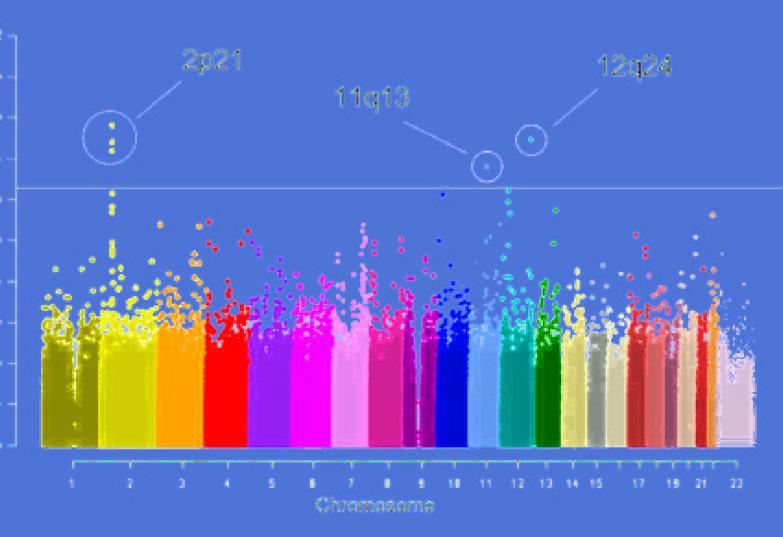
Section of Genetics

Section head Dr Paul Brennan IDENTIFYING SPECIFIC GENES AND GENE VARIANTS THAT CONTRIBUTE TO THE DEVELOPMENT OF CANCER WILL OFFER A GREATER UNDERSTANDING OF BIOLOGICAL PATHWAYS THAT LEAD TO CANCER, HELP ELUCIDATE HOW ENVIRONMENTAL FACTORS MAY EXERT THEIR EFFECTS IN COMBINATION WITH GENES, AND AID IN IDENTIFYING INDIVIDUALS WHO ARE AT HIGH ENOUGH RISK TO BENEFIT FROM EXISTING RISK REDUCTION STRATEGIES. THE SECTION OF GENETICS (GEN) COMPRISES THE GENETIC EPIDEMIOLOGY GROUP (GEP), THE GENETIC CANCER SUSCEPTIBILITY GROUP (GCS) AND THE BIOSTATISTICS GROUP (BST), ALL WITH THE OVERALL MISSION OF IDENTIFYING GENES INVOLVED IN CANCER, CHARACTERIZING THE SPECTRUM OF PATHOGENIC SEQUENCE VARIANTS THAT THEY HARBOR, AND UNDERSTANDING HOW THEY INTERACT WITH NON-GENETIC FACTORS.

GEN projects usually involve extensive field work in collaboration with external investigators, SO that large-scale epidemiological studies with appropriate clinical and biosample collections can be developed. The primary interest of GEN is the analysis and identification of common genetic susceptibility variants and their interaction with non-genetic risk factors. Genetic analysis comprises either candidate gene type studies (conducted in-house) or genome-wide association studies (GWAS) (currently conducted in collaboration with outside partners, although now also feasible inhouse). GEP studies also assess nongenetic exposures, partly in recognition of the importance of non-genetic factors in driving cancer incidence, and also in order to facilitate accurate assessment of gene-environment interactions By contrast, GCS has a focus on identification of uncommon or rare genetic variants that may have a larger effect than common single nucleotide polymorphisms (SNPs), but that are not sufficiently frequent to be captured

by current GWAS genotyping arrays. Such DNA variants are identifiable through а case-control mutation screening approach. To this end, GCS has developed an in silico-driven strategy to stratify variants according to their probability of being pathogenic. Thus, the GCS research programme complements that of GEP, and also provides a facility for bioinformatics prediction on functionality of genetic variants, as well as a capacity to conduct in vitro experiments to validate functional hypotheses on variants of interest that are identified in both groups. In parallel to its own research activities, GCS also maintains and develops the genetic services platform (GSP) and related Laboratory Information Management System (LIMS) to support GEN largescale molecular epidemiology projects and other IARC genomics projects. BST interacts at all stages to provide overall statistical support.



