

search

Issue 54 | Spring 2026

“Our research is shaping a future in which bowel cancer is more predictable, preventable and treatable.”



Professor Trevor
Graham

04 / News:
ICR wins prestigious
prize for radiotherapy
research

06 / Supporter story:
Racing legend Bob
Champion funds vital
prostate cancer research

12 / Advance:
Bold new ideas
in bowel cancer
research



Contents

- 03 Philanthropy news**
Rhonda Ryan's story
- 04 Research news**
ESMO highlights
- 06 Supporter story**
Bob Champion Cancer Trust
- 08 Sports and challenges**
Going the distance for our research
- 10 Profile**
Professor Amy Berrington
- 12 Advance**
Bold new ideas in bowel cancer research
- 15 Fundraising focus**
Giving hope to thousands of men and their families

Contact us

The Institute of Cancer Research
123 Old Brompton Road, London
SW7 3RP

T 020 7153 5387
E supportercare@icr.ac.uk
W icr.ac.uk

Editorial

Remarkable progress in cancer research is driven by scientific advancement, but this is reliant on sustained fundraising and support. This edition highlights the powerful synergy between scientific ingenuity, public generosity and patient advocacy that generates progress towards a future where everyone can live longer, better lives.

In November, we were delighted to receive a prestigious Queen Elizabeth Prize for Higher and Further Education, which marks the third time we've been honoured with this accolade. The latest award acknowledges the considerable contribution that our pioneering radiotherapy research programme has made to healthcare systems and economies worldwide (*read more on page 4*).

We also celebrated legendary jockey Bob Champion CBE, awarding him with an honorary doctorate in recognition of his extraordinary commitment to supporting vital cancer research. The Bob Champion Cancer Trust has recently granted funding to two of our innovative prostate cancer projects, which aim to revolutionise treatment with the help of AI (*see pages 6–7*).

This edition also features philanthropist Rhonda Ryan, who, after making a significant donation to train the cancer researchers of tomorrow, is now working with her contacts in the finance industry to make an even greater impact. Rhonda's own personal experience of cancer has inspired her efforts, and she shares her story on page 3.

On pages 10–11, we shine a spotlight on Professor Amy Berrington, whose pioneering work in epidemiology is helping us understand and reduce cancer risk globally. You'll also find an overview of our latest projects in bowel cancer research, where innovative approaches are opening new doors for treatment and prevention (*see pages 12–13*).

Finally, we share highlights from recent fundraising events, including the incredible efforts of runners who have gone the extra mile – quite literally – to support our mission. Their energy and passion remind us that every stride brings us closer to a future where we can defeat cancer.

Thank you for being part of this journey. Together, we can make a difference to the lives of people with cancer.

Professor Kristian Helin
Chief Executive, The Institute of Cancer Research

“Superheroes don't wear capes; they wear lab coats.”

Rhonda Ryan with her husband, Sean

Rhonda Ryan, 57, was diagnosed with lobular breast cancer in 2019. Two years later, it spread and was deemed incurable. An experienced investment professional, she is now calling on industry colleagues to join her in supporting our vital research.

“In 2019, just before my regular screening, I noticed a thickening in my breast. I was shocked to be told the cancer had probably been growing for some years and had already spread to my lymph nodes.

“I had a double mastectomy and reconstruction, then nine months of chemotherapy and radiotherapy.

“After a year of thinking I was ‘cancer-free’, I learned it had spread to my liver. Being told it was incurable was devastating. I had two children still in school.

“Without treatment, I had between three and nine months to live. With drugs, I was looking at one to 10 years.

“I started a targeted treatment, the clinical trials of which had been led by the ICR. To date, palbociclib has been the most effective drug in shrinking my tumours. But it eventually became

ineffective. I've since been on four different treatments, with chemotherapy ongoing.

“Superheroes don't wear capes; they wear lab coats. Thanks to the researchers who developed the drugs that have kept me alive, I've been able to see my children get their A-Level results, embark on careers, and share holidays and milestones over the past four years.

“My husband and I made a personal donation to the ICR, establishing an endowed studentship fund to sponsor talented PhD students.

