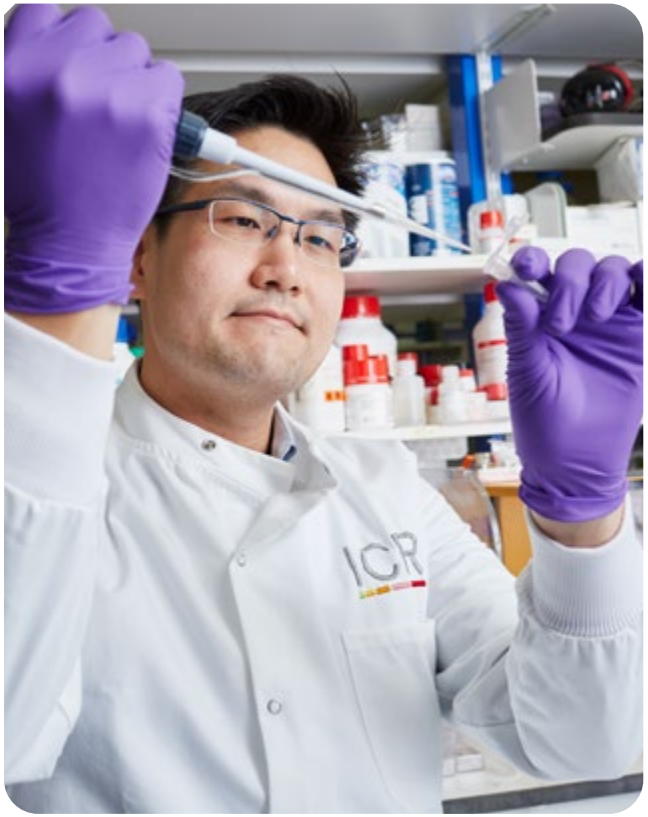
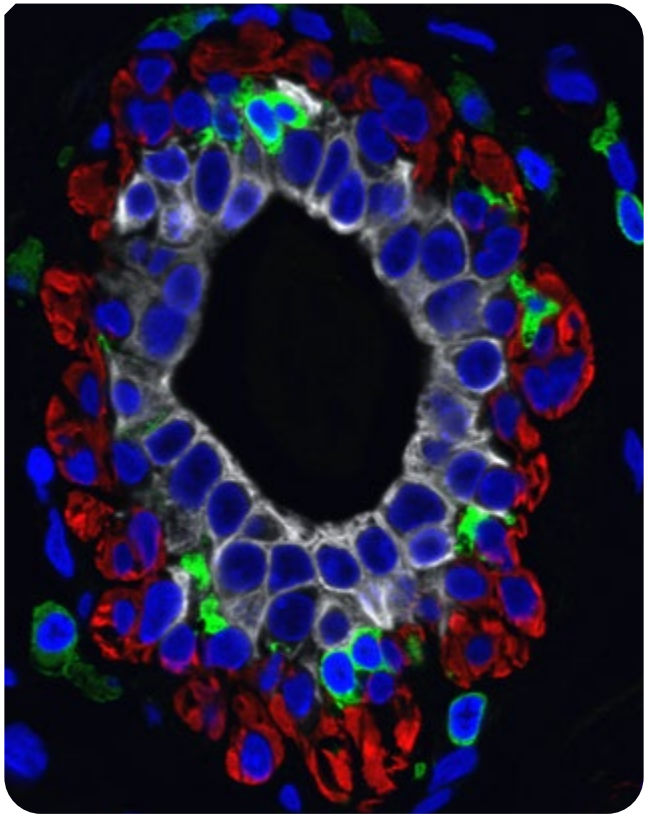
ICR The Institute of Cancer Research

Defeating cancer together

How the Government can enable cancer research in academic institutions to thrive.





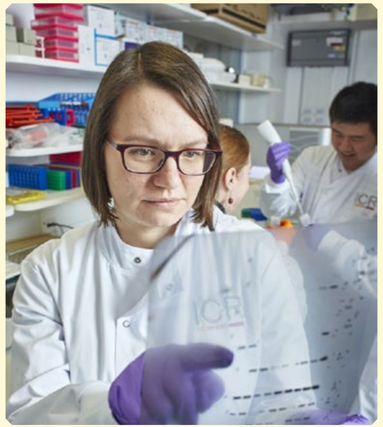
About The Institute of Cancer Research, London

We are one of the world's most influential cancer research organisations and excel in identifying cancer genes, developing precision radiotherapy, and discovering new cancer drugs.

