:30hrs CST	20:00-22:45hrs CST
21:00-23:30hrs KST/JST	21:00-23:45hrs KST/JST
22:00-00:30hrs AEST	22:00-00:45hrs AEST

Please note times shown in grid are for Beijing, China (CST), to check your local dial in time please visit www.worldtimebuddy.com

Day 1: Friday 14th May (2 hrs 30 mins) Plenary Session (Open session) Leadership Updates and Keynote Presentations		Chair: Jianmin Wu Peking University Cancer Hospital and Institute, Beijing, China Lead: Genomic and Proteomic Characterisation of Gastric Cancer
20:00-20:05hrs	Welcome, Introduction and Instructions	Andrew Biankin University of Glasgow United Kingdom
20:05-20:35hrs	Update on ICGC-ARGO Progress	Andrew Biankin University of Glasgow United Kingdom
20:35-20:55hrs	Data Management Update	Lincoln Stein Ontario Institute for Cancer Research Canada
20:55-21:15hrs	ARGO Data Coordination Center Update	Christina Yung Ontario Institute for Cancer Research Canada
21:15-21:25hrs	Questions and Panel Discussion	Andrew Biankin Lincoln Stein Christina Yung
21:25-21:45hrs	Plenary Speaker 1 ICGC China Progress	Qimin Zhan Peking University,Beijing China
21:45-22:05hrs	Plenary Speaker: 2 The Patient Perspective on Genomics	Lesley Stephen Patient Advocate, NCRI, METUP UK #BusyLivingWithMets Communications Consultant
22055-22:25hrs	Plenary Speaker: 3 Integrative Profiling of Breast Cancer	Carlos Caldas Cancer Research UK Cambridge Institute, Director of the Cambridge Breast Cancer Research Unit United Kingdom
22:25-22:30hrs	Session Closing comments	Andrew Biankin

Day 2: Saturday 15th May (2 hrs 45 mins) Workshop Session (invitation only) Working Group Report Back		Chair: Olivier Elemento Englander Institute for Precision Medicine Weill Cornell Medicine , USA Lead: Weill Cornell Cancer Precision Medicine Program
20:00-20:10hrs	Welcome, Introduction and Instructions	Andrew Biankin, United Kingdom
20:10-20:25hrs	Patient and Public Involvement and Engagement	Nik Zeps, Australia Mark Lawler, United Kingdom
20:25-20:40hrs	Data Coordination and Management	Lincoln Stein, Canada
20:40-20:55hrs	Ethics, Policy and Governance	Yoon-Jung Chang, South Korea
20:55-21:10hrs	Tissue and Clinical Annotation	Hardeep Nahal-Bose, Canada
21:10-21:25hrs	Pathology	Mark Rubin, Switzerland
21:25-21:40hrs	Independent Advisory Committee Update	Denis Horgan European Alliance for Personalised Medicine, Belgium
Selected Abstracts		
21:40-21:52hrs	Genomic and transcriptomic stratification of EGFR TKI resistance using serial samples in non-small cell lung cancer	Sehhoon Park, Samsung Medical Center, Division of Hematology and oncology, Department of Medicine. Personalised Genomic Characterisation of Korean Lung Cancers Program
21:52-22:04hrs	The Pan Prostate Cancer Group	Colin Cooper / Rosalind Eeles Institute of Cancer Research, United Kingdom Pan Prostate Cancer Group
22:04-22:16hrs	Proteogenomic analysis of early-onset Asian breast cancer	Sun-Young Kong National Cancer Center, Goyang, Korea Korea Rare, Young Age and Drug Resistant Cancer Study
22:16-22:28hrs	CAPTIV-8: A prospective trial of atezolizumab using a multivariate model incorporating whole genome and transcriptome analysis	Emma Titmuss Canada's Michael Smith Genome Sciences Centre BC Cancer Personalised Oncogenomics Program
22:28-22:40hrs	Integrative analyses of 79 genomes of Basal Cell Carcinoma in the context of transcription and methylation profiles	Sergey Nikolaev Gustave Roussy Cancer Campus, Université Paris Saclay, France Non-Melanoma Skin Cancer Genomics Program
22:40-22:45hrs	Session Closing Comments	Andrew Biankin, United Kingdom


Welcome
#ICGC19 @ICGCARGO

KEYNOTE SPEAKER

Qimin Zhan

Qimin Zhan, MD, is currently an Academician of the Chinese Academy of Engineering, President of Peking University Shenzhen Graduate School.

