ACKNOWLEDGEMENTS

At the close of a year, marked by the Foundation’s move to its new premises and by the opening of the AGORA Cancer Research Center, we wish to express our deepest gratitude to all our generous donors, without whom none of our projects could have been carried out.

Special thanks to Prof. Francis-Luc Perret, Director, Aylin Niederberger, Managing Director, Nathalie Blanc, Administrative Assistant, Clémentine Jobin, Reception Assistant, as well as to our ambassadors, Didier Grobet and Jürg Kärle, for their faithful commitment.

You have all contributed to the development and success of our Foundation, and your support is greatly appreciated. Thank you!
# Contents

**Editorial: A Dream Comes True**  
A Message from the President of the Foundation Council  
4 — 5

**The Foundation’s Missions**  
Our lines of action  
6 — 7

**AGORA — Pôle de recherche sur le cancer**  
Inauguration  
8 — 9

**Architecture and environment**  
Images of AGORA building architecture  
10 — 11

**Conversation with a Scientist**  
Interview with Prof. Manuela Eicher  
12 — 15

**Architecture and details**  
Interiors  
16 — 17

**Réseau romand d’oncologie (ROR)**  
Cantonal Interactions for the Benefit of the Patient  
18 — 21

**Highlights in 2018**  
A Closer Look at the Events of the Past Year  
22 — 23

**Supported Projects**  
24 — 27

**The Foundation’s Bodies**  
28 — 29

**Donors**  
30 — 31
This year, a dream became reality: the AGORA building, which will house approximately 300 multidisciplinary researchers from university institutions located in the lemanic area, was inaugurated on October 3, 2018 (see pages 8 and 9). Since the establishment of the Foundation in 1964, the merging of a large variety of competences, conducive to exchange and discovery, has been a central theme for the founders and their successors. It was and continues to be their will to develop a strategy that best meets the public health challenge of cancer.

By handing over this building to the scientists, the Foundation is pursuing a clear objective: it aims to support research that will allow patients and their families to hope for solutions.

The main tasks of the Foundation are the promotion of translational research and the supporting of first-class young scientists. The members of the Foundation Council and the Scientific Board have worked together to support exceptional people and projects (see pages 24 to 27). We wish to...
take this opportunity to thank both them as well as the Foundation’s management and staff, who work tirelessly on a daily basis. Many thanks also to all the lemanic institutions whose collaboration is indispensable for the implementation of the projects.

**Exchange, positive perspectives, professionalism, dialogue and openness** are the hallmarks of the Foundation’s daily work. This is how the Foundation expresses its gratitude to the donors who, year after year, make it possible for it to achieve its missions, and without whom these promising projects could not be accomplished. We thank them from the bottom of our hearts for their support and trust!

Catherine Labouchère
Presidente
Translational Immuno-Oncology Research at the Heart of AGORA!

This statement deserves an explanation!

Translational research first! It is the element that links fundamental, at times abstract but essential, *in vitro* research to clinical *in vivo* research, for the benefit of the patient, concretely monitored in his or her living environment.

Immuno-oncology next! Immune defense provides the best protection against disease. It involves the mobilization of an individual’s own epigenetic resources so as to fight a disease as naturally as possible.

And lastly AGORA! In ancient urban planning, the agora was the hub for social, political and economic dimensions. According to Aristotle, civilization is not possible without an agora, site of multiple intersections where new ideas were born.

The AGORA cluster, located at the heart of the hospital campus, was designed to accommodate translational immuno-oncology research. The purpose of its architecture is to embody the concepts mentioned in the three components of the above statement.

A symbol of multidisciplinarity, the building will house more than 300 researchers and physicians who have all the scientific and clinical skills needed to control, as effectively as possible, the evolution of a disease that affects an ever-increasing number of individuals, regardless of gender and age.

The creation of the AGORA research cluster is the result of a public-private partnership that will serve as a benchmark in the world of medical research. Without doubt, the boundaries of this research will reach far beyond the lemanic region, not only to the German-speaking part of Switzerland but to countries beyond.