Since 2005, our scientists have discovered 21 new drug candidates, of which 13 have entered clinical trials, and two drugs have been approved for use in patients – abiraterone for prostate cancer and capivasertib for breast cancer. Scientists and clinicians at The Institute of Cancer Research (ICR) are working every day to make a real impact on cancer patients' lives. Through our unique partnership with The Royal Marsden NHS Foundation Trust and 'bench-to-bedside' approach, we are able to create and deliver results in a way that other institutions cannot. Together the two organisations are rated in the top four centres for cancer research and treatment globally.

We have an outstanding record of achievement dating back more than 100 years. We provided the first convincing evidence that DNA damage is the basic cause of cancer, laying the foundation for the now universally accepted idea that cancer is a genetic disease. We discovered the BRCA2 gene. Today, we are a world leader at identifying cancer-related genes and discovering new targeted drugs for personalised cancer treatment. We are a charity and rely on support from partner organisations, funders and the general public.

A member institution of the University of London, we are one of the UK's leading higher education institutions, placing first for biological sciences and second overall in the definitive 'REF2021' rankings of UK university research quality, impact and environment, and provides postgraduate higher education of international distinction.



We believe there are three areas the Government could prioritise to enable cancer research in academic institutions to thrive, and help us on our mission to continue making the discoveries that **defeat cancer**.

1. Create a sustainable funding model for research in universities.

2. Encourage international talent to support cancer research.

3. Join up the clinical research pipeline.

The Institute of Cancer Research, London, is one of the world's most influential cancer research organisations – our mission is simple: ***to make the discoveries that defeat cancer.***

1. Create a sustainable funding model for research in universities.

Universities play a unique role in bringing many parts of the research sector together – across academia, industry, the third sector and the NHS. They collaborate extensively with medical research charities which fund considerable amounts of research within the UK's research infrastructure. In 2023, 87 per cent of the almost £1.7bn invested in research by members of the Association of Medical Research Charities (AMRC) took place in universities.[1]

Despite being a vital part of the UK's research ecosystem, research in universities is not currently financially sustainable, with many institutions operating in a financial deficit.

When people generously donate to charities to fund medical research, they expect those donations to directly fund that research. The Charity Research Support Fund (CRSF) allows universities and research institutes which receive charitable funding to recover the 'indirect' costs of doing research that charity grants do not cover – such as the rising cost of energy – which are essential for that research to happen. The CRSF underpins charity investment in universities across England however it has seen a significant decrease in real terms over recent years.

At the ICR, we have the greatest relative proportion of CRSF-eligible income of any UK higher education provider. As a specialist postgraduate cancer research institution, we are unable to cross-subsidise the deficits from our research using income from overseas tuition fees, as some universities do. The combination of these two factors mean that we are uniquely affected by the declining value of the CRSF. In fact, in 2022-2023, for research activity funded by UK charities, we recovered less than 60 per cent of the 'full economic costs' for our research activities which translated to a deficit of almost £30m.

1. *https://www.amrc.org.uk/our-sectors-footprint-in-2023*

Specialist provider element (SPE) funding, provided by Research England, is awarded to a small number of specialist institutions, such as the ICR, in recognition of their excellence and global reach. This vital funding recognises the unique benefits smaller, specialist institutions bring to the UK from their world-leading research and the translation of their research into economic and societal impact, while acknowledging the challenges they face.

Our ask:

Government should work with Research England to urgently uplift CRSF, so that English universities and research institutions can continue to conduct world-class cancer research in a sustainable manner, whilst also prioritising an increase in SPE funding to sustain the academic excellence of specialist institutions.

2. Encourage international talent to support cancer research.

To keep discovering new cancer tests and treatments, we need to be able to recruit and retain the best talent and scientific leaders. Being a global institution is part of what makes us successful and international talent is a key part of our research workforce. More than 35 per cent of our staff are from outside of the UK and we have staff from 67 different countries. Recent modelling by the Royal Society showed that total upfront visa costs are up to seventeen times higher in the UK compared to the international average.[2] It is simply not sustainable to have barriers of this magnitude in the way of attracting the best global talent when we are competing with the leading universities, institutes and companies across Europe and the USA.