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Dr David Conway (until August 2011) Dr Vinotsole Khamo (until October 2010) Professor John McLaughlin (until October 2011) The overall goal of the Genetic Epidemiology Group (GEP) is to identify genetic susceptibility variants of various cancer sites and study their interaction with environmental factors. An additional aim is to develop accurate risk prediction models that take both demographic information (e.g. age and sex) and biomarkers (genetic and non-genetic) into account. GEP focuses specifically on cancers related to tobacco and alcohol consumption, as well as rare cancers (e.g. nasopharyngeal cancer (NPC)). Many activities typically involve field work in order to recruit large numbers of cases and controls that have extensive questionnaire information and biological samples. For young onset cancers (such as NPC and childhood cancers) a trio design is also employed. Genetic analyses usually include a genomewide approach initially, with subsequent coordinated large-scale replication studies in diverse populations. The latter is achieved by the development of international consortia in which GEP takes a leading role. Confirmed susceptibility loci are investigated in more detail with a variety of techniques, including in silico, expression and sequencing studies, often conducted in collaboration with other IARC groups. In addition to studies of genetic factors, GEP is conducting a wide range of investigations involving non-genetic factors. including evaluations of circulating biomarkers, such as human papillomavirus (HPV) antibodies, for head and neck cancers; cotinine for lung cancer; and dietary biomarkers for multiple cancers. GEP also performs extensive evaluations of questionnaire data, particularly data that have been collected during field work.

GENETIC SUSCEPTIBILITY OF RENAL CELL CARCINOMA

The primary GWAS conducted in 2010-2011 was a joint collaboration between IARC and the Centre National de Génotypage (CNG) and focused on renal cell carcinoma (RCC). Based on a series of studies, including a large case-control study from central Europe coordinated by GEP scientists (1400 cases and 2500 controls), the European Prospective Investigation into Cancer and Nutrition (EPIC) cohort study (300 cases and 400 controls), and an additional three

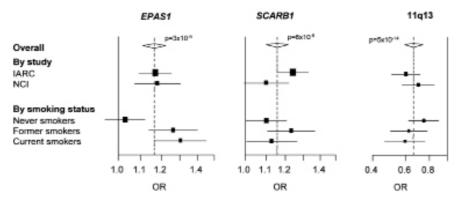


Figure 1. Forest plot shows odds ratios (OR) for three SNPs that were identified as susceptibility variants of renal cell carcinoma, overall and stratified by study and smoking status.

studies, the final dataset comprised approximately 2500 cases and 5000 controls. This data was combined with a parallel study coordinated by scientists at the US National Cancer Institute (NCI) (principally Stephen Chanock and Nat Rothman) with approximately 1300 cases and 3400 controls. A combined dataset of approximately 3800 cases and 7400 controls using standardized quality control thresholds and common variable definitions was developed, with coordinated analysis at both IARC and NCI. Further IARC samples for replication, which included 3000 cases and 5000 controls, were also incorporated. This study has resulted in the identification of three novel susceptibility loci for RCC, one of which, EPAS1 on 2p21, encodes hypoxia-inducible- factor-2 alpha, a transcription factor previously implicated in RCC development (Purdue et al., 2011). This finding was notable in former and current smokers but not in non-smokers, suggesting an interaction with smoking (P heterogeneity = 0.004) (Figure 1). This observation raises the possibility that the effect of EPAS1 is dependent on tobacco smoking.

