Minutes for Joint Meeting Cancer Research KI's Executive Board

Wedesday May 27th, 2026, 15-17 online

(IP= information point, D=discussion point, DP=Decision point, A=Attached document)

Board members	Chair and Director **Elias Arnér**, Department of Medical Biochemistry and Biophysics Co-Director **Marco Gerling,** Department of Clinical Science, Intervention and Technology – CLINTEC Co-Director **Anna Nilsson**, Department of Women's and Children's Health **Simon Ekman,** Department of Oncology-Pathology **Andri Papakonstantinou,** Department of Oncology-Pathology **Margareta Wilhelm,** Department of Microbiology, Tumor and Cell Biology **Renske Altena**, Department of Oncology-Pathology **Matthias Löhr**, Department of Clinical Science, Intervention and Technology **Keith Humphreys,** Department of Medical Epidemiology and Biostatistics **Ninib Baryawno**, Department of Women's and Children's Health **Dhifaf Sarhan,** Department of Laboratory medicine **Theodoros Foukakis,** Department of Oncology-Pathology **Magnus Nilsson,** Department of Clinical Science, Intervention and Technology **Eva Jolly,** Karolinska Comprehensive Cancer Centre coordinator **Patrik Rossi,** Managing Director, Cancer Theme Karolinska University. **Lise-lott Eriksson**, Chair of the Blood Cancer Forum, Patient Group **João Pedro Alves-Lopes**, Department of Women's and Children's Health, Junior faculty representative **Sara Abu Ajamieh**, PhD student representative, Department of Women's and Children's Health **Liselotte Bäckdahl,** Department of Medical Biochemistry and Biophysics **Stefina Milanova**, Department of Medical Biochemistry and Biophysics **Pablo Martí Andrés**, Department of Medical Biochemistry and Biophysics
Invited Guests	
Not present	**Päivi Östling**, Department of Oncology-Pathology, SciLifeLab **Joakim Dillner** Department of Clinical Science, Intervention and Technology, Cancer Prevention Europe. **Lena Sharp**, RCC Stockholm-Gotland

1) Welcome to the EB meeting and approval of minutes from the previous CRKI Executive Board meeting 2026-04-14(A) (E. Arnér, 2 min) DP

   Elias Arnér welcomed the Board and briefly reviewed the minutes from the previous meeting. Elias reminded the Board that the heads of the KI SFOs had jointly written to the Faculty Board roughly two weeks earlier, requesting clarity on how the 20% of SFO budgets allocated to infrastructure is actually spent. No response had yet been received; this topic will be followed up after the summer.

   The minutes of the previous meeting were **approved** as circulated.

2) Decision KI-Mayo Pilot Collaboration grant 2026 (E. Arnér, 3 min) DP

Elias Arnér updated the Board on the Mayo Clinic Comprehensive Cancer Center collaboration, which comprises two components:

- **Synergy grant:** Still delayed due to internal processes at Mayo, not on the KI side. Mayo confirmed it wishes to continue with the synergy grant application, but a further update will only be possible after the summer.
- **PI-to-PI collaboration grants:** Nine applications were received this year (compared with 14 the previous year; the shorter application window this year, due to a delayed call announcement, may partly explain the lower number). As in previous years, up to three grants could be awarded. KI used three senior generalist reviewers to assess all applications, while Mayo used field-specific reviewers for each application; the combined grading was then discussed by an executive group (Elias Arnér, Ninib Baryawno, Anna Nilsson, and Marco Gerling from the KI side, with four to five representatives from Mayo). Two applications were clearly top-ranked by both KI and Mayo reviewers and were recommended for funding. After extended discussion of the remaining applications, the group decided not to fund a third grant this round.

The two funded PI-to-PI collaboration grants will be publicly announced at the KI–Mayo Cancer Online Symposium on June 17.

Decision: The Board approved funding two PI-to-PI collaboration grants for this cycle, as recommended by the joint KI–Mayo review process.