“But I believe a much greater impact could be achieved by garnering support from my industry. I established a fundraising initiative to encourage the Alternative Investment industry to raise £1.8 million for breast cancer research at the ICR. We've already raised more than £720,000 towards Professor Victoria Sanz-Moreno's research focusing on how and why breast cancer spreads.”

Read Rhonda's full story and donate to the Alternatives 2 Cancer initiative here:



ICR wins prestigious prize for radiotherapy research

We've been awarded the Queen Elizabeth Prize for Higher and Further Education – the UK's highest honour in this sector – for our pioneering work in radiotherapy. This is our third win in less than 10 years, recognising our decades of commitment to innovation, collaboration and patient impact.

Working alongside colleagues at our partner hospital, The Royal Marsden, our scientists have developed advanced techniques such as intensity modulated radiotherapy (IMRT), stereotactic body radiotherapy and MR Linac therapy. We have also led landmark clinical trials, including CHHiP and PACE-B.



Professor Helin receiving our previous award in 2024

These breakthroughs have improved survival rates, reduced side effects, shortened treatment times and saved the NHS more than £28 million annually.

The award also acknowledged our role in training specialists and translating lab discoveries into clinical practice, transforming cancer care worldwide. Researchers representing the ICR attended a formal honours ceremony at Buckingham Palace in February, where they were presented with a medal and certificate by His Majesty The King.

Bringing experts together to advance research into rare brain cancer

We were proud to host the 5th International Gliomatosis Cerebri Conference in September in collaboration with The Rudy A Menon Foundation, one of our inspirational family charity partners.

Gliomatosis cerebri is a rare and aggressive type of glioma, which is a cancer that originates in the glial cells of the brain. Its diffuse pattern of growth – like a spider's web of cancer threads – means that it spreads very quickly and infiltrates deep into the surrounding brain tissue. The disease can affect multiple parts of the brain



simultaneously, making it very difficult to remove with surgery or treat with radiation.

By giving scientists, clinicians and dedicated family charities from around the world the chance to share new research and discuss innovative ideas, the three-day conference aimed to help accelerate progress towards tackling this cancer of unmet need.

A promising new jab for head and neck cancer

A new cancer treatment given as a simple injection under the skin has shown encouraging early results for patients with advanced head and neck cancer.

Our scientists presented findings from the Orig-AMI 4 trial at the ESMO 2025 Congress. The trial tested amivantamab, a next-generation drug that is already approved for lung cancer. It works by blocking two key cancer pathways (EGFR and MET) and activating the immune system.

The findings showed that 76 per cent of participants who had exhausted other therapies saw their cancer shrink or stop growing, with responses occurring within six weeks.

Head and neck cancer affects around 12,800 people annually in the UK. When the disease returns, treatment options are limited.



Study lead Professor Kevin Harrington said:

"This could represent a real shift in how we treat head and neck cancer – not just in terms of effectiveness, but in how we deliver care. Unlike many treatments that require hours in hospital, this is a quick injection, making it faster and more convenient for patients."

Prostate cancer screening for men with genetic mutations

In November 2025, the UK's National Screening Committee recommended that men with a confirmed BRCA1 or BRCA2 variant should have a PSA test every two years between the ages of 45 and 61.

Our scientists had a pivotal role in providing the evidence for this decision. We led clinical research demonstrating that prostate-specific antigen (PSA) testing detects more dangerous prostate cancers in men with BRCA1 and BRCA2 variants than in non-carriers.



In 2019, early findings from the IMPACT study showed that men with BRCA2 variants have such a high risk of aggressive prostate cancers that they should be offered annual PSA testing. PSA testing picked up prostate cancers more often and at a younger age in these men, leading to a change in the European screening guidance.

The latest results from the study showed that men with BRCA1 variants were more than three times as likely as non-carriers to have aggressive prostate cancers, which typically grow and spread quickly. Our researchers presented these new findings at the ESMO 2025 Congress.