Dr. Zhan is the chairman of National Health Care Project and the chairman of National Biotechnology Development Strategy. He was the Chairman of the National Advisory Board for 863 High-Tech plan in the field of biomedical sciences and is the Chief Scientist of the 973 National Fundamental Program. Dr. Zhan's research interest is focused on the molecular pathways involved in the control of cell cycle checkpoint and apoptosis after DNA damage, and the signaling pathways involved in regulation of the maintenance of genomic stability and tumor metastasis. In recent years, Dr. Zhan has paid great attention to cancer translational research, including molecular diagnosis and personalized therapy. His research has successfully attracted multiple grants from different funding agencies. Dr. Zhan's has published more than 240 peer-reviewed SCI papers. Many of his publications are in prestigious journals, including Nature, Cell, the Journal of Clinical Investigation, and others. To date, they have been cited more than 14,000 times.

KEYNOTE SPEAKER

Lesley Stephen

I was diagnosed de novo with metastatic breast cancer in March 2014. Previously I had been a self-employed communications consultant, living in Edinburgh with my 4 children.

After a rollercoaster first 18 months of treatment when no treatment seemed to work, I got the last place on a Phase 1b clinical trial. That was over 5 years ago, and I am still on it living a good life.

Being so 'well' has enabled me to become a patient advocate, working with organisations including CRUK, Breast Cancer Now, the NCRI, METUP UK and more recently ICGC-ARGO. Given my own very positive experience of research, I am passionate about enabling more patients to access new treatments and clinical trials. In particular I would love to see the 'guesswork' taken out of treating patients with advanced and rare cancers, and to see genomic testing as standard of care to allow patients to be matched to the right targeted drugs in new trials.

KEYNOTE SPEAKER

Carlos Caldas

Carlos Caldas is Professor of Cancer Medicine, University of Cambridge, and Head, Breast Cancer Functional Genomics Laboratory, Cancer Research UK Cambridge Institute. Fellow of the Academy of the Medical Sciences, Fellow of the European Academy of Cancer Sciences, and EMBO Member. He received the 2016 ESMO Hamilton Fairley Award and the 2021 European Society of Human Genetics Award. Published over 400 manuscripts and Web of Science Highly Cited Scientist in 2018, 2019 and 2020.

His laboratory defined the molecular taxonomy of breast cancer, with novel subtypes and their respective drivers [Curtis et al, Nature 2012; Pereira et al, Nature Communications 2016] and distinct clinical trajectories [Rueda et al, Nature 2019], and revealing genomic subtypes shape the tumour microenvironment [Ali et al, Nature Cancer 2020]. miRNA profiling of these tumors uncovered the role of miRNAs as modulators [Dvinge et al, Nature 2013]. He led studies that established ctDNA as a tumour monitoring biomarker in breast cancer [Dawson et al, NEJM 2013] and as a liquid biopsy to unravel therapy resistance [Murtaza et al, Nature 2013; Murtaza el al, Nature Communications 2015]. His laboratory pioneered the use of patient-derived tumor explants as a model system for breast cancer, and pre-clinical pharmacogenomics platform [Bruna et al, Cell 2016; Georgopolou et al, Nature Communications 2021].