3) Decision new guidelines for Blue Sky grant 2026 call, (D. Sarhan and N. Baryawno,10 min) DP

Dhifaf Sarhan and Ninib Baryawno presented proposed revisions to the Blue Sky grant guidelines, prompted by the fact that all recipients of the previous round's Blue Sky grants — and all of the top 12 applicants — were male. The Research Working Group, in consultation with the Reference Group and external reviewers, developed the following recommendations:

- **Career-stage limitation (decision point):** Limit eligibility to researchers within 15 years of their doctoral defense, applicable specifically for this year's call. The rationale is twofold: more senior researchers, including well-established professors, typically have greater access to other funding sources, and male applicants are disproportionately represented among more senior researchers. Restricting the window is intended to increase the proportion of female applicants and to prioritize researchers in the consolidation phase of their careers. This should be clearly explained in the call text.
- **Language changes:** Replace "excellence" and "high risk, high gain" with more inclusive language such as "ambitious," "exploratory," and "innovative," based on research suggesting this phrasing encourages more female applicants. The Board noted the language should still convey that the funded work should go beyond what regular funding mechanisms would typically support.

- **Gender-reflection requirement:** Following the model used for the Translational Seed grant (which achieved a 50/50 distribution of applicants and awardees), require applicants to reflect on gender perspective in both their team composition and their research samples.
- **Structured application sections:** Add specific sections asking applicants to describe both the optimal outcome of the project and the specific risks involved, addressing feedback from reviewers that many applications — across genders — lacked this reflection.
- **Deductible time for parental/other leave:** The Board discussed whether to include deductible time (e.g., for parental leave) in eligibility calculations, drawing on precedents from other funders (e.g., ERC guidelines) rather than creating a new KI-specific rule. It was agreed the Working Group should look into existing models and adapt accordingly, ensuring provisions apply fairly to both male and female applicants.
- **Bias mitigation in review:** The Reference Group also suggested reviewing KI's bias-assessment/PRISMA guidance, and Liselotte Bäckdahl agreed to investigate whether reviewers could assess research proposals before seeing applicant CVs, to reduce bias toward more senior applicants.

Decision: The Board approved the proposed changes to the Blue Sky grant call guidelines for 2026, including the 15-year post-defense eligibility window (for this year's call only), updated language, the gender-reflection requirement, and the new structured application sections. The Working Group was asked to ensure that reviewer instructions are revised in parallel and remain fully consistent with the revised call text.

4) Decision CRKI supports up to 5 Industry intern-ships for postdocs and PhD students (S. Ekman 10 min) DP

Simon Ekman presented a proposal, developed within the Industry Collaboration Working Group, to support cancer-specific industry internships, building on KI's existing Career Service internship program (established over 20 years ago). Since 2012, more than 500 researchers have participated in these internships, with roughly one-third leading to direct employment. The Career Service currently runs two calls per year for PhD students (20 placements per call) and two calls per year for postdocs (10–15 placements per call). Over 2017–2025, 257 projects have been matched, including 62 last year alone (40 PhD students, 21 postdocs), across a broad range of biotech and pharma companies.

The proposal is for CRKI to fund five cancer-specific internships in addition to the existing program:

- Two one-month PhD student internships at 64,000 SEK each
- Three three-month postdoc internships, totaling 750,000 SEK

Total proposed cost: 878,000 SEK

The Board expressed support for the proposed internship initiative while emphasizing the importance of ensuring that any funded placements are genuinely additional to existing Career Service internships rather than replacing them. Members also highlighted the need for appropriate oversight to confirm the cancer relevance of proposed projects, preferably through review by the relevant working group before final selections are made.

Questions were raised regarding the proposed allocation of placements between PhD students and postdoctoral researchers. It was noted that demand for internships has historically been greater among PhD students and that placement preferences are often determined by host companies rather than by the university. The Board also discussed the proposed budget, acknowledging that the requested funding represents a substantial investment and noting that a more limited initial commitment could be considered if deemed appropriate.