From now on, the ISREC Foundation’s efforts will once again focus mainly on supporting projects aimed at bridging the gap between basic medical science and actual
In ancient urban planning, the agora was the hub for social, political and economic dimensions. According to Aristotle, civilization is not possible without an agora, site of multiple intersections where new ideas are born.

clinical practice. Undeniably, translational medicine has a strong prospective component that must be encouraged.

This emerging discipline applies the principles of translating scientific theories and laboratory discoveries into practical medical applications, in order to optimize the quality of medical and pharmaceutical care provided to patients. The resources needed to develop this discipline are substantial. They call for equipment that cannot systematically be financed by traditional laboratory budgets, as well as human testing phases that require clinical supervision.

The ISREC Foundation is thrilled to be able to support these efforts by calling upon its two fundamental missions which can thus take on their full significance:

— on the one hand, by supporting the development of cutting-edge, precise and targeted research, focusing on the quality of patient care in its human, psychological and social dimensions;

— and on the other hand, by promoting young physicians and training scientists and clinicians qualified to simultaneously conduct original research and personally engage themselves in clinical practice for the benefit of the patient.

Professor Francis-Luc Perret
Director
Inauguration of the AGORA building, a strategic constituent of the new cancer research cluster

On October 3, the ISREC Foundation had the honor of welcoming more than 300 guests and representatives of the authorities and partner institutions for the official inauguration of the AGORA cancer research cluster.

Four heads of department of the cantons Vaud and Geneva, Cesla Amarelle, Pierre-Yves Maillard, Pascal Broulis and Mauro Poggia, attended the ceremony. Prof. Nouria Hernandez, rector of the University of Lausanne, Prof. Pierre-François Leyvraz, general director of the CHUV, Bertrand Lévrat, general director of the HUG and Prof. Martin Vetterli, president of the EPFL were also present at the launching of this new research center, alongside representatives of the partner institutions as well as Prof. George Coukos, Prof. Pierre-Yves Dietrich and Prof. Douglas Hanahan, management members of the Centre suisse du cancer – arc lémanique (SCCL).

The Fight Against Cancer: A Collective Effort at the Heart of the AGORA cluster

Initiated by the ISREC Foundation in 2013, the realization of the AGORA project is the result of a partnership between the CHUV, the University of Lausanne, the EPFL, the Ludwig Institute for Cancer Research, the University Hospitals of Geneva and the University of Geneva. This project has emerged from a common vision and will eventually become an important platform for collaborations between various cantons.

The building, owned by the ISREC Foundation, was designed by the architectural firm Behnisch Architekten. It offers 11500 m² of laboratories, technology platforms, offices, conference rooms, a large auditorium and a restaurant. The architecture of the building fosters interactions between disciplines, among researchers, and between established scientists and students.

Moreover, AGORA will contribute to the community at large and play an important role in helping patients. Communal spaces such as an atrium near the entrance of the
building will enable scientists and clinicians to explain treatment processes and the value of ongoing research to the public.

A Public-Private Partnership
Promoting Humane Medical Practice

The ISREC Foundation is proud to have tangibly contributed to the development of an oncology platform in the lemanic area through the construction of the AGORA research building. Medical advances achieved within AGORA will act as ideal stimulants for the future dynamics of the ISREC Foundation, which will continue to be a leading player dedicated to patients and cancer research.

1. Inauguration ceremony in the Paternot auditorium
2. Cutting the ribbon. From left to right: Martin Vetterli, Nouria Hernandez, Bertrand Levrat, Pierre-Yves Dietrich, Pierre-François Leyriaz, George Coukos, Pierre-Yves Maillard, Catherine Labouchère, Pascal Broulis, César Amarelle, Francis-Luc Perret
3. Festivities in the Espace AGORA
4. Handing over the AGORA building symbolic keys to Professors Pierre-Yves Dietrich, Douglas Hanahan and George Coukos, accompanied by Catherine Labouchère

“We are very pleased to be able to hand over this new emblematic building to the scientists.”