Weill Cornell Precision Medicine Program (USA, multiple cancers)

Swiss Oncology and Cancer Immunology Breakthrough Platform (Switzerland, multiple cancers)

Personalized Genomic Characterisatiopn of Korean Lung Cancers (Korea)

Oesophageal Cancer Clinical and Molecular Stratification (UK)

Personalised Breast Cancer Program (United Kingdom)

Korean Multiple Myeloma Precision Medicine Project (Korea)

Pan Prostate Cancer Group (United Kingdom)

Korean Rare Cancers Project (Korea)

Pancreatic Cancer Harmonized "Omics" analysis for Personalized Treatment (Canada)

BC Cancer personalised OncoGenomics Program (Canada, multiple cancers)

Papillary Thyroid Cancer Project (Saudi Arabia)

Chinese Cancer Genome Consortium (China, colorectal cancer)

Mutographs Study (UK, France, multiple cancers)

Precision Panc (UK, pancreatic cancer)

1000 Polyethnic Study (USA, multiple cancers)

European Peripheral T Cell Lymphoma Study (Germany)

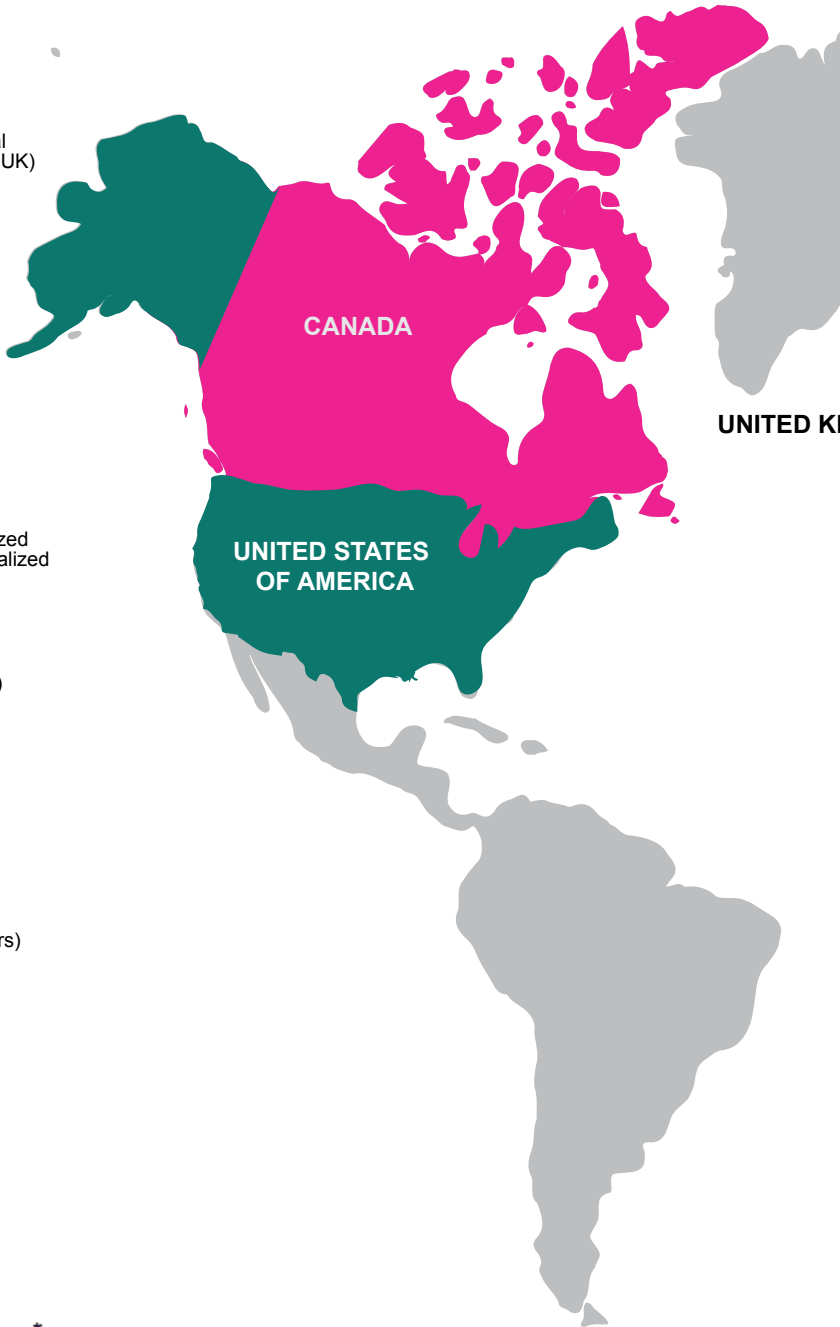
China Diffuse Gastric Cancer Study (China)