Agreed process: The KI Career Service will continue to administer and match the internships operationally. The CRKI Industry Collaboration Working Group will review candidates and select which projects/researchers to fund from within the cancer-relevant pool, given the significant budget involved, and bring their recommendation to the Executive Board for final decision on funding and the balance between PhD students and postdocs.

Decision: The Board approved CRKI's support for up to five additional industry internships for postdocs and PhD students, contingent on final selection criteria and candidate review being carried out by the Working Group and brought back to the EB for final funding decisions.

5) Update Education working group for Karolinska CCC led by CRKI WG2 (M, Gerling, A. Nilsson, 10 min) D

Marco Gerling presented results from a nine-question survey sent to a broad, representative group of educators and program leaders (responsible at program level, course level, or for research/development), of whom 13–15 responded. Key themes from the responses included:

- **Fragmentation:** Education is currently coordinated separately along molecular/epidemiology tracks and is poorly integrated with the medical program; there is a strong administrative divide between KI and the hospital side.
- **Content priorities:** Respondents highlighted the need for greater focus on molecular oncology and precision medicine (for both clinicians and researchers), AI/data science, and prevention/lifestyle factors, all currently underrepresented.
- **International models:** Two reference models were cited — the Gustave Roussy education program in Paris, and the Clinician Scientist Program originating in Berlin (now implemented across Germany, including Heidelberg), which structures residency time between clinical and basic research.
- **Interprofessional learning:** Strong support for mixing specialist trainees, nurses, and basic researchers, and for peer learning between clinical and basic-science PhD students.
- **Structure:** Respondents favored a small, dedicated leadership group with broad networks and cross-professional awareness, rather than one representative per

profession, along with clearly defined, paid time for educational leadership roles at the program level.

- **Concrete year-one suggestions:** An international research school; a broadened joint course on targeted therapy; an event connecting pediatric oncology, oncology, and basic research trainees ("young adults with cancer"); and an education portal/branding effort.

Additional comments emphasized that educational leaders should remain active in research, that clinicians' time for this work must be recognized in scheduling and career progression, and that "benign" as well as malignant disease education should eventually be considered.

Proposed structure: Two co-leads sharing responsibility — one with a clearer KI affiliation, one with a clearer hospital affiliation (initially Karolinska University Hospital) — supported by a group of four to six members, with representation weighted toward more junior staff, to be further specified.

The Board welcomed the initiative and emphasized the importance of strong engagement from both the hospital and research communities. Members highlighted the need for an experienced hospital-based coordinator who can actively promote the program through established clinical channels rather than serving solely in an advisory capacity. At the same time, it was noted that the current framing places considerable emphasis on the clinical perspective, and that the benefits for experimental and tumor biology researchers should be articulated more clearly, particularly given the differing time commitments and working conditions of these groups.

The discussion also underscored the value of bidirectional translational learning, with potential benefits including improved interpretation of molecular and genomic data, greater interaction between clinical and basic researchers, and opportunities for collaborative grant writing. Members noted that the initiative could provide valuable professional development opportunities for pre-clinical researchers through teaching and engagement in clinical environments. Positive experiences from integrating basic science trainees into clinical multidisciplinary forums were cited as evidence of the potential to foster deeper collaboration and generate new research connections. Drawing on previous successful joint educational initiatives, the Board further noted that a targeted approach to integrating clinical and research-focused activities is likely to be more effective than a broad, large-scale effort.

Decision: The Board agreed that Marco Gerling and Anna Nilsson, together with Margareta Wilhelm (as current lead of the Education Working Group), will continue developing a concrete proposal — covering the group's name, mandate, and terms of reference — for a decision at the first EB meeting after the summer. Eva Jolly requested that this proposal also clarify how the group will formally connect and report to the Karolinska CCC Board of Directors, consistent with the CCC improvement plan; the Board agreed this should be addressed as part of the after-summer decision.

6) DKFZ Fontana Seed Fund Collaboration challenge (E. Arnér, 5 min) IP

Elias Arnér reminded the Board of an initiative discussed at the last strategy meeting: DKFZ Heidelberg has funding to support a retreat where early-career clinical scientists and PhD students from partner institutions (KI, NKI, and other cancer centers) develop collaborative project proposals, with successful projects eligible for grants of up to 100,000 SEK (roughly 20,000 EUR), funded by the applicant's home institution.