President of the ISREC Foundation
Evening lights from the Sauvabelin hill
Today, the AGORA building enriches Lausanne's landscape and subtly blends into the heart of this city on the move.
How does a nurse become interested in research and persevere to the point of obtaining a bachelor’s, master’s and finally a doctorate degree in nursing?

My decision to pursue nursing studies was guided by a curiosity to better understand how to care for and support seriously ill patients. We need to remember that it was a British nurse Florence Nightingale who, in the 19th century, already performed statistical analyses during the Crimean War in order to improve patient care. The scientific interest in nursing is therefore not a novel concept, although relatively new in Switzerland.

During my first years as a nurse, I cared for people with HIV. During my master’s studies, I started working in the field of breast cancer. Oncology care is extremely complex. Each cancer patient undergoes customized and personalized treatments that can be very
difficult. The patient’s experience is essential, as is support with respect to what we call “self-care”, i.e. an individual’s ability to care for his or her own health. How a patient affected by cancer comprehends his or her disease depends on personal experience and what this person has gone through, as well as on the familial, cultural, social model and even the political and economic environment. The way in which a person copes with his or her illness and different treatments essentially depends on all these factors.

I am convinced that understanding all these elements, and developing initiatives that enable patients and their families to better manage the disease and its consequences are factors that deserve the same rigor applied to biomedical research. Ideally, research on the mechanisms of cancer cell development goes hand in hand with research on supportive approaches. In my opinion, nursing science stands at the crossroads of these two worlds, while focusing on the patient and his or her family. My wish is that nursing science contributes to making precision medicine even more patient-centered.
The ISREC Foundation places the patient at the heart of its mission and, in the long term, hopes to encourage interactions between researchers, patients and their families. Your project is an illustration of the positive collaboration between the medical field and the patient. Tell us about the scientifically proven benefits of this approach.

Today, it is very popular to speak of patient-centered care. This calls for a respectful, responsive approach, adapted to the needs, values and preferences of each patient. Such an approach thus requires care that includes knowledge transfer and sharing, information accessibility, active involvement of friends and family, interprofessional collaboration, as well as acute sensibility to non-medical and spiritual dimensions. In biomedical research, we have long focused primarily on mortality and survival as indicators of treatment effectiveness. In order to improve the «care» experience of cancer patients, other measures are needed, such as the evaluation of the general state of health and the data reported by the patient himself («patient reported outcomes»).

Digital technologies are helping us to discover new ways to analyze and interact on a more regular and detailed basis with the people concerned. However, we presently stand at the very beginning of this evolution. The development of the electronic tool in itself is relatively easy. However, content and interactions between human beings and the tools are what make the technological implementation as complex as drug development. Today, we know that electronic integration of oncology patient reported outcomes improves communication and symptom control, greatly facilitating the clinicians’ work. Several studies have shown that such an approach, if well integrated into the organization of care, can significantly improve patients’ quality of life and potentially increase survival. As a scientist, I think our top priority must be to better understand the mechanisms of action that will allow for the best results.

A very promising aspect is the use of the data for both clinical and research purposes. A patient who regularly writes down his symptoms in an electronic tool might make it possible for us to identify toxicities and other treatment side effects at an earlier stage. This will improve our ability to intervene rapidly, and will reduce the negative aspects of therapies, while reassuring the patient and his or her family, and enhancing the sense of security and trust. Prof. Michielin and I are presently tackling this aspect by carefully studying the progression of patients undergoing immunotherapy. Analyzing trends in side effects will probably allow us to one day predict their development.

One of the key missions of the ISREC Foundation is to support the next generation of scientists. Your CV shows that you work as a professor in various institutions. What is your relationship to the young generation of caregivers?

