Home Office

# PPL Standard Condition 18 Notification Form



Please use this form to notify the Animals in Science Regulation Unit (ASRU) of procedural-related adverse effects that have exceeded or are likely to exceed the severity limitations or controls described in the project licence. ASRU will use this information to determine whether any further action is required.

Do not use to report:

- adverse effects that are due to non-procedural issues;
- potential non-compliance (report by other means);
- issues without adverse welfare consequences.

If you are in doubt whether or not you need to fill in this form, please contact your assigned Inspector.

Please clearly title your document: **'ASRU_establishment name_PPL number_PPLh surname_date_sc18'** and send to your Inspector (e.g. using cjsm) with the subject heading 'PPL SC 18 Notification PPL [Number]

| | |
|---|---|
| **Establishment Licence name** | Designated area within the University of Cambridge, Anne Maclaren Building |
| **Establishment Licence number** | X81BD37B1 |
| **Name of PPL holder** | Brian Huntly |
| **PPL number** | PP3042348<br><br>Investigation of normal haematopoietic stem cell subversion and the evolution, maintenance and targeting of haematological malignancies |
| **Protocol no** | 9 |

| | |
|---|---|
| **Protocol title** | [Moderate] 09 Study of the genetic and therapeutic vulnerabilities of pre-leukaemia and leukaemia (Mice) |
| **Severity classification** | Moderate |
| **1. Date of incident** | 08/06/22 |
| **2. Species** | Mouse |
| **3. Brief details of study and how the limits or constraints have been breached** | A mouse on study plan SP127673 was found dead on 08/06/2022. Animals on this study plan are expected to develop leukaemia, following transplantation with a human leukemic cell line. The aim of this study is to assess the efficacy of tumoricidal agents alone or in combination, using two different compounds that have been previously utilised in multiple pre-clinical murine models of cancer.<br><br>All animals on this study are receiving daily treatment with tumoricidal agents by means of oral gavage. This animal was last assessed by the research group on the 7th of June (and had received its daily treatment with no complications/adverse symptoms).<br><br>Macroscopic examination upon necropsy revealed a slightly enlarged spleen (a typical phenotype of this murine model) in strong agreement with acceleration of the disease, that unfortunately may progress too rapidly upon emergence of resistance to treatment. |
| **4. Have you taken advice from the Named Animal Care and Welfare Officer/Named Veterinary Surgeon/others?** | Having established the cause of death of this animal, we did not seek advice from the NACWO or the vet. |
| **5. Cause of Problem, if known** | Rapid progression of the disease, most likely due to acquired resistance to the tumoricidal agent that has been administered to this animal. At this stage, the onset/progression of symptoms consistent with terminal endpoints can be extremely rapid and unfortunately extremely difficult to predict. |

| | |
|---|---|
| **6. Action that has been or will be taken** *(For example, formulation of drug changed, supportive treatment given, study design modified). If no action needed, indicate why (for example, none required as study has been terminated and will not be repeated)* | We continue to monitor the remaining animals for signs of disease progression, we have increased the frequency of checks (by means of visual inspection, weighting and imaging) in order to increase our ability to establish terminal endpoints that secure a biologically meaningfully and informative outcome (within the confines of our study) and have decided to discontinue treatment, since resistance to treatment has emerged. |
| **7. Reported by (name)** | George Giotopoulos/Ryan Asby |
| **8. Date** | 10/06/22 |

********************************For official use********************************************

## Inspector's comments and recommendations:

| | |
|---|---|
| **Comments and recommendations** | |
| **Inspector name** | |
| **Date** | |