CRKI had initially offered to fund up to three grants (with Karolinska University Hospital funding grants for clinician awardees), for a combined KI/hospital total of six. DKFZ requested that no single partner fund more than others, and the final agreement settled on two grants funded jointly by KI and the hospital (Karolinska as a combined entity).

As of the meeting, no applications had yet been received from KI, though the call will remain open for about 10 more days. The internal review process was clarified: Anna Nilsson and Marco Gerling will conduct the first-round review at KI; the final selection is expected to involve external reviewers (not from KI or Heidelberg), as this is being run as a pilot to test feasibility. Anna Nilsson and Marco Gerling will report back to the Board once applications have been reviewed.

7) Summary Strategy discussion (E. Arnér, 8 min) D

Elias Arnér reminded the Board of the strategy discussion held at the previous meeting, documented in a detailed written summary and an accompanying PowerPoint circulated with the agenda.

Given time constraints, the discussion focused on one key theme: **budget allocation**. Approximately 70% of the CRKI budget currently goes to grants, with the remainder covering education, retreats, and infrastructure activities. Some Mentimeter feedback suggested shifting more budget toward infrastructure and away from research grants. Elias noted that, as with education, infrastructure support is currently fragmented and could be improved, but cautioned that CRKI's annual budget (~20 million SEK) is small relative to KI's central infrastructure board (~1 billion SEK/year) and SciLifeLab (several billion SEK/year), making it unrealistic for CRKI to meaningfully address infrastructure funding gaps directly. Instead, CRKI's role should focus on strengthening the use of existing infrastructure through targeted activities.

Elias concluded that current CRKI activities remain broadly aligned with the Reference Group's and EB's prior strategic discussions, and specifically noted that three decisions taken at this meeting — the industry internships, the Blue Sky grant changes, and the Fontana Seed Fund Collaboration challenge — are all consistent with the agreed strategy.

Dhifaf Sarhan noted that frustration around KI's infrastructure often stems from difficulty accessing or navigating existing resources, and suggested CRKI could play a valuable role as a liaison connecting researchers with infrastructure groups at KI and SciLifeLab, and advocate for CRKI's inclusion in infrastructure planning discussions. Elias Arnér agreed, noting that Karin Dalman-Wright and Lars Holmgren had been invited to the PI retreat for this purpose, though

the resulting discussion had not been especially constructive; continued engagement was agreed to be important.

No further comments were raised.

8) Karolinska Comprehensive Cancer Center update (E. Jolly, 10 min) IP

Eva Jolly provided an update covering:

- **Board of Directors:** Pernilla Lagergren has joined as a new member, responsible for nursing and healthcare science within the cancer theme, replacing Yvonne Wengström.
- **OECI accreditation follow-up:** The one-year follow-up report is in progress; formal follow-up occurs annually thereafter for the duration of the accreditation. Ongoing improvement areas include education (addressed under item 5), clinical care quality processes, patient involvement, and pathology waiting times. A research-strategy section of the report is still pending input from CRKI.
- **Regional network:** A Stockholm-Gotland CCC network application has been submitted to OECI for accreditation and has received approval to proceed. Data-gathering from hospitals and university partners will continue over the summer.
- **National level:** The national collaborative group on cancer (in which Patrik Rossi represents the CCC Network across Sweden) is preparing its first report to the Ministry, due in September, focusing on precision medicine implementation, clinical trials, and standardized patient pathways. The Swedish Cancer Medicine Hub was launched on April 21; substantive work begins with a first workshop in September.
- **International networks:** The Nordic-Baltic CCC network remains active, including efforts to build infrastructure links with Baltic partners, notably in pediatric oncology multidisciplinary tumor boards.
- **EU-level projects:** Various Horizon Europe cancer mission projects are ongoing or in preparation. Future funding under the EU4Health program beyond 2027 remains uncertain pending the next Multiannual Financial Framework negotiations. A joint action on ionizing radiation/image-guided radiotherapy, with Karolinska CCC participation, begins in October.