Bob Champion: From racing legend to champion of cancer research

“My story 45 years ago gave hope to people fighting cancer. I am very proud of what the Trust has achieved since then and hope we can, with this award, continue to make a difference.”

Bob Champion CBE

When jockey Bob Champion crossed the finish line on Aldaniti at Aintree in 1981 to win the Grand National, it was more than a sporting triumph. Just two years earlier, Bob had been diagnosed with testicular cancer that had spread to his lungs, and doctors gave him slim odds of survival.

His fairytale racing victory, which came after his treatment and subsequent recovery, became a global symbol of resilience and hope, inspiring millions and marking the start of a lifelong mission to improve outcomes for people with cancer.

In 1983, Bob founded the Bob Champion Cancer Trust with Aldaniti's owner Nick Embiricos, raising more than £15 million to fund pioneering research into prostate cancer – the most common male cancer in the UK. Recently, we commended Bob's extraordinary contribution with an honorary doctorate, recognising his courage and unwavering commitment to advancing science that saves lives.

The charity has continued Bob's legacy, making one of its biggest cancer research investments to date: the Nick & Valda Embiricos Award, an £885,000 grant to fund two of our cutting-

edge projects, both using artificial intelligence (AI) to tackle major challenges in prostate cancer care.

Prostate cancer affects more than 55,000 men in the UK each year. Survival rates have improved, but the disease still claims thousands of lives annually, and many men endure serious side effects from treatment. The Trust's latest investment aims to change that story.

Developing a five-minute MRI scan

The first project, led by Dr Matthew Blackledge, focuses on revolutionising whole-body MRI scans for men with advanced prostate cancer. These scans are vital for monitoring tumours and guiding treatment, but standard appointments take about an hour, which can be gruelling for patients and create bottlenecks in hospitals.

A new AI-powered technique called 'quickDWI' promises to cut scan times to under five minutes while maintaining image quality. Shorter scans would mean less discomfort, faster treatment decisions and reduced waiting times.

Early evidence indicates that quickDWI produces accurate results comparable to those from standard scans. If this performance can be validated in larger clinical trials, the new technique may one day enable mobile screening units to offer rapid checks in the community.

Balancing survival with quality of life

The second project addresses a critical question in early-stage prostate cancer: which tumours need intensive treatment, and which can be safely monitored? The inability to distinguish between the two can result in overtreatment or undertreatment.

A team led by Dr Anna Wilkins is developing AI algorithms to analyse routine biopsy slides and predict tumour behaviour. By detecting specific features associated with aggressive cancers, such as PTEN gene loss and a dense extracellular matrix structure, this approach

could guide personalised treatment without extra tests or costs.

In studies involving more than 2,000 men, one AI algorithm performed strongly against expert pathology, even using decades-old samples. This innovation could soon help doctors balance survival with quality of life and potentially even bring advanced diagnostics to countries with limited resources.

Revolutionising treatment with the use of AI

Bob Champion CBE said: “My story 45 years ago gave hope to people fighting cancer. I am very proud of what the Trust has achieved since then and hope we can, with this award, continue to make a difference.”

From the roar of the Grand National crowd to the hum of an MRI scanner, Bob Champion's story is one of courage and hope. His Trust's support for these groundbreaking projects brings us closer to a future where prostate cancer is not just treatable but truly manageable.

Going the distance for our life-changing research

Running events continue to be a popular way for our wonderful supporters to contribute to our fundraising efforts. Here, we report on some recent highlights.

Credit: © Sportograf



“When I crossed that finish line, I was full of emotion”

In September, Luke Wijsveld ran the Berlin Marathon in memory of his father-in-law, Professor Chris Marshall, raising more than £1,200 to fund our groundbreaking research.

Chris was a pioneering cancer researcher who spent 35 years at the ICR. As Director of Research, he led and oversaw vital discoveries that shaped our understanding of how cancers arise and led to the development of advanced therapies to treat them.

Chris died in 2015 following a diagnosis of colorectal cancer.

“Chris was such a big figure in all our lives. His work was incredibly important.”