GENETIC SUSCEPTIBILITY FOR TOBACCO AND ALCOHOL RELATED CANCERS

In 2010, we completed a GWAS of head and neck cancers, again in collaboration with the CNG. This involved an initial genome-wide analysis of over 2000 cases and a combined group of 8000 controls from IARC studies. Replication of 20 variants was conducted in a series of 13 independent studies participating in the International Head and Neck Cancer Epidemiology (INHANCE) consortium. Initial results further confirmed evidence for an important role of *ADH* genes in these cancers, as well as evidence for two additional susceptibility loci in regions 4p21 and 12q24 (McKay *et al.*, 2011)

Genetic susceptibility to lymphomas

GEP is additionally investigating genetic susceptibility to lymphomas. Within our ongoing collaboration with the CNG, GEP is performing a GWAS of 1200 Hodgkin's lymphoma case-control pairs from eight European countries. Genome-wide genotyping and initial statistical analysis has been completed and multiple independent variants across 6p21 have been identified, two of which were specific for EBV status. An additional novel locus located within the IL13 gene was also identified, suggesting common genetic pathways with other immune-related phenotypes (Urayama et al., in press)

LUNG CANCER AND NON-GENETIC RISK FACTORS

Numerous studies have reported that fruits and vegetables are protective against lung cancer, and that the one-carbon metabolism pathway (i.e. folate pathway) has been suggested as a mechanism responsible for this protective effect. In order to investigate this hypothesis we analysed serum samples from 900 cases of lung cancer and 1800 matched controls that were collected prospectively within the EPIC cohort of 500 000 European subjects. Serum samples for all subjects, taken on average five years prior to diagnosis among the cases, were analysed for four B vitamins (B2, B6, folate and B12), methionine and homocysteine. After accounting for smoking, a substantial lower risk for lung cancer was seen for

elevated serum levels of B6, as well as for serum methionine. These associations were of sufficient statistical strength to exclude chance as explanation. Similar and consistent decreases in risk were observed in never, former and current smokers, indicating that results were not due to confounding by smoking. A lower risk was also seen for serum folate, although this was only apparent in former and current smokers. When participants were classified by median levels of serum methionine and B6, subjects with above median levels of both had an almost 60% lower lung cancer risk overall. Cumulative lung cancer risk calculations by smoking status and stratified by B6 and methionine levels, indicated important differences in risk associated with having above or below median levels of both vitamin B6 and methionine (Figure 2).

INTERNATIONAL STUDY OF RARE CHILDHOOD EMBRYONAL TUMOURS

Following a meeting held in IARC in 2006 of investigators with an interest in childhood cancers, a large-scale etiological study of rare childhood cancers was piloted in eight countries in 2008-2010 (France, UK, Canada, Australia, Canada, USA, Serbia, Macedonia and Czech Republic). A case-control trio design has been shown to be feasible in all countries participating in the pilot, and five additional countries (Brazil, Japan, India, the Netherlands and El Salvador) may start piloting the protocol in 2011. The aim of the International Study of Rare Childhood Embryonal Tumours (ISET) is to investigate the role of exposure to suspected factors at different key periods at the beginning of life (preconceptional, prenatal and postnatal), as well as genetic susceptibility factors, geneenvironment interactions and novel molecular markers. Focusing on Wilms tumour and neuroblastoma, already more than 250 case trios and 1750 unrelated controls have been recruited, with approximately 650 and 450 case trios expected each year, respectively. The full scale study will expand to retinoblastoma, rhabdomyosarcoma and hepatoblastoma.

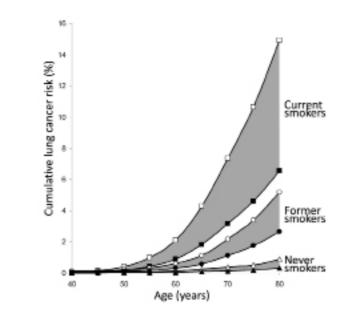


Figure 2. Cumulative risks of lung cancer up to age 79 among never, former and current smokers, stratified for men, and for having above (high/high) and below (low/low) median levels of both vitamin B6 and methionine, respectively.