In my role as an associate professor at the IUFRS, I have the pleasure of training nurses at the master’s and doctoral levels and of supervising post-doctoral fellows. In doing so, I can share my passion for the improvement of nursing and the development of innovative models. As a consulting research nurse in the CHUV’s Department of Oncology, I obviously collaborate on research and development projects with nurses and the interprofessional team, but I also participate in the training program. In all these activities, I endeavor to promote interprofessional collaborations and care centered around patients and their families. My chairmanship of the «Supportive and Palliative Cancer Care» group of the Swiss Group for Clinical Cancer Research (SAKK) allows me to give visibility to nursing vocation in interdisciplinary research. The co-presidency of
the European Oncology Nursing Society’s (EONS) research working group offers me the possibility to encourage young scientists to become involved in clinical research and to facilitate exchanges with oncology researchers from other disciplines. EONS continues to communicate the added value of oncology nurses for patients in terms of quality and safety. We strive to make this information more accessible and to send a message to politicians, so that they can more actively support quality training for nurses.

The ISREC Foundation supports your research project by means of a private donation. What does this support mean to you? What is your message to the donors?

It is difficult to imagine that research in the field of patient care is struggling for funding. Yet this is the irrefutable reality. For me, it is therefore a great privilege to receive this support from the ISREC Foundation. In this way, we can guarantee high-quality studies, i.e. research performed in AGORA, which in itself guarantees promising interactions and exceptional visibility. This donation also increases the oncology nursing science workforce and, in the future, will facilitate even closer collaborations with other disciplines. In my dreams, the research that we will be able to carry out thanks to this funding will lead to the rise of an institutional culture in which innovations in care – whether in the clinic or the laboratory, or directly at patients’ bedside – will be implemented in a common spirit of co-creation.
Indoor spaces
The seven-story AGORA building boasts three laboratory floors, a technical floor, a car park and a public level with an auditorium, an adjacent foyer and a restaurant.
The public level
Above: the Paternot auditorium seats 250 people and comes with a cutting-edge audiovisual system and videoconferencing technology. Below: the auditorium foyer, with a commanding view of the city of Lausanne, is a space for exchange and interactions.
Understanding how cancer develops, finding ways to prevent it and developing effective therapeutic strategies are among the major challenges of the 21st century. The unprecedented progress achieved in recent years suggests that this is now possible. Thus, after more than a century of hope and disappointment, controlling or even eradicating certain types of cancers with the help of the immune system (immunotherapy) is in the process of becoming a reality. The next step in this revolution is precision oncology, which is now revealing its full potential: today, technological tools make it possible to read all the components of cancer cells and to identify their « Achilles’ heel », against which targeted treatments can then be directed. Genomics and other -omics approaches, as well as a range of new technologies make it possible to study tumour biology at a level of detail that was unimaginable just a few years ago. In addition, the tools available for the analysis of the immunological component help to understand how the tumour manages to escape the immune system. This information is now paving the way towards a personalized oncology approach. A patient will be offered a targeted treatment or immunotherapy, depending on his or her molecular profile. Thus, the suitable treatment will finally present the much sought-after triad: efficiency, improved tolerance and cost control.

The challenges linked to this personalization are manifold. They are, among other things, caused by the amount of raw data generated, by its complexity and by its interpretation for the purpose of guiding therapeutic decisions. One way to meet this challenge is to collect data from a large number of patients. Thanks to big-data analyses, this large data volume will make it possible to identify signals that can guide the clinician towards the correct therapeutic choice. In the field of oncology, the digital transition is therefore a major future challenge (Figure 1).
The digital transition is therefore a major future challenge.