Our ask:

The UK needs a visa and immigration system which is competitive with other leading research nations. This is essential for us to continue being internationally leading and to compete with institutes and universities across the world. The Government should support the aim of recruiting international talent and leaders by reducing the costs for researchers, so the UK is competitive with comparable nations.

2. *https://royalsociety.org/news-resources/publications/2024/summary-visa-costs-analysis-2024*

3. Join up the clinical research pipeline.

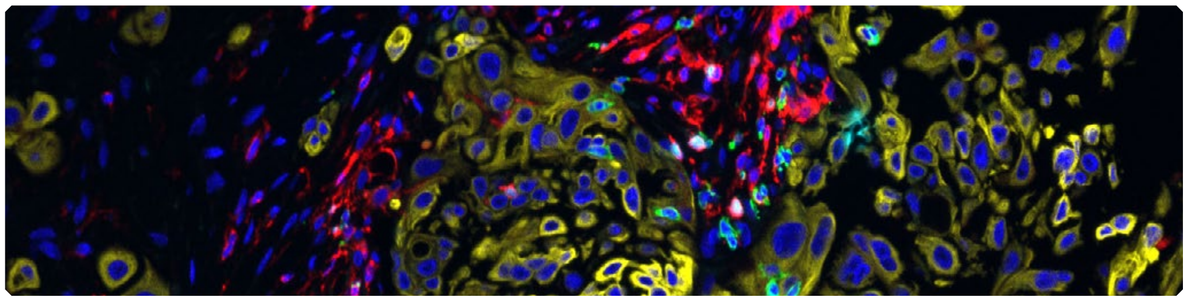
The diversity of the UK's research funding ecosystem is one of its unique strengths; with Government, charities, universities, industry and the NHS all working together to deliver innovative science across the research pipeline, from early-stage discovery research to late-stage clinical trials.

Clinical trials are a key part of this pipeline, they turn advances in science into patient benefit and in the process drive economic growth across the UK. There are many stages of research ahead of trialling new treatments – including pre-clinical research that provides the evidence base for trials, as well as the translational and drug development research needed to ensure drugs are trialled at the right doses, combinations and treatment schedules. The ICR has a strong track record in progressing research from bench to bedside and it is vital that there's holistic support throughout the journey leading to treatments going through clinical trials and into routine clinical practice. Through our partnership with The Royal Marsden and close relationships with NHS hospitals around the country, academics at the ICR lead and work on high-profile clinical trials taking place across the entire NHS.

However, through this work, we also experience first-hand the bureaucratic barriers in the way of setting up and recruiting to clinical trials in the UK; barriers which are at odds with the UK's ambition of being a world leader in this space. We need to foster an environment that supports the translation of research discoveries so that they benefit patients and the UK economy as soon as possible and a vital part of this is streamlining the clinical trials process. The final piece of this jigsaw is rapidly adopting the outcomes of research – more accurate tests and kinder, more effective treatments – to change clinical practice within the NHS throughout the UK. To do this as efficiently as possible, we need to ensure that regulatory bodies, such as the Medicines and Healthcare products Regulatory Agency (MHRA), are able to keep pace with the scale of innovations coming out of UK science to ensure licenses and approvals for new trials and treatments aren't unnecessarily delayed. We know the difference research can make – our own studies led to the NHS reducing the number of radiotherapy doses for both prostate cancer and breast cancer patients, retaining the treatment's effectiveness while improving the patient experience, and saving the NHS an estimated £68 million each year.[3, 4]

Our ask:

With the importance of clinical trials clear to see, we need to see continued leadership in Government to maintain clinical trials as a strategic priority to ensure the UK fulfils its potential of being a world leader in the space. To do this, as there are numerous different organisations involved in the funding, setting up and delivery of clinical trials, we need to ensure that the clinical trial pipeline is joined up and that all parts are coordinated and working in conjunction with one another so that we can continue to create end-to-end impact for patients and the economy. To support this, the UK should aspire to create a world-leading regulatory environment for clinical research so that the UK can be the go-to destination for the most innovative and impactful clinical trials whilst also equipping the NHS to rapidly adopt the latest evidence-based advances to bring patient benefit much sooner.



3. *https://results2021.ref.ac.uk/impact/eb6d1a6a-12ce-4d14-b913-4803be46bd5c?page=1* **4.** *https://results2021.ref.ac.uk/impact/b606d59d-aee3-45db-a1ca-f18276fe2b95?page=1*

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