Non-Melanoma Skin Cancer Project, (FRANCE)

Oesophageal Squamous Cell Carcinoma Study (China)

Genomic Medicine for Asia Prevalent Cancers (Japan, multiple cancers)

Profiling Orphan Neoplasms for Treatment (Italy, multiple cancers)



Monstar Project (multiple cancers, Japan)

Hong Kong Brain Metastasis Study, Colorectal and Lung Cancers (Chinese University of HK)

OLIGO Clinical Trial, (multiple cancers) University College London (UK)

ARG Accelerating Research in Genomic Oncology

International Cancer Genome Consortium

- Weill Cornell Precision Medicine Program (USA)
- Swiss Oncology and Cancer Immunology Breakthrough Platform (Switzerland)
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- OLIGO Clinical Trial, multiple cancers (UK)
- Non-Melanoma Skin Cancer Project, (FRANCE)
- Monstar Project (multiple cancers, Japan)

- Multiple Cancers
- Lung Cancer
- Oesophageal Cancer
- Breast Cancer
- Multiple Myeloma
- Prostate Cancer
- Rare Cancers
- Pancreatic Cancer
- Colorectal Cancer
- Lymphoma
- Gastric Cancer
- Thyroid Cancer
- Skin Cancer

ARGO Accelerating Research in Genomic Oncology

International Cancer Genome Consortium

ARGO: Accelerating Research in Genomic Oncology

www.icgc-argo.org

We know each cancer is different, yet we treat them the same. Most of the treatments we use don't work, but we don't know ahead of time which will work, and which won't.

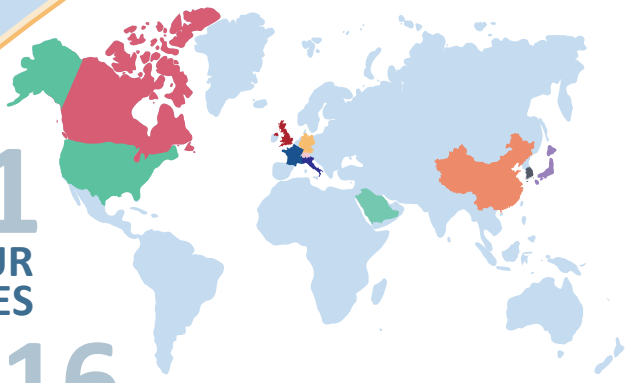
We need to properly address the questions every cancer patient deserves an answer to:

- **What sort of Cancer do I have?**
- **Do I need treatment?**
- **Can I access the treatment?**
- **Which treatment do I choose?**
- **Will the treatment work?**
- **What are the side-effects?**
- **How long have I got?**

Until we have the information, we will never have the knowledge to answer these questions properly and this is why we have ICGC ARGO.

26 PROJECTS

13 COUNTRIES



21 TUMOUR TYPES

63,116 DONORS COMMITTED

(Figures at April 2021)

ICGC ARGO will analyse specimens from 100,000 cancer patients with high quality clinical data to address outstanding questions that are vital to our quest to defeat cancer. Over the next ten years ICGC ARGO aims to deliver a million patient-years of precision oncology knowledge to the world, by making data available to the entire research community in a rapid and responsible way, to accelerate research into the causes and control of cancer.

ICGC ARGO is an international network of cancer clinicians, researchers and clinical trials groups that aims to deliver a million patient-years of precision oncology knowledge to the world. Over the next decade, ICGC ARGO will build datasets of rich, longitudinal clinical data including treatment and response, coupled with genomic and transcriptomic data, initially from clinical trials and from well-annotated cohorts.

The key questions ICGC ARGO aims to address are:

1. How do we use current treatments better?
2. How does a cancer change with time and how does that impact on the way we treat patients?
3. How do we practically implement these approaches in healthcare?
4. How do we advance early detection and ultimately prevent cancer?

