Endoscopic versus surgical drainage of the pancreatic duct in chronic pancreatitis: a prospective randomised trial

Recruitment status	Prospectively registered
No longer recruiting	Protocol
Overall study status	Statistical analysis plan
Completed	[X] Results
Condition category Digestive System	[] Individual participant data
	No longer recruiting Overall study status Completed

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N/A

Study information

Scientific Title

Acronym

CEPAN

Study objectives

To compare endoscopic and surgical drainage of the pancreatic duct.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval received from the local medical ethics committee

Study design

Randomised, active controlled, parallel group trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Chronic pancreatitis (CP)

Interventions

- 1. Surgical drainage: pancreaticojejunostomy
- 2. Endoscopic drainage: extracorporeal shock wave lithotripsy (ESWL) and/or pancreatic stenting

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

Mean Izbicki pain score during follow-up

Secondary outcome measures

Clinical success:

- 1. Pain relief at end of FU
- 2. Complete (Izbicki pain score less than or equal to 10)
- 3. Partial (greater than 50% decrease, total score greater than 10)
- 4. Morbidity and mortality rate
- 5. Intervention rate
- 6. Hospital stay
- 7. Development of endo- and/or exocrine pancreatic insufficiency

Overall study start date

01/01/2000

Completion date

01/10/2004

Eligibility

Key inclusion criteria

- 1. A diagnosis of CP, based on clinical symptoms in combination with morphological changes established by imaging studies (calcifications or ductal changes) and/or pancreatic functional insufficiency
- 2. A dominant obstruction of the pancreatic duct, demonstrated by presence of a stenosis and /or intraductal stones on magnetic resonance cholangiopancreatography (MRCP) and abdominal computed tomography (CT) scan, located left from the spine, with pre-stenotic ductal dilatation of at least 5 mm
- 3. Severe recurrent pancreatic pain with insufficient relieve by non-narcotic analgesics or requiring opiates

Participant type(s)

Patient

Age group

Adult

Sex

Not Specified

Target number of participants

39

Key exclusion criteria

- 1. Age below 18 or over 80 years
- 2. Pancreatic head enlargement greater than 4 cm
- 3. Contra-indication for surgery; American Society of Anaesthesiologists (ASA) class 4, severe portal hypertension
- 4. Contra-indications for endoscopy: gastrectomy with Billroth II reconstruction, other pancreatitis related complications (bile duct stricture, pseudocyst) requiring surgery
- 5. Previous pancreatic surgery
- 6. Suspected pancreatic malignancy

- 7. Limited life expectancy (less than 2 years)
- 8. Pregnancy

Date of first enrolment

01/01/2000

Date of final enrolment

01/10/2004

Locations

Countries of recruitment

Netherlands

Study participating centre Academic Medical Center

Amsterdam Netherlands 1105 AZ