Figure 1: Access to detailed data at the clinical and molecular level, coupled with a broad frame of reference, allows for the use of modern big-data techniques to select personalized treatments for patients.
Within this evolution, intercantonal collaboration becomes a matter of course. The shores of Lac Léman abound with institutions at the forefront of oncology. None of them on their own can provide all the required expertise and infrastructure, but today each of them represents a piece of the huge puzzle of competences within the Swiss Cancer Center – Léman (SCCL). It is essential to bring together the different actors of these institutions, to link basic research and clinical application, technological progress and human beings, and to join innovation, ethics and social aspects. Recent intercantonal achievements such as the creation of the «Réseau Romand d’Oncologie» (RRO) and the establishment of an interdisciplinary molecular tumour board have laid the foundation for precision oncology. They show that attitudes have changed, and that historical cantonal and institutional barriers can be overcome.

The «Réseau Romand d’Oncologie» (RRO)
The sharing of data and the expertise required to develop an ambitious personalized oncology program are major challenges, to which the CHUV and the HUG have responded by establishing the RRO. Since the end of 2016, this network makes it possible to focus information and decision-making around a weekly molecular tumour board. Patients selected for a personalized approach, generally those no longer responding to standard therapies or those suffering from rare cancers, are referred to the RRO by the attending oncologists working in university or regional hospitals, or in private clinics and practices (Figure 2). Accordingly, this personalized oncology approach is open and accessible to all patients in the French-speaking part of Switzerland, independently of whether they are cared for in a university setting or elsewhere. Patient tumour samples sent to the RRO are analysed by high throughput sequencing (NGS). Once the results are available, a team of bioinformaticians, biologists, pathologists and specialized oncologists meet to analyse the data and to recommend personalized therapeutic approaches. Feedback is given to the prescribing oncologist in a molecular tumour board videoconference, during which cases are presented and therapeutic options are discussed. This close contact with the
patient’s referring oncologist is essential, as the clinical context, the patient’s wishes and his or her general condition greatly influence the therapeutic choice. Once the proposed treatment has been performed, information regarding the effectiveness of the procedure is added to the databases. These make it possible to identify patients whose molecular profiles predict a high probability of responsiveness to a given treatment, but also those whose profiles are associated with a very low chance of success. Thus, ineffective treatments, synonymous with unnecessary toxicity and wasted time in the patient’s oncological journey, can be avoided.

Since its launching, the RRO has been very successful, and more than 350 patients are referred annually to the molecular tumour board. Significant efforts have been made to offer off-label treatments to patients. In particular, innovative programs have been set up to provide access to immunotherapies such as checkpoint inhibitors (anti-PD-1).

The Swiss Personalized Oncology Network (SPO) and the SPHN Initiative
Potentially, the RRO concept can be extended far beyond the French-speaking part of Switzerland. But such an ambitious project calls for significant efforts to standardize clinical and molecular information so that data can be shared. This is the objective of the federal Swiss Personalized Health Network (SPHN) program. Its «personalized oncology» division was initiated by university hospitals in close collaboration with the Swiss Group for Clinical Cancer Research (SAKK). Through the SAKK network, it aims to gather all the clinical and molecular data from oncology patients cared for at the Centre hospitalier universitaire vaudois (CHUV), the University Hospitals of Geneva (HUG), the Inselspital of Bern, the Hospital of Fribourg and in most of the oncology treatment centres in Swiss hospitals. This hospital consortium will allow for a single data collection system, not only on a one-off basis, but also for long-term patient monitoring. Advanced text analysis approaches developed in the HUG will complete this structured data collection. The SAKK will act as an important coordinator with the non-university centres that have agreed to participate in the project.

The role of the SCCL and AGORA
Proximity between researchers and clinicians is an increasingly important parameter for the success of programs such as the RRO and the SPO. The new AGORA cluster, which will house SCCL teams, will therefore play a vital role in the exchange of invaluable information between the various specialists. Samples taken from patients in the CHUV can now immediately be processed in AGORA’s laboratories next door. Hence, the technical problems associated with their preservation can be avoided. In addition, the proximity between clinicians and researchers from the various institutes represented at AGORA ensures that innovation is passed on to patients more quickly.