Priorities for 2012-2013

Genetics and genomics of renal cell carcinoma

GEP will continue to have a central role in the CAGEKID study, which is funded by the European Commission to conduct whole genome sequencing on tumour/non-tumour DNA pairs from at least 100 individuals with kidney cancer. On completion of sequencing, we will join other CAGEKID partners in a comprehensive evaluation of the germline and somatic variation that contributes to risk of RCC. This will be complemented by an examination of gene expression and epigenetic changes. GEP will ensure the availability of at least 100 RCC cases that correspond to the International Cancer Genome Consortium's criteria for full participation in the CAGEKID study, comprising whole genome sequencing and expression analysis of tumour/non-tumour pairs. Further, and in collaboration with colleagues at NCI, we will expand our GWAS of RCC to approximately 8000 cases and 16 000 controls. Funds for this expanded analysis have been provided by NCI.

LUNG CANCER GENETICS

Genome-wide data is available on over 15 000 lung cancer cases and 25 000 controls from eight different study groups (with IARC studies contributing about 25% of data). Initial meta-analysis of the majority of these studies has not identified any additional susceptibility loci beyond the three previously reported (5p15, 6p21 and 15q25), although limited subgroup analyses from individual studies has detected heterogeneity of effects for all three loci (by histology for 5p15, by smoking status for 15g25, and by geographic region for 6p21). It is therefore reasonable to expect that a coordinated analysis by subgroup may identify additional susceptibility loci in addition to those previously detected. In collaboration with others, we will carry out a stratified meta-analysis of all studies with a particular focus on identifying subgroup effects by histology, smoking status, family history, age, sex and stage of disease.

HEAD AND NECK CANCERS AND HUMAN PAPILLOMAVIRUS

Further analyses of the role of human papillomavirus (HPV) in head and neck cancers, and potential genetic modifiers, will include a coordinated analysis of the presence of HPV antibodies in prediagnostic blood samples within the EPIC cohort, with this being potentially expanded to other cohorts through the cohort consortium. This initiative is being led by GEP scientists along with scientists at NCI (Dr A Kraemer in the Division of Cancer Epidemiology and Genetics). We will also evaluate the strong geographic differences in HPV prevalence in head and neck cancers by coordinating an analysis of HPV in a large series of samples from Europe, the US and Brazil.

A COMPREHENSIVE EVALUATION OF THE ONE-CARBON METABOLISM PATHWAY IN TOBACCO-RELATED CANCERS

We plan to further evaluate the associations of B vitamins with lung cancer risk and risk prediction by initiating a consortium of prospective cohort studies within different populations from Europe, the US, Australia and Asia. The overall aims are to identify the consistency of these associations in different populations, the extent to which they are modified by measurement errors and day-to-day variations in vitamin status, and determine whether analyses of genes found to be associated with these biomarkers provide evidence of causality. In addition, we will assess the potential of using circulating biomarkers in lung cancer risk prediction models. These goals will be achieved by developing a Lung Cancer Cohort Consortium which will include biochemical analysis of at least 5000 lung cancer cases and comparable controls selected from over 20 participating cohorts, with equal proportions of never, former and current smokers. Funds to develop this consortium and to perform these analyses have been provided by the National Cancer Institute of the United States.

We will also extend this analysis to other types of cancer related to tobacco in order to test whether these associations are specific to lung cancer. Our immediate aim is to examine the role of B vitamins in head and neck cancers and RCC. This will initially be assessed within the EPIC cohort (approximately 500 case-control pairs for each cancer type) and may be extended to the cohort consortium based on initial results. These analyses within EPIC will be coordinated with our ongoing GWAS for both cancer types, thereby resulting in a large series of subjects with both genome-wide data and B vitamin measurements. Funds for this analysis have been provided by the World Cancer Research Fund.

GENETIC EPIDEMIOLOGY OF NASOPHARYNGEAL CANCER

In the short-term, we plan to complete the biorepository of 2000 nasopharyngeal cancer (NPC) cases and controls from the ongoing studies in Singapore, Thailand and Malaysia. Subsequently, we will initiate the evaluation of susceptibility loci that have been identified in Chinese GWAS in order to determine their repeatability in other Asian populations.