Shortly after Chris' death, Luke and his wife Lucy ran a half marathon together in memory of her father and to raise funds for our research. A decade on, Luke was inspired to run with Chris in mind again, this time in Berlin:

“Chris was such a big figure in all our lives. His work was incredibly important, and he achieved great things. But as part of our family, he was a great father and grandad. He was really supportive and all about having fun. We still miss him so much.

“I wanted to mark 10 years since his death by supporting the research that was so important to him.”



More than £100,000 raised at Terry Fox Run UK

A record-breaking number of supporters took part in events across the UK in honour of Canadian hero Terry Fox last autumn, raising thousands of pounds for our vital research.

More than 2,000 people ran, jogged, cycled, walked or rolled up to 10 km at fundraising events in London, Hampshire, Glasgow, Edinburgh and Wrexham.

Many volunteers also gave up their time to help plan the runs, set the events up on the day, sell T-shirts and other merchandise, and cheer on the participants.

In the UK last year, participants raised more than £100,000 for our research – a record since the event returned to the UK in 2020 after a 14-year hiatus.

We also introduced silent auctions to raise further funds at two of the runs, with prizes including round-trip flights between the UK and Canada plus a hotel stay.

2,000+

More than 2,000 people participated in the 2025 Terry Fox Run UK events



Childhood cancer scientist takes on Great North Run in support of family charity partner

Dr Yura Grabovska, one of our scientists, completed the Great North Run in September, raising more than £900 in support of The Ollie Young Foundation, one of our valued family charity partners.

Ollie Young died in 2012, one day before his sixth birthday and just weeks after he had been diagnosed with an aggressive brain tumour called a glioblastoma.

The foundation, which Ollie's parents set up in his honour, has now raised more than £435,000 to fund research in Professor Chris Jones' Glioma Group.

For the past four years, these funds have contributed towards the work of Dr Grabovska, a bioinformatician in the Glioma Group, who uses computational tools and algorithms to study complex biological data, such as genetic codes, to uncover insights into cancer.

Dr Grabovska said: “The Ollie Young Foundation is a wonderful charity that has supported my research since 2021.

“I had the great honour of meeting Ollie's parents, Sarah and Simon, and showing them some of the work we have been doing in our team. They are extremely dedicated to supporting glioma research, and together we are hoping to make a real difference in understanding this disease.”

Unravelling cancer trends in a changing world

As a leading epidemiologist, Professor Amy Berrington studies the patterns, causes and effects of cancer in different populations to understand how the disease arises and how to control or prevent it. Currently, she is working at the forefront of a hotly debated topic in cancer research: why rates of cancer appear to be rising in people under 50.

By considering global evidence alongside data from key UK-wide studies – which include one of the country's most valuable long-term patient cohorts – her team is unravelling the drivers behind these trends and identifying new opportunities for cancer prevention.

Originally trained in mathematics and epidemiology, Professor Berrington found that her early-career experience working on oncology trials sparked a long-term interest in population-level approaches to cancer.

After nearly two decades at the US National Cancer Institute, where she led major studies into cancer trends, risk factors and prevention, Professor Berrington is now continuing this work as Professor of Clinical Epidemiology.

Interpreting complex global patterns

Reports of increasing cancer rates among younger adults have captured the public's attention in the past few years. However, the early studies that fuelled news headlines typically looked at young adults in isolation, without comparing trends in older age groups. Professor Berrington and her team recognised this gap.

Their recent global analysis brought clarity to the conversation. The findings showed that several cancers widely reported as rising in younger adults were actually

stable or decreasing in many countries. In addition, those that were becoming more prevalent among this group were also affecting an increasing number of older adults, suggesting broader, population-wide changes rather than a shift unique to younger generations.

Professor Berrington said: "One standout exception was bowel cancer, where the rise appears more pronounced in young people. This is now a major focus for my team as we explore UK-specific trends. One hypothesis centres on routine screening in older adults, which can prevent cancers by removing early polyps – an abnormal growth of tissue – potentially explaining why trends diverge in age."