Prospects for the future
Personalized oncology represents a major breakthrough for our patients. Its development and clinical impact require the setting up of high-quality infrastructure, massive databases and extremely specialized and multidisciplinary expertise for big-data analysis. Thanks to the RRO, all patients in the French-speaking part of Switzerland now have access to academic innovation, while their care continues to be provided by their local healthcare facility. Expansion of the program to the entire country opens up new opportunities to bring the digital revolution to the patient’s bedside all across Switzerland.

Prof. Pierre-Yves Dietrich
Prof. Olivier Michielin
HIGHLIGHTS
IN 2018

Events Organized for the benefit of the ISREC Foundation

June 24, 2018
8th edition of the AGO Trophy

The 8th edition of the AGO Trophy took place on June 24, 2018. This sport event is dedicated to raising funds for the fight against cancer, and its proceeds go the ISREC Foundation and various other associations.

For the 8th consecutive year, more than 50 volunteers contributed to the success of this event in memory of their friend Agostino, who died of cancer. Nearly 200 participants and an equally large audience attended this wonderful event. In 8 years of loyalty to the memory of their friend, more than 63000 Swiss francs have been donated to the ISREC Foundation, a precious contribution that gives our work an additional meaning.

The next edition of the AGO Trophy will take place on June 23, 2019 in St Prex.
The Club Team Girard, consisting of owners, pilots and connoisseurs of old motorcycles, organizes an annual «Oldtimer» event. The first one took place in 1998. In 2018, 130 aficionados of motorcycles and sidecars, most of which were built before 1985, gathered for the 21st edition of this race. The ISREC Foundation is honored to be among the beneficiaries of this event, which, to date, has donated CHF 44 500.– to cancer research.

Many thanks to all who are committed to our Foundation’s cause.
The ISREC Foundation supports PhD students working in the fields of biology and medicine. This funding is possible thanks to two types of grants:

— **Allocated grants**, awarded to top students wishing to enroll in a doctoral program in biology or medicine. They are made possible by donations from physical or moral persons. The Foundation guarantees that the funds are used in full to finance the project to which they have been allocated.

— **ISREC grants** or financial support from the ISREC Foundation for a thesis. These grants are awarded to the best students wishing to enroll in a doctoral program in biology or medicine. They are financed thanks to donations, legacies and successions.

In 2018, the ISREC Foundation supported the PhD work of two students:

**EFE ERDES**  
Lab of Prof. Nathalie Rufer, Oncology Department, CHUV  
*Molecular Mechanisms Regulating TCR Affinity-Improved T Cells for Cancer*  
This « ISREC grant », amounting to CHF 80 000.– per year, was awarded in June 2015 for four years.

**AMÉLIE CACHOT**  
Lab of Prof. Pedro Romero, LICR@UNIL  
*Killer CD4 T Cells: Analysis of a Novel T Cell Candidate for Human Tumor Immunotherapy*  
This « ISREC grant », amounting to CHF 80 000.– per year, was awarded in January 2016 for four years.

All scientific summaries are available online:  
[www.isrec.ch/en/the-research](http://www.isrec.ch/en/the-research)
Translational research projects encourage collaborations involving basic and clinical research. Their goal is to study cells and their interactions with the environment, and to provide impulses for novel therapies and clinical approaches designed to act on the causes of cellular malfunction. Financial support for translational cancer research projects is possible thanks to two different types of subsidies:

— **«ISREC chairs»**
  The purpose of these chairs is to offer young professors affiliated to the EPFL (School of Life Sciences – ISREC) or to a Swiss university (faculty of biology or medicine) the opportunity to launch their research careers. They are financed through the fortune of the Foundation.

— **«Allocated funds»**
  These funds from private donations are specifically created for each project and must solely be used for their predetermined purpose. The Foundation guarantees that donations are used in full to finance the project to which they have been allocated.