LARGE POPULATION COHORTS

GEP will continue to coordinate two large population cohorts that were initiated by GEP and other non-IARC scientists. These include a prospective cohort of 200 000 adults from three cities of Siberia Russia (being conducted with the Cancer Research Centre, Moscow; and the Clinical Trials Services Unit, Oxford, UK). Analysis will focus on the role of alcohol on all causes of mortality. Also being investigated is the Golestan Cohort study of 50 000 individuals from Northeastern Iran, being conducted with colleagues from Tehran and NCI. GEP's analysis will focus on the effects of opium, obesity and hypertension on all causes and cause-specific mortality.

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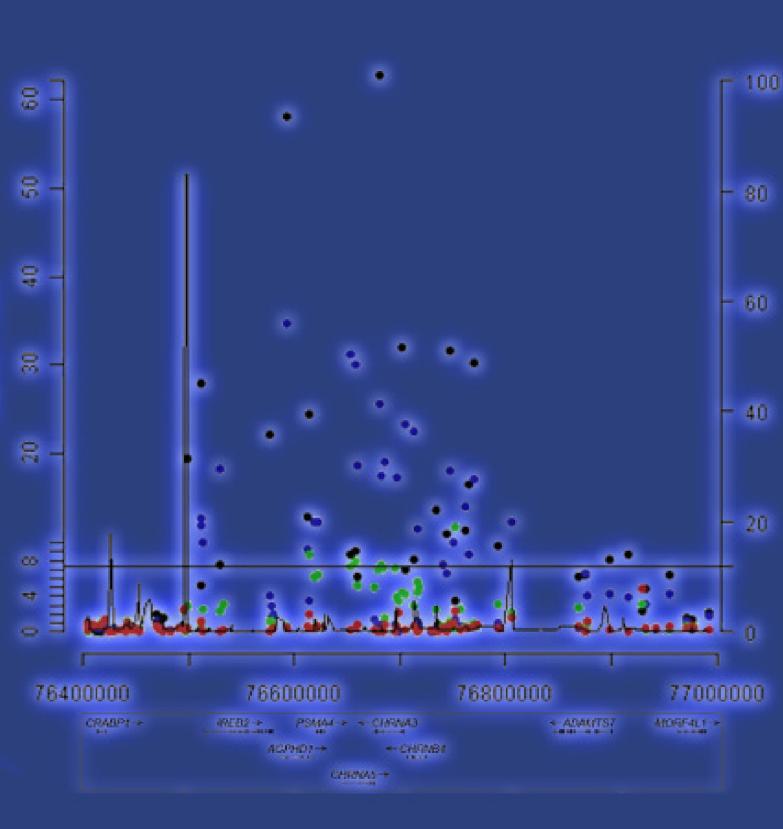
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GENETIC CANCER SUSCEPTIBILITY GROUP (GCS)

Group head

Dr James McKay (from September 2010)

Scientists

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Ms Manon Delahaye Ms Aurélie Fillon (until July 2010) Ms Célia Jolivet (until June 2011) Ms Bin Thieu Tù Nguyen-Dumont (until December 2010) Mr Wee Loon Ong (until August 2010) Ms Fanny Paquet Ms Maroulio Pertesi (until December 2010) Mr Maxime Vallée The focus of the Genetic Cancer Susceptibility Group (GCS) is to investigate the contribution of inherited genetic factors to the etiology of cancer. An integrative approach is used, applying a variety of genomics-based techniques, including genotyping, mutation screening and expression studies, coupled with bioinformatics analysis, to both familyand case-control-based study designs. Of particular interest is the contribution of variants with a relatively rare population frequency, although we remain involved with studies of common SNPs through our collaboration with GEP. GCS also maintains and develops the Genetic Services Platform (GSP) and related Laboratory Information Management System (LIMS) to support genomicsbased projects within the GEN section. as well as other IARC genomics groups.

INVESTIGATION OF COMMON AND RARE GENETIC VARIANTS IN BREAST CANCER SUSCEPTIBILITY GENES

GCS aims to measure the genetic risk attributable to the different types of genetic variation in breast cancer. These projects integrate data from case-control genotyping. case-control mutation screening, bioinformatics and allelic imbalance expression studies to identify dysfunctional variants responsible for cancer susceptibility, with a focus on breast cancer susceptibility genes and the characterization of new moderate- to high-risk susceptibility alleles.

