# Blood transfusion reduction with intravenous iron in gynaecological cancer patients receiving chemotherapy

Submission date	Recruitment status	Prospectively registered
22/09/2009	No longer recruiting	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
01/10/2009	Completed	Results
Last Edited	Condition category	Individual participant data
12/09/2011	Cancer	Record updated in last year

# **Plain English summary of protocol**Not provided at time of registration

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# **Contact information**

# Type(s)

Scientific

### Contact name

Dr Tarinee Manchana

### Contact details

1873 Rama IV, Patumwan Bangkok Thailand 10330

# Additional identifiers

**Protocol serial number** N/A

# Study information

### Scientific Title

Blood transfusion reduction with intravenous iron in gynaecological cancer patients receiving chemotherapy: a randomised controlled trial

# Study objectives

Chemotherapy-induced anaemia is common in gynaecological cancer patients. Blood transfusion is the main treatment for this, however it has some serious adverse events. Most of the patients who have had a blood transfusion for chemotherapy-induced anaemia continue to require transfusions in the consecutive cycles.

This randomised controlled trial is aimed at exploring whether intravenous iron could reduce the need for blood transfusions in anaemic gynaecological cancer patients receiving platinum-based chemotherapy.

# Ethics approval required

Old ethics approval format

# Ethics approval(s)

Ethics Committee of Chulalongkorn University approved on the 28th August 2008 (ref: 237/51)

# Study design

Randomised controlled trial

# Primary study design

Interventional

# Study type(s)

Treatment

# Health condition(s) or problem(s) studied

Chemotherapy-induced anaemia

## **Interventions**

Study group: Iron sucrose 200 mg intravenous drip over 30 minutes as a single dose Control group: Ferrous sulphate 200 mg oral three times a day until the next cycle of chemotherapy

Patients will be contacted every week for monitoring of their complete blood count until the next cycle of chemotherapy (3 - 4 weeks depending on the chemotherapy regimen).

# Intervention Type

Drug

### Phase

Not Applicable

# Drug/device/biological/vaccine name(s)

Intravenous iron

# Primary outcome(s)

The incidence of blood transfusion at the consecutive cycle of chemotherapy between oral and intravenous iron, measured at the time of next cycle of chemotherapy (3 - 4 weeks depending on the chemotherapy regimen).

# Key secondary outcome(s))

In both groups, assessed at the next cycle of chemotherapy (3 - 4 weeks depended on the chemotherapy regimen):

- 1. Haemoglobin and haematocrit increment
- 2. Number of blood transfusion units
- 3. Adverse events
- 4. Quality of life (QOL), also measured before treatment

# Completion date

31/07/2009

# **Eligibility**

# Key inclusion criteria

- 1. Female participants aged 20 65 years
- 2. Normal liver function
- 3. Normal kidney function
- 4. No prior radiotherapy or having received radiotherapy
- 5. At least one remaining cycle of chemotherapy

# Participant type(s)

**Patient** 

# Healthy volunteers allowed

No

# Age group

Adult

### Sex

Female

# Key exclusion criteria

- 1. Iron hypersensitivity
- 2. Risk of iron overload such as chronic renal failure or thalassaemia major
- 3. Progressive disease
- 4. Bone marrow metastasis
- 5. Inability to monitor weekly complete blood counts

# Date of first enrolment

31/08/2008

# Date of final enrolment

31/07/2009

# Locations

# Countries of recruitment

Thailand

Study participating centre 1873 Rama IV, Patumwan Bangkok Thailand 10330

# Sponsor information

# Organisation

Chulalongkorn University (Thailand)

### **ROR**

https://ror.org/028wp3y58

# Funder(s)

# Funder type

University/education

# Funder Name

Chulalongkorn University (Thailand) - Department of Obstetrics and Gynaecology, Faculty of Medicine

# **Results and Publications**

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not provided at time of registration

# Study outputs

Output type Details Date created Date added Peer reviewed? Patient-facing?

Yes

Participant information sheet
Participant information sheet
11/11/2025 11/11/2025 No