In 2018, the following chairs were financed by the ISREC Foundation:

**Decoding the Genetics of Lymphoma for the Development of New Therapies**
This translational oncology chair, endowed with CHF 500,000.– per year, was allocated in November 2014 for a period of six years. It was awarded to the research group of Prof. Elisa Oricchio (EPFL/SV/ISREC).

**Molecular Cancer Immunotherapy and Immune Engineering**
This translational oncology chair, endowed with CHF 500,000.– per year, was allocated in June 2015 for a period of six years. It was awarded to the research group of tenure track Prof. Ping-Chih Ho (UNIL/LUDWIG).
Projects supported in 2018:

**Ex Vivo Analysis of Genomic Instability in Normal and Cancer Cells**
A collaboration between the EPFL and the Geneva University Hospitals. This «allocated fund» from the Fondation de Bienfaisance Pictet and amounting to CHF 100,000.– per year was granted in September 2014 for four years. It was awarded to Prof. Joerg Huelsken (EPFL/SV/ISREC).

**Ovarian Cancer Research – Personalized Cancer Vaccines**
This «allocated fund» from a private donation and amounting to CHF 226,548.– was granted in February 2016 for 24 months. It was awarded to Prof. Lana Kandalaft (CHUV).

**Flash Radiotherapy**
This «allocated fund» derived from a donation of the Biltema Foundation and amounting to € 1,000,000 was granted in July 2016 for three years, for the research performed in the lab of Prof. Jean Bourhis (CHUV/RTH).

**Personalized Immunotherapy**
This «allocated fund» derived from a donation of the Biltema Foundation and amounting to € 2,400,000 was granted in July 2016 for three years, for the research performed in the lab of Prof. George Coukos (CHUV/UNIL/LICR).

**Development of Antibody Therapies for Solid Tumors and Acute Myeloid Leukemia**
This «allocated fund» derived from a donation of the Biltema Foundation and amounting to € 3,300,000 was granted in July 2016 for three years, for the research performed in the lab of Prof. Carl Borrebaek (Lund University, Sweden), in collaboration with the research teams at the LICR Lausanne Branch.

**Breast Cancer**
This «allocated fund» derived from a donation of the Biltema Foundation and amounting to € 900,000 was granted in July 2016 for three years, for the research performed in the labs of Professors Ake Borg (Lund University) and Catherine Brisken (EPFL/SV/ISREC) on the one hand (research on ER+ breast cancer), and the labs of Professors Douglas Hanahan (EPFL/SV/ISREC) and Kristian Pietras (Lund University) on the other hand (research on triple negative breast cancer).

**Immune Engineering**
This «allocated fund» derived from a donation of the Biltema Foundation and amounting to € 1,700,000 was granted in July 2016 for three years, for the research performed in the labs of Professors Matthias Lutolf, Philippe Renaud, Hatice Altug and Harm-Anton Klok (EPFL/IBI), in collaboration with the research teams at the LICR Lausanne Branch.
Immune Engineering: Platform for the Development of T-Cell-Based Immune Therapies
This «allocated fund» derived from a donation of the Biltema Foundation and amounting to €1,170,000 was granted in July 2016 for three years, for the research performed in the lab of Prof. George Coukos (CHUV/UNIL/LICR).

A New Dialogue Between Neutrophils and Tumor Cell Snail Orchestrates Lung Adenocarcinoma Progression
This «allocated fund», amounting to CHF 100,000.–, was granted in January 2018 for 1 year. It was awarded to the research group of Prof. Etienne Meylan (EPFL/SV/ISREC).

A Phase I Clinical Trial Assessing Infusion of Prophylactic Donor CD8-Positive Memory/Effector T Cells into Patients Transplanted with Grafts from Haploidentical Donors after Reduced Intensity Conditioning
This «allocated fund» from the Symphasis charitable umbrella foundation, amounting to CHF 77,000.–, was awarded to Dr. Anne-Claire Mamez from the Geneva University Hospitals in April 2018 for four years.