Bioinformatics tools can quantify the functional consequence of the variants in silico using the degree of evolutionary conservation observed at this site. We have applied our case-control mutation screening approach to the breast cancer susceptibility genes ATM (Tavtigian et al., 2008) and CHEK2 (Le Calvez et al., 2011) to demonstrate the efficiency of ranking rare missense substitutions using in silico programs before comparing the distribution and frequencies of the different types of variants in a series of earlyonset breast cancer cases and controls. Although loss-of-function mutations in ATM and CHEK2 have been associated with intermediate-risk of breast cancer, our strategy allowed us to demonstrate that a subset of rare missense substitutions make a comparable contribution to disease susceptibility.

DIFFERENTIAL ALLELIC EXPRESSION IN CHEK2 ALLELES

Differential allelic expression (DAE) occurs when two alleles of a particular gene are expressed unequally. DAE can result in guite major expression level differences between alleles, for example when a truncating mutation results in nonsense mediated mRNA decay or when more subtle differences in allele expression levels are due to a sequence variant in a regulatory element. Our initial DAE assay, based on highresolution melting curve analysis and probes designed for a genetic marker located in the target gene's mRNA, has demonstrated DAE in lymphoblastoid cell line mRNA in heterozygote carriers of the c.1100delC truncating mutation in the CHEK2 cancer susceptibility gene (Nguyen-Dumont et al., 2010). We are now developing potentially more sensitive and higher throughput DAE tests by taking advantage of possibilities offered by the massive parallel technologies.

In collaboration with GEP, GCS has additionally provided genetic and analytical expertise for the completion of multiple genome-wide association studies (GWAS), notably, HNSCC (McKay et al., 2011) and kidney cancers (Purdue et al., 2011). We are actively pursuing GWAS of Hodgkin's lymphoma and cancers of the oral cavity. The Genetic Services Platform in GCS additionally plays an important role in GWAS by performing genotyping to quickly replicate and validate findings.

THE GENETIC SERVICES PLATFORM

Nested within the GCS, the Genetic Services Platform (GSP) aims to implement cutting edge genomics techniques and make them available to all IARC groups, along with relevant and technical expertise support. Genomics applications are piloted prior to implementation to ensure their suitability to IARC's large populationbased studies. In 2010-2011, the GSP undertook eight pilot and 14 collaborative research projects using the set up platforms in collaboration with GEP, MOC, EGE, PAT, ICB and RAD.

In parallel, GSP has worked closely with ITS and MOC to develop a Sample Management System for IARC biobank to allow the efficient handling of the increasing number of biological samples hosted at IARC (Voegele et al., 2010).

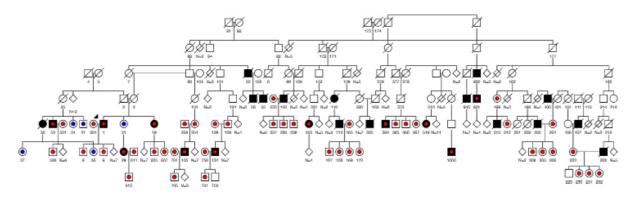
During 2011, the GSP also installed next generation sequencing (NGS) technology at IARC. A Life technologies 5500xl SOLiD next generation sequencer and a medium capacity Ion-Torrent personal genome machine have been installed and the associated workflows are currently being implemented under the umbrella of the GCS LIMS. We are now piloting a variety of NGS applications (particularly exome resequencing, RNAseg and methylation-related sequencing) with IARC scientists and technical staff. We have put in place a high-performance computing cluster and relevant software to enable analysis of large quantities of data produced by a NGS platform, as well as its long-term storage and backup. GCS bioinformaticians are developing bioinformatic workflows for the analysis of NGS data.