The sources of cohorts of patients that would constitute ICGC ARGO projects may include:

- Biospecimens from participants enrolled in active clinical trials;
- Analyses of banked samples from past clinical trials;
- Analyses of samples from clinically well-annotated cohorts that satisfy ICGC ARGO clinical data requirements;
- Longitudinal cohort studies;
- Autopsy studies with detailed clinical data

Clinical data gathered will include information concerning lifestyle, co-morbidity, diagnostics, toxicity, response to therapy and survival. Using this large-scale integrated data, researchers, scientists, policymakers and clinicians will be able to work with patients, health care providers, industry, and others to advance therapeutic development with interventions based on matching the patient's disease molecular subtype with the most effective treatment; develop preventative strategies; markers for early detection of disease; and more specific criteria and methods for diagnosis and prognostication. This knowledge will translate into new approaches to improve outcomes for people affected by cancer.

"...a million patient-years of precision oncology knowledge"

ICGC ARGO members will submit data to one of a series of ARGO regional data processing centres, where it will be subjected to state-of-the-art QC, alignment, variant calling, annotation and clinical harmonization. The harmonized data will merged into a central compute cloud-accessible database of all ARGO results. Clinical and genomic data generated by ICGC ARGO project members will be exclusively available to its membership for a short period of time before being released to the broader research community.

ARGO Accelerating Research in Genomic Oncology
International Cancer Genome Consortium

ICGC ARGO Information Brochure

The ARGO project is a new phase of the International Cancer Genome Consortium. Launched in 2019 after 10 successful years of the ICGC mapping genomic alterations that characterise over 50 cancer types. The time has now come to translate this knowledge to improve outcomes for people affected by cancer.

Over the next decade, ICGC ARGO will build datasets of rich, longitudinal clinical data including treatment and response, coupled with genomic and transcriptomic data, initially from clinical trials and from well-annotated cohorts. Please read more about ICGC ARGO and how to become more involved in our introductory brochure.

ICGC ARGO Patient Brochure

Here at ICGC ARGO we are committed to involving and engaging patients and carers in our work. To progress this we have formed a Patient and Public Involvement and Engagement Working Group (PPIE for short) which has identified priorities, challenges and opportunities surrounding cancer genomics research and treatment. The PPIE WG has been formed to focus on engaging with patients, health professionals and the greater public so as to increase the visibility and accessibility of ICGC ARGO research.

There is one element that connects all stakeholders in the cancer research process- Patients. Patients are the beginning of every story behind the breakthroughs in our understanding of this disease, the new treatments and improvements to health outcomes that come as a result. To facilitate engagement with patients and the public we have developed a series of resources, starting with “Why Study the Genome?”, which outlines what genomics means for cancer patients. These are written by patients, for patients- in easy to understand language. Browse our first resource **Genomics: Getting the Right Treatment to the Right Patient** in the following pages. At our webpage you can learn more about the work of the PPIE and download resources in multiple languages, including Chinese and Korean.

ARGO Accelerating Research in Genomic Oncology

International Cancer Genome Consortium

Genomics:
Getting the right treatment to the right patient

What is genomics?

Genomics is the study of the genome. Your genome (also called your DNA) is the operating manual containing all the instructions that helped you develop from a single cell into the person you are today. Your genome guides your growth, helps your organs to do their jobs, and repairs itself when it becomes damaged. It's unique to you.

Why study the genome?

Many diseases such as cancer occur when the structure of DNA within a cell is damaged or altered. Studying these alterations in the genome could allow researchers to find new treatments for cancer.

What are the benefits?

In the past medical treatments were designed for the average patient. Doctors would give cancer patients treatments, such as chemotherapy, not knowing if they would work for that person or not. We didn't know much about our genome then. As we have learnt more about the genome we have been able to start delivering medicine more precisely, to suit each individual. This is known as precision medicine.

Precision medicine aims to match each patient with the treatment that will work best for them and their genome.

