



A biological bank of liver samples and related information intended for hepatocellular carcinoma research

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Objectives

- Liver disease in Saudi Arabia
- Liver Disease Research Center mission and outcomes
- Establishment of a Liver Disease Biobank
- CAISIS Data Management Registry
- Quality Assurance controls of biospecimen collected

Background



- Liver disease is a major medical problem in Saudi Arabia
- 7% of Saudi children have HBsAg (before vaccine program)
- 2% have Hepatitis C
- HCC is the most common cancer in Saudi men
- Nonalcoholic fatty liver disease (NAFLD) is currently the most common form of chronic liver disease
- 20% of Saudis have diabetes

25% of Saudis are obese



KSU Liver Disease Research Center



• An effective research infrastructure for liver disease research in Saudi Arabia.

LDRC Objectives

- To engage in high quality basic and clinical research to improve our understanding of the pathology, diagnosis, and management of liver diseases
- To perform basic science research in the field of virology, genetics, and proteomics of liver diseases
- To promote the culture of clinician scientists

To build a Biobank and a clinical registry

Collaborations

- McGill University, Canada
- University of Calgary, Canada
- National Liver Institute, Egypt



Overall Design



*Biobank Resource Center documentation templates

Blood Processing



Biospecimens



*Buffy coat; **Whatman FTA Elute card;

Quality Assurance End Products

Traceability

- Creation of Worksheet system
 - 15 worksheets that record every step and log the materials used
 - W1 Informed consent signature
 - W2 Questionnaire administration
 - W3 Blood collection
 - W4 Blood reception
 - W5A Blood processing
 - W5B Blood processing
 - W6 Blood storage
 - W7 Urine collection

- W8 Urine processing
- W9 Urine storage
- W10 tissue collection
- W11 tissue reception
- W12 tissue freezing
- W13 Storing tissue
- W14 Stool collection
- W15 Stool storage
- W0 Data entry (collection; verification of all worksheets for each specific case)

Quality Assurance End Products

	DISEASE hCenter	يحو لا لكبد	مرکز أبحاث ا
	PAR	TICIPANT FILE	
W1 - COI	NSENT FORM	SIGNATURE	WORKSHEET
Identification	FLS1P00) V0 -CSF1	
Information on the	administration of th	e Consent form	
Signature Date:	// dd / mm / yyyy	Signature time :	:_ □ AM (hr) (min) □ PM
Consent form versi	on: □ English □ Arabic		
Revised date:	/// dd / mm / yyy	y	
□ I confirm that the id	dentity of the participa	ant has been verifie	d
Effective Date: 22/01/2009 (dd/mm/yyyy)	Worksh Cc	eet system v1.4 onfidential	Initials Replace: 29/11/2006 Page 1/18

Quality Assurance End Products





PARTICIPANT FILE

W4 - BLOOD RECEIPT WORKSHEET

Receipt

Date:/_/	At:	; (h.s)	□ AM	
da / mm / yyyy		(nr) (min)		

□ Serum tubes were kept at room temperature for 1 hour

□ PAXgene tube were kept at room temperature for 2 hours

Type <mark>of tu</mark> be	Time at refrigeration	Number of tubes received
SERUM (Red)		Tube 1ml Tube 2ml Tube 3ml
PAXgene (Brown)	(hr) (min)	u Tube 1 ml
EDTA (Lavender)	(hr) (min)	Tube 1ml Tube 2ml Tube 3ml

Non-alcoholic fatty liver disease (NAFLD)

1. The Effects of Bariatric Surgery on Non-alcoholic Fatty Liver Diseases

2. Prevalence of Non-Alcoholic Fatty Liver Disease in Patients with Gallstone Disease

Biospecimen collected from NAFLD

SUMMARY	Total Banked Specimens
PARTICIPANTS	403
BLOOD	325
PAXgene	145
LIVER TISSUE	245
Subcutaneous fat, Visceral fat and Abdominal muscle	79

Tissue Processing









Other Samples

- **LDRC** biobank samples :
- HCV= 949 blood samples, no liver tissue
- HBV= 1904 blood samples, no liver tissue
- HCC= 341 blood samples, 7 primary liver neoplastic tissue

The BiobankResource Center



Office of Biobank Education and Research CANADIAN TUMOUR REPOSITORY NETWORK RÉSEAU CANADIEN DE BANQUE DE TUMEURS



RE: COMPLETION OF BIOBANK CERTIFICATION

May 23, 2014 Liver Disease Research Center Reg. # BRC-00013

Dear LDRC Biobank,

Please accept this letter as documentation that you have completed all of the requirements of the UBC Office of Biobank Education and Research Biobank Certification Program.

CAISIS LOG IN SCREEN



HOME SCREEN



eCRF

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	Weight (kg) BMI (kg/m2) Hip (cm) Blood Pressure	Height (cm) Waist (cm) Waist-Hip Ratio:	Neck (cm) RR		HR (bmp) Temperature						

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Specimens	Collections	Transfers	Manage Storage			





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Specimen Accessio	ns for MMW MM	ИW			6
Collection Date	27/08/2012			Blood Collection Location Phlebotomy Lab	
	27/08/2012			Method of Collection	
Collection Time	14:00			Time Received in Lab	
Received Condition	Fridge	v		RED TOP Clotted Tubes 2	
# EDTA Tubes	1			YELLOW TOP Gel Tubes	
Date Frozen	29/08/2012 00	:00:1		Other Tube Type PAXgene	
Time Frozen	15:20			# Other Tubes	
Institution	ККИН				
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Specimens (8)

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New

Edit

return 🜔

Entered By: ozinalabdin @ 31/12/2014 05:46:43 Updated By: ozinalabdin @ 31/12/2014 05:54:00 Locked By:

Phase II – Quality Control

• The LDRC Biobank should be confident that it is providing nucleic acids that is suitable for meaningful gene expression data.

Blood RNA: Quality Assessment

- Agilent 2200 TapeStation system
- For RNA quality analysis RIN equivalent (RINe) is indicated



Quality of frozen tissue

• A quality score based on "Collection time" is applied to categorize one scale of tissue biospecimen quality

Research Needs



"Who ever has the biologic material will drive the discoveries"







Special thanks to our team at the LDRC family!

- Dr. Ayman Abdo
- Dr. Mazen Hassanain
- Dr. Anthoula Lazaris
- Dr. Peter Metrakos
- Dr. Walid AlHamoudi
- Dr. Khaled AlSwat
- Dr. Faisal AlSaif
- Dr. Kinjal Vora
- Dr. Nehad AlAjez
- Esther Robles







The best is yet to come.