The researchers are also delving deeper into the statistics behind breast cancer, where increases are being reported across age brackets. Their analyses of national lifestyle data dispute many common assumptions. For instance, several proposed risk factors, such as low physical activity or fibre intake, are decreasing not increasing in the UK population. Instead, the researchers argue that we need to take a more nuanced, evidence-based view of cancer risk in the modern world.

Harnessing the power of the Generations Study

Alongside these international investigations, Professor Berrington co-leads the

landmark Generations Study, funded by Breast Cancer Now, which has followed a cohort of 100,000 UK women for more than 20 years. The participants have provided detailed lifestyle information, blood samples and long-term updates, enabling Professor Berrington and her team to explore breast cancer causes and changes in risk over time.

Crucially, unlike many studies that only recruit participants from midlife onwards, the Generations Study has included women from the age of 18. As a result, it is uniquely positioned to investigate cancer in both younger and older adults – an area where data are often limited.

For Professor Berrington, a key priority is to expand access to the study's data and biospecimens, enabling wider collaboration across the research community and unlocking new opportunities for important discoveries that could transform patient outcomes.

Motivated by the bigger picture

Professor Berrington believes that the importance of rigorous epidemiology has never been clearer.

"There's no single explanation for changing cancer trends, which is why very detailed, systematic work is essential," she said. "Epidemiology lets us step back and understand both what is driving cancer and how we might change it. That's what motivates me."

"Epidemiology lets us step back and understand what is driving cancer and how we might change it. That's what motivates me."

Professor Amy Berrington

Bringing bold new ideas to bowel cancer research

Bowel cancer, also known as colorectal cancer, is the fourth most common cancer in the UK, with doctors diagnosing more than 44,000 cases each year – roughly 120 a day. Despite advances in screening and treatment, the disease continues to represent a major health challenge, particularly because it can behave differently from patient to patient.

While some tumours respond well to standard therapies, others become resistant and harder to treat. Our researchers are working hard to understand these differences, and to determine why cases are rising among younger adults.

With teams across our research divisions taking different approaches to defeating bowel cancer, we hope to accelerate breakthroughs and improve patient care throughout the entire journey – from prevention to treatment and through to survival.

Combining immunotherapy and radiotherapy

Radiotherapy is a cornerstone of bowel cancer treatment, but some tumours develop resistance. Research led by Professor Anguraj Sadanandam, Professor of Data Science and Translational Oncology, has shown that the immune system plays a critical role in radiotherapy's success.

By studying tumour samples from 53 patients, his team discovered that inflammation levels before and after treatment influence outcomes. These insights have helped shape new strategies, such as adding immunotherapy to radiotherapy. This

combined approach is now being tested in clinical trials worldwide, where it is achieving higher response rates and, in some cases, allowing patients to avoid surgery.

Tackling cancer evolution

Professor Trevor Graham, Director of the Centre for Evolution and Cancer, is uncovering



how bowel cancer originates and why it is changing. His team recently revealed a pivotal early event – a 'Big Bang' moment when cancer cells escape detection by the immune system through DNA changes that make tumours harder to spot. Once this happens, the cancer grows largely unchecked, confirming the importance of early intervention.

At the same time, cases in younger adults are rising sharply and are expected to double between 2010 and 2030. These early-onset cancers tend to be more aggressive and diagnosed later, leading to poorer outcomes.

To understand why, the Boomers study led by Professor Graham's team will compare recent bowel cancer samples with those from the 1960s, provided by St Mark's Hospital – a specialist bowel hospital. The researchers will use advanced molecular techniques to explore how changes in diet, lifestyle and environment might be driving this trend. These insights could lead to new strategies for prevention and treatment.

Preventing cancers from being missed

Our researchers are also investigating how inherited risks can be managed. Lynch syndrome, caused by an inherited gene alteration that affects the body's ability to repair DNA, significantly raises the likelihood of developing several cancers, including

endometrial and ovarian cancers, but it is most closely associated with bowel cancer.

Professor Clare Turnbull, Professor of Translational Cancer Genetics, is among the scientists who have shown that identifying those with Lynch syndrome through genetic testing can prevent cancers being missed, by helping to ensure that patients and their families receive the right care and screening.