PROJECTS FROM 2012-2013

Over the next few years, GCS will apply NGS to our projects. We will remain focused on describing genetic susceptibility, but we will also endeavor to use knowledge from the somatic events occurring during tumorigenesis, assayed using NGS and other genomicsbased techniques, to inform our analysis of the germline events.

GENETIC SUSCEPTIBILITY TO NASOPHARYNGEAL CARCINOMA

Isolated populations offer rare opportunities to investigate the genetic cause of human disease. We have identified one exceptionally large multiplex pedigree from the Bidayuh population where the incidence of nasopharyngeal carcinoma (NPC) is one of the highest in the world. Blood samples have been collected for 11 of the 26 NPC patients in this pedigree. We will use exome DNA sequencing to conduct a comprehensive genetic analysis to identify potential genes segregating in this pedigree. Through our collaboration with Dr Allan Hildesheim of the Division of Cancer Epidemiology and Genetics at NCI, who is conducting parallel efforts in Taiwanese NPC pedigrees, and further



Large extended Bidayuh pedigree from Sarawak, Borneo, Malaysia. Red dots indicate where blood samples have been collected

study in additional NPC patients at IARC, we will compare, contrast and cross validate results from this large pedigree.

Investigation of the Knudson's twohit model in tumorigenesis

Many tumours resulting from a hereditary predisposition under Knudson's 'twohit' genetic model contain one inherited mutant allele and the remaining allele is mutated somatically during tumorigenesis. The co-occurrence of germline and somatic mutations in the same gene in a given individual is a relatively rare event by chance alone. The observation of only a few dual mutation events will be sufficient to pinpoint a gene as noteworthy. We intend to perform whole exome sequencing of both the normal and tumour material of lung cancer patients with a positive family history, and use this data to identify genes acting along the lines of the two-hit model. Noteworthy genes can then be further investigated in broader/ larger case-control studies to validate and further explore significant findings.

INVESTIGATION OF COMMON AND RARE GENETIC VARIANTS IN MELANOMA SUSCEPTIBILITY GENES

Malignant melanoma is a rare tumour of melanocytes that, because of its aggressive nature, causes the majority of deaths related to skin cancer. The objective of this study is to identify new melanoma susceptibility genes and the characterization of the pathogenic sequence variants associated with increased risk of developing melanoma. We have set up a large-scale casecontrol mutation screening study nested in the EPIC cohort. Also in collaboration with Dr Françoise Clavel-Chapelon's group (INSERM U1018, Villejuif, France), we are investigating the relationship between genetic factors, pigmentary phenotype (sun exposure) and risk of cutaneous malignant melanoma (CMM) in the E3N prospective cohort. Results emerging from the association study in this cohort will complement findings from the case-control mutation screening study in EPIC, where dysfunctional variants will be sought in genes of the same pathways (pigmentation, nevi development).

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BIOSTATISTICS GROUP (BST)

Group head Dr Graham Byrnes

Secretary Ms Yvette Granjard

Students Ms Amandine Coquillat (until July 2010) Ms Sally Hinchcliffe (until April 2010) Ms Marie Paturel (until July 2011)

Visiting scientist Professor Nanny Wermuth After moving to GEN in 2010, the Biostatistics Group (BST) has increased collaborations with the other GEN groups, while maintaining former collaborations and cross-agency activities. In particular, BST is responsible for the training and development of IARC's statistical personnel located in the various sections.

IN SILICO FUNCTIONAL CLASSIFICATION

BST continues to collaborate with GCS on in silico functional classification which has taken on new directions with the advent of next generation sequencing (NGS). While the now traditional genome-wide association studies (GWAS) have been successful in identifying many genetic features which predispose to various cancers, they have small individual effects and jointly explain only a small part of the familial clustering of all common cancers. It is possible that many of the remaining genetic variants are individually very rare, but occur in such variety that together they explain an important fraction of the heredity of cancer. Moreover, since the effects of individual variants are greater, they are more likely to provide insight into mechanisms of oncogenesis. However, their individual rarity precludes the use of standard genetic epidemiological techniques. It is necessary to first use other evidence, such as evolutionary variability between species, to classify these variants into categories of possibly similar effect. These categories can then reach population frequencies that allow them to be investigated by standard epidemiological methods. This approach has helped identify the importance of missense mutations in several genes for predicting the risk of breast cancer (Le Calvez-Kelm et al., 2011; Southey et al., 2010).