Due to time constraints, several slides were not presented in detail and will be included as part of the circulated materials.

9) Cancer Research KI organization: IP

All WG leaders, update on working group progress (3 min each, 18 min total) IP

- WG1 Research (D. Sarhan or N. Baryawno)
  In addition to the Blue Sky grant discussion (see item 3), planning for the annual retreat is progressing well. Three junior invited speakers have been confirmed; of four invited

senior speakers, none have yet responded, and alternative candidates will be considered from June 1 if no response is received. The group is leaning toward including nationally recognized speakers (not exclusively KI-affiliated), with a preliminary shortlist prioritizing KI candidates plus possibly one speaker each from Uppsala and Lund. Elias Arnér suggested considering the scientific director of NIO, given the recent MOU extension. A new breakout session, "Challenges in Cancer Treatment – What Are We Doing Wrong?" (a panel discussion), is planned; suggestions for panelists (researchers or policymakers) are welcome. The retreat registration is already fully booked with a waiting list.

- WG2 Education (M. Wilhelm)
  Enrollment is underway for the fall courses. The IPSCC conference takes place next week; an update will follow. (See item 5 for the broader working group expansion discussion.)

- WG3 Outreach (A. Papakonstantinou)
  A patient workshop on quality of life while living with cancer was held in April and was well received; the recording is available online, as is last year's "En dag för Cancerforskning" recording. Planning for this year's event is progressing, with a confirmed moderator, Sofia Wistam (TV/radio host), and several confirmed speakers. Early planning has also begun for an October workshop. All recordings are now available on the website, which has become one of the most visited sections of the KI webpage.

- WG4 Precision Cancer Medicine (P. Östling)
  Not present; update postponed to the next meeting.

- WG5 Industrial Collaboration (S. Ekman)
  A well-attended seminar on industry collaboration was held for the first time in Huddinge- A further seminar on radiotherapy is planned for the autumn. The group's strategy will be revised, as some original goals have proven difficult to reach. Julie Bianchi (SciLifeLab) will join the group; Jeffrey Yachnin, currently semi-retiring, will gradually be replaced, with Tomas Bexelius proposed as a new member.

- CPE Cancer Prevention Europe (J. Dillner)
  Not present; no update given.

10) Cancer Research KI administration update (L. Bäckdahl, S. Milanova, P. Martí Andrés, 5 min)

Stefina Milanova and Pablo Martí Andrés presented website and KI Play channel statistics for the past year (since August 2025):

- The **CRKI website** has seen a significant increase in unique visitors; the most-visited pages include the homepage, the "En dag för Cancerforskning" event page, PI retreat information, grant announcement pages, and the PI database.
- The **KI Play video channel** has been running for one year, with 5,775 views across 29 published videos, totaling 6,297 minutes (approximately 105 hours) viewed. Content is subtitled in its original language (a KI accessibility requirement); Swedish-language videos have increasingly been given English subtitles, which has measurably increased viewership, including international viewers from 54 countries — notably including interest from Gustave Roussy in Paris, who reached out about replicating the "En dag för Cancerforskningen" format.

Elias Arnér thanked the team for the impact of the website and noted the importance of keeping it updated going forward.

11) Cancer Research KI Upcoming events:

a. Workshop with Radiumhemmets forskningsfonder 4 June.
b. CRKI-Mayo CCC online Symposium 17 june.
c. Djurönäset annual retreat, 28-29 September.
d. Webinar: En dag för Cancerforskningen, 19th November

12) Any other issue?

The possibility of promoting donations for cancer research (e.g., via "En dag för Cancerforskning" or other events) was raised, noting that KI's development office had expressed openness in discussing options such as including a donation-related slide during event breaks. Elias Arnér noted the development office generally prefers to keep donation messaging centralized through their own channels, but agreed that CRKI events could refer attendees to the development office, and welcomed further discussion given the office's openness.

13) End of meeting

The meeting closed at 17:01.