Shaping the future for patients

From uncovering the sneaky tactics of bowel cancer cells and improving radiotherapy responses to tackling rising cases among young adults and promoting the early detection of inherited cancers, our research is shaping a future in which bowel cancer is more predictable, preventable and treatable. With every discovery, we move closer to saving more lives and giving all patients the best possible outcomes.



Regular gifts sustain our life-saving research into the future. To make a monthly donation, visit: [ICR.ac.uk/monthly](https://www.icr.ac.uk/monthly)

“It’s so important that we look at why more young people are being diagnosed with bowel cancer.”

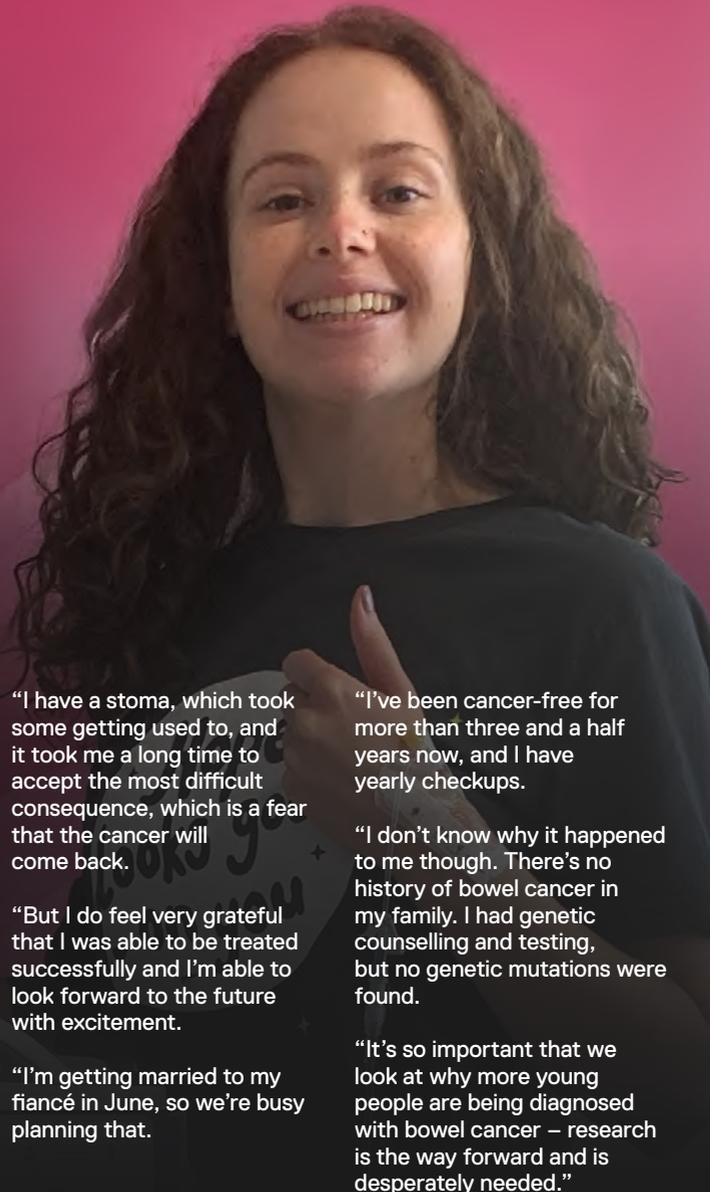
Holly Masters from East Anglia was diagnosed with stage 3 rectal cancer five years ago, when she was just 23. She was successfully treated with chemo-radiation and combined chemotherapy, followed by major surgery.

“I knew that something wasn’t right a year before my diagnosis. My symptoms were bloating, bleeding from the bottom, fatigue and weight loss.

“I’d been told that I had irritable bowel syndrome and was eventually diagnosed through emergency admission at A&E. I’d been so unwell, going to the toilet several times a day, and I just wanted answers.

“I went through a range of emotions when I was diagnosed – but mostly shock. You think so many things when you hear the word ‘cancer’, and up until that moment it hadn’t even crossed my mind.