Advances in genome technology are leading to a new understanding of cancer and new ways for diagnosing and treating many types of cancer.

Advances in genome technology mean that analysing a patient's cancer mutations is more affordable and available.

What does this mean for cancer patients?

Research tells us that each patient's cancer is different, yet we have treated them much the same. If we know more about the specific alterations in the genome that led to someone's cancer, then we can look for more specific and effective treatments for their cancer.

We are moving toward treating cancers not by where they are found in the body, but by how their genomes have changed. The more we know about a patient's genome, the more we will understand their cancer and be able to offer them treatments that are more likely to work and improve their survival and quality of life.

A Precision Medicine approach means that drugs traditionally used in one cancer may be evaluated for effectiveness in another cancer if they share similar genomic changes.

What is ICGC-ARGO?

ICGC-ARGO is the International Cancer Genome Consortium - Accelerating Research in Genomic Oncology.

ICGC ARGO

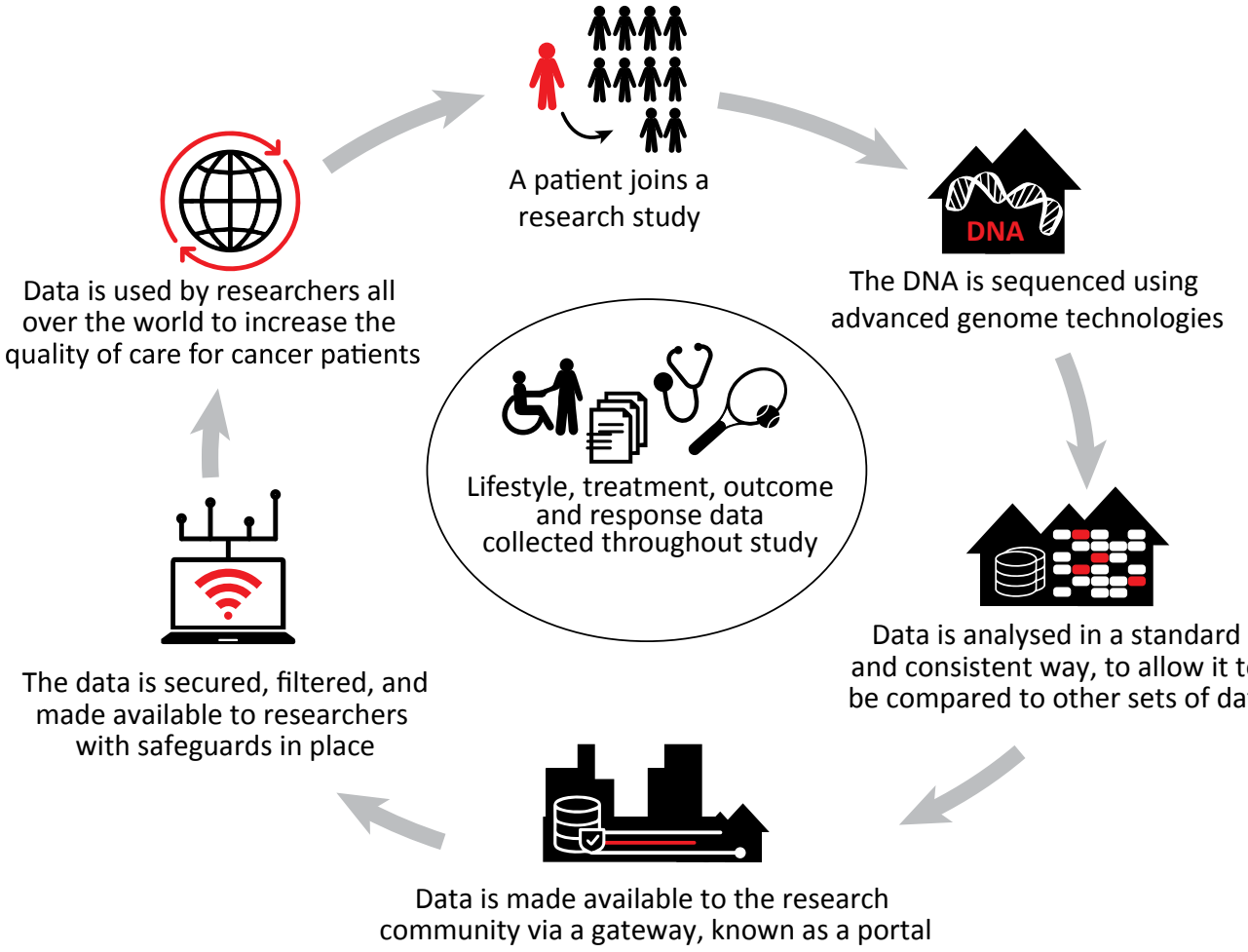
The ICGC was originally established in 2007 to coordinate a large number of international genomic research projects. Since then it has enabled over 25,000 patients' genomes data sets to be made available to the research community resulting in significant advances in our understanding of cancer and how to treat it.