This project has two facets: supporting the adaptation of previously developed tools (AlignGVGD) to study the genetics of melanoma (with Dr Fabienne Lesueur); and investigating methods better adapted to high-throughput data generated by NGS.

OMICS INTEGRATION

Two key reasons BST moved to NGS are because of the extremely large number of genetic variables investigated (potentially

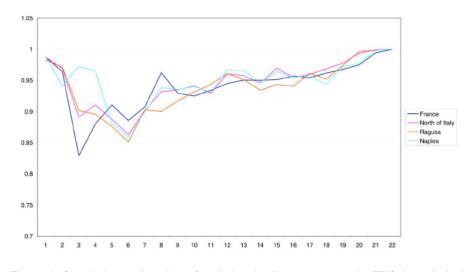


Figure 1. Cumulative explanation of variation in dietary patterns in EPIC by principal components, according to centre of recruitment

every element of the genome), and the ability to obtain several complementary types of data (i.e. germline genotype, tissue genotype, tissue-specific RNA expression and high-density methylation data). The number of measured variables makes traditional case-control comparisons impractical because of the need for multiple comparisons correction. However, the variety of data types creates the possibility of novel approaches, such as using tissue-specific expression to localize areas of the genome likely to be active in that tissue, then examining these areas for GWAS.

Another option is the comparison of genomic and somatic modification. BST is collaborating with Dr James McKay to develop the statistical methodology to use matched comparisons within individuals to identify regions showing modification in both tumour and germline DNA, as would be expected under Knudson's two-hit hypothesis.

$General \ {\rm Biostatistics} \ {\rm Support}$

А common feature of most epidemiological research is that exposure data is approximate. This applies to questionnaires, self-reported smoking behaviour, estimated radiation exposures and imputed genotypes. In all cases, incorporating these noisy data into conventional regression analyses can result in biased estimates and inappropriate inferences. Hence, a core methodological interest is the development. evaluation and use of methods such as Markov Chain

maximum likelihood and regression calibration. This underpins continued collaborations with the ENV, as well as within GEN (Timofeeva *et al.*, 2011).

BST also provides guidance on the use of traditional biostatistical tools, both within IARC and in outside collaborations (Hery *et al.*, 2010; Burgess *et al.*, 2011)

STATISTICAL EDUCATION AND TRAINING

IARC has adopted a model of disseminated statistical support by dispersing individuals with differing levels of statistical training among the various sections. Encouraging development and sharing of statistical skills is therefore one of the responsibilities of BST.

Training is carried out through BST with the largest block of teaching taking place within the Introduction to Epidemiology Summer School. This course was also repeated in 2010 for IARC staff unable to attend as part of the Summer School and it was fully subscribed. In 2011, BST facilitated a course on the use of the statistical package R in epidemiology (coordinated by Dr Martyn Plummer, INF). Further courses and a seminar series are under development.

In addition, BST funding has been used to provide support for IARC staff to attend meetings specific to statistical methodology and to bring senior statisticians for short visits to give seminars and otherwise discuss advanced methodologies. Visitors in 2011 included Prof Per Kragh Andersen from the University of Copenhagen and Dr Frank Dudbridge from the London School of Hygiene and Tropical Medicine. Other visits are planned and BST will host Prof Nanny Wermuth, a distinguished statistician, as a Senior Visiting Scientist in 2011-2012.

Priorities for 2012-13

Over the next two years, BST will continue the development and evaluation of methodological approaches both for genetic epidemiology, using the variety of data types available from IARC's recently acquired NGS capabilities, and for more general statistical issues in epidemiology. In parallel to this, it will be crucial to establish collaborations with external statisticians to complement the resources at IARC. Such collaborations will contribute to the development of a culture of cross-institutional cooperation on statistical work.

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