“It felt really unfair to be diagnosed at such a young age. I now have to live with the mental and physical effects of my diagnosis for the rest of my life.



“I have a stoma, which took some getting used to, and it took me a long time to accept the most difficult consequence, which is a fear that the cancer will come back.

“But I do feel very grateful that I was able to be treated successfully and I’m able to look forward to the future with excitement.

“I’m getting married to my fiancé in June, so we’re busy planning that.

“I’ve been cancer-free for more than three and a half years now, and I have yearly checkups.

“I don’t know why it happened to me though. There’s no history of bowel cancer in my family. I had genetic counselling and testing, but no genetic mutations were found.

“It’s so important that we look at why more young people are being diagnosed with bowel cancer – research is the way forward and is desperately needed.”

Thank you for supporting our prostate cancer appeal

We want to thank everyone who supported our Christmas appeal to help all men with prostate cancer live longer, healthier lives. Together, you have donated an incredible £160,000, which will help us accelerate our pioneering work and give hope to thousands of men and their families.

Prostate cancer is the most common male cancer in the UK, and while survival rates have improved, far too many lives are still lost each year. Thanks to your generous support, our dedicated scientists can continue working to detect the disease earlier, predict its progression more accurately and develop more personalised treatments with fewer side effects.

This appeal was inspired by stories like that of DJ and music promoter Godfrey Fletcher. Godfrey was diagnosed at just 47 – shortly after his father received the same diagnosis – but thanks to early detection and treatment, he is now leading a healthy life.

Godfrey told us: “I was so lucky that my cancer was picked up at a very early stage. I was young and fit, with no



Godfrey Fletcher

symptoms. A year after my treatment finished, I was told it had been successful. My dad wasn’t so fortunate.

“We need more options for diagnosing and treating prostate cancer. I welcome any scientific advances that will take the fear away and give people hope.”

Stories of men like Godfrey underline how your donations translate into real breakthroughs and brighter futures, helping to give every man with prostate cancer the best chance of living a longer, healthier life.

From everyone at the ICR, thank you for standing

with us in our mission to defeat prostate cancer. Your generosity will make a real difference – not just in our laboratories, but also across communities and within families. Together, we are turning hope into progress.

If you haven’t already, there’s still time to donate to our appeal. Please support us today:





“I am so grateful for the world-class training I received at The Institute of Cancer Research.”

Suzanne O'Connor

When Mrs Mair Robinson died in 2015, she left us £100,000 in her Will. With her legacy gift, we established the Mair and Franklyn Robinson Research Scholarship to support a young scientist.

Suzanne O'Connor joined the ICR in 2016 and was the fortunate PhD student who benefitted from Mrs Robinson's generosity. Since completing her PhD, Suzanne has continued her work in drug discovery. She is now leading her own team of multidisciplinary scientists at the University of Dundee, working to develop new kinder treatments for young people with cancer.

“The generosity of the ICR's donors is what helps cancer research to evolve. Legacy gifts mean the ICR can invest in training scientists like me who will lead cancer research into the future.

“I am so grateful for the world-class training I received at the ICR, the support of the experienced scientists I worked alongside and the cutting-edge equipment available to me. This has set me up with vital skills,

enabling me to continue my valuable work in drug discovery.”

Like Mrs Robinson, you can support PhD students with a gift in your Will. This is a wonderful way to help the cancer researchers of tomorrow and know you are giving a lasting gift with limitless potential.

Our free online guide contains all the information you need to write or update your Will. There are also a number of ways you can make or update your Will for free.

We are so grateful to everyone who has left us a gift in their Will and those who have pledged to do so, to sustain our work into the future.

Visit [ICR.ac.uk/legacy](https://www.icr.ac.uk/legacy) to find out more.

Written and produced by:

The Institute of Cancer Research, London © March 2026. The Institute of Cancer Research. All rights reserved. The Institute of Cancer Research: Royal Cancer Hospital. Registered Office: 123 Old Brompton Road, London SW7 3RP. Not for profit. Company Limited by Guarantee. Registered in England No. 534147. VAT Registration No. 849 0581 02.