ICGC-ARGO is the new phase of the ICGC, and it builds on the previous project by including more clinical information about a patients' cancer. Researchers and patients from 13 countries are already participating.

By bringing experts together we hope to accelerate research into cancer genomes, so that patients can realise the benefits of research much faster.



What is the process?



We plan to use this shared knowledge to improve outcomes for people affected by cancer.

How can I help?

As more patients enrol in genomic research studies, the more information on different kinds of cancer genomes we can learn from. By taking part in a genomic research study, you are helping us answer questions such as:

- **How do we improve early detection and ideally prevent cancer?**
- **Does a cancer change with time and treatment?**
- **Can we use current treatments better?**

Why is data sharing important?

Working in isolation slows down the research process. Our guiding principle is to share data and information collected in order to speed up scientific findings. This brings cost savings, quicker patient benefit and better treatments.

All personal identifying information is replaced with a code. Coded information is then only shared with safeguards in place to protect your privacy. The more information we share, the faster we learn, and the faster treatments can be tailored and made available to patients.

For more information about ICGC-ARGO and how you can get involved visit our website - https://www.icgc-argo.org.

PLENARY SESSION ATTENDEE LIST

First Name	Last Name	Organization	Country/Region Name
Jean	Abraham	University of Cambridge	United Kingdom
Hiroyuki	Aburatani	The University of Tokyo	Japan
Khawla	Alkuraya	King Faisal Specialist Hospital and Research Centre	Saudi Arabia
Sultan	Alsedairy	King Faisal Specialist Hospital and Research Centre	Saudi Arabia
Fatima	Al-Shahrour	Spanish National Cancer Research Centre (CNIO)	Spain
Cathy	Axford	Self	Australia
Philip	Beer	Glasgow Precision Oncology Laboratory	United Kingdom
Andrej	Benjak	University of Bern	Switzerland
Elsa	Bernard	MSKCC	United States
Andrew	Biankin	University of Glasgow	United Kingdom
Ana	Bonilha	McGill University / ICGC DACO	Canada
Ximena	Bonilla	ETHZ	Switzerland
Ayelet	Borgida	University Health Network, Toronto, ON	Canada
Stephen	Botelho	Foundation Medicine	United States
Ben	Bray	IQVIA	United States
Paul	Brennan	IARC	France
John	Bridgewater	UCL	United Kingdom
Robert	Bristow	University of Manchester	United Kingdom
Alicia L.	Bruzos	Universidade de Santiago de Compostela	Spain
Ivo	Buchhalter	German Cancer Research Center (DKFZ)	Germany
Du	Cai	The Sixth Affiliated Hospital of Sun Yat-sen University	China
Carlos	Caldas	Cancer Research UK Cambridge Institute	United Kingdom
Qi	Cao	PKU	China
Raffaella	Casolino	University of Verona	Italy
Danny	Chan	CUHK Otto Wong Brain Tumour Centre	Hong Kong SAR
Ting Fung	Chan	The Chinese University of Hong Kong	Hong Kong SAR
YOONJUNG	CHANG	National Cancer Center	Korea, Republic of
David	Chang	University of Glasgow	United Kingdom
Lorraine	Chantrill	Illawarra Shoalhaven Local Health District (ISLHD)	Australia
Jh	Cheng	PKU	China
Yoon	Choi	Samsung Medical Center	Korea, Republic of
Yuna	Choi	Samsung Medical Center	Korea, Republic of
Wonyoung	Choi	National Cancer Center	Korea, Republic of
Gianmarco	Contino	University of Birmingham	United Kingdom
Colin	Cooper	University of East Anglia	United Kingdom
Ian	Cree	International Agency for Research on Cancer	France
HUI	DAI	北京大学	China
Ana Carolina	de Carvalho Peters	IARC	France
Carlo	De Guzman	DDVMH	Philippines
Francisco	De La Vega	Tempus Labs	United States