Results Reported by Patients for the Early Detection of Adverse Effects Linked to the Immune System
This «allocated fund for nursing research», derived from a private donation and amounting to CHF 1,000,000.–, was awarded to Professors Olivier Michielin and Manuela Eicher in November 2018 for 3 years.

Scientific Events
In 2018, the ISREC Foundation supported 10 students participating in the SUR/SRP «Summer Research» program, a collaboration between the UNIL and the EPFL. This summer scientific work placement took place between July 4 and August 29 in the labs of the two institutions. For students, this is a memorable and rewarding experience, which, for some, will have an impact on their future study plans. As for the host labs, they are offered the opportunity to discover brilliant students who might return for a master’s or a PhD degree. Congratulations to all these promising students!

All scientific summaries are available online: www.isrec.ch/en/the-research
The Foundation consists of the following bodies:

THE FOUNDATION COUNCIL
The Foundation Council is the highest managing authority of the Foundation. It allocates resources, appoints its own members, those of the Scientific Board and the Management, as well as the Financial Auditors. It approves the annual budget and the Foundation accounts.

President
Catherine Labouchère
Jurist, delegate of the Canton of Vaud parliament

Members
Yves Henri Bonzon
Head Investment Management CIO and member of the Executive Board, Julius Bär
Franco Cavalli
Representative of the Scientific Board, Scientific Director, IOSI (Istituto Oncologico della Svizzera Italiana, Bellinzona)
Pierre-Marie Glauser
Lawyer and professor of tax law at UNIL (University of Lausanne), associate at Abels Oberson SA
Pierre-François Leyvraz
General Director, CHUV (Centre Hospitalier Universitaire Vaudois)

Prof. Philippe Moreillon
Former Vice-Rector, UNIL (University of Lausanne), professor emeritus
Dr Thomas W. Paulsen
CEO, Chief Financial Officer, Head of Finance and Risk Division, Banque Cantonale Vaudoise, Lausanne
Béatrice Schaad
Director of the Communications Department, CHUV (Centre Hospitalier Universitaire Vaudois)
Prof. Andreas Tobler
Former medical director of the Inselspital in Bern and the Insel Gruppe AG, member of the board of the University Hospital Zurich
Prof. Didier Trono
Full Professor, GHI (Global Health Institute), EPFL (École Polytechnique Fédérale de Lausanne)
THE SCIENTIFIC BOARD
The Scientific Board is composed of experts of international renown in various fields of cancer research. They cannot be a member of the Foundation Council, with the exception of the president of the Scientific Board, by virtue of his position. Assisted by the Scientific Board, the Management selects the research projects to be funded, and presents its proposals to the Foundation Council.

President
Prof. Franco Cavalli
Director, IOSI (Istituto Oncologico della Svizzera Italiana)

Members
Prof. Fabrice André
Research director, responsible for the U981 unit of the INSERM, Associate Professor, Medical Oncology Department, Institut Gustave Roussy, Villejuif, France

Prof. Dr. Michael N. Hall
Professor at the Biozentrum, University of Basel

Prof. Peter Johnson
Professor of medical oncology, Faculty of Medicine, University of Southampton, UK

Prof. Dr. Anne Müller
Associate Professor in experimental medicine, Institute for Molecular Cancer Research, University of Zurich

THE MANAGEMENT
Assisted by the Scientific Board, the Management selects the research projects to be funded. It develops and recommends a fundraising strategy and performs the tasks defined by the Foundation Council.

Director
Prof. Francis-Luc Perret

Managing Director
Aylin Niederberger

THE FINANCIAL AUDITORS
The financial auditors, whose tasks are determined by law, are nominated by the Foundation Council. They are elected for one year. The 2018 mandate was entrusted to Ernst & Young SA in Lausanne, a fiduciary company recognized by the Swiss Institute of Certified Accountants and Tax Consultants.
Since 1964, numerous donors have supported our cause through their gifts, subsidies or legacies and have contributed to the progress of cancer research. We are very grateful and thank each one of them most warmly.
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