PLENARY SESSION ATTENDEE LIST (Continued)

First Name	Last Name	Organization	Country/Region Name
Rob	Denroche	Ontario Institute for Cancer Research	Canada
Ginny	Devonshire	University of Cambridge	United Kingdom
Judith	Dixon-Hughes	University of Glasgow	United Kingdom
Anna	Dodd	UHN	Canada
Wei	Dong	BGI	China
Rosalind	Eeles	Institute of Cancer Research	United Kingdom
Olivier	Elemento	Weill Cornell Medicine	United States
Hillary	Elrick	EMBL-EBI	United Kingdom
Lisa	Evers	Macherey-Nagel	United States
Miriam	Ferreiro Pantin	Universidad De A Coruña	Spain
Alvaro	Ferriz	Barcelona Supercomputing Center	Spain
Fieke	Froeling	University of Glasgow	United Kingdom
Takao	Fujisawa	国立がん研究センター東病院	Japan
Ricarda	Gaentzsch	IQVIA	United Kingdom
Yingzhen	Gao	山西医科大学	China
Gad	Getz	Broad Institute of Harvard and MIT	United States
Hamid	Ghaedi	Queens University	Canada
Gonzalo	Gómez	CNIO	Spain
Wei	Gong	Peking University Cancer Hospital & Institute	China
Anna	Gonzalez Neira	CNIO	Spain
Shiwei	Guo	Changhai hospital	China
Jacqueline	Hall	IQVIA	United Kingdom
Alhafidz	Hamdan	CRUK Edinburgh	United Kingdom
Lindsay	Hayman	OICR	Canada
Yourae	Hong	Sungkyunkwan University	Korea, Republic of
Dongwan	Hong	Catholic University of Korea, College of Medicine	Korea, Republic of
Will	Hooper	New York Genome Center	United States
Taobo	Hu	Peking University	China
Michael	Hummel	Charité University Hospital Berlin	Germany
Mahesh	Iddawela	Monash University	Australia
Mai	Itagaki	National Cancer Center Hospital East	United States
Gun Ho	Jang	Ontario Institute for Cancer Research	Canada
Amber	Johns	Garvan Institute of Medical Research	Australia
Andre	Kahles	ETH Zurich	Switzerland
Zhang	Kai	北京肿瘤医院	China
Kazuto	Kato	Osaka University Medical School	United States
Najeeb	Khan	Institute of Biotechnology and Genetic Engineering	Pakistan
Min Kyeong	Kim	National Cancer Center	Korea, Republic of
YENA	KIM	National Cancer Center	Korea, Republic of
Hyunjin	Kim	국립암센터	Korea, Republic of
Tae-Min	Kim	College of Medicine, The Catholic University of Korea	Korea, Republic of

PLENARY SESSION ATTENDEE LIST (Continued)

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Takeshi	Kuwata	NCCHE	Japan
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Se-Hoon	Lee	Samsung Medical Center	Korea, Republic of
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PLENARY SESSION ATTENDEE LIST (Continued)

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PLENARY SESSION ATTENDEE LIST (Continued)

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PLENARY SESSION ATTENDEE LIST (Continued)

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Yang	Zhang	Peking University Cancer Hospital	China
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Binbin	Zou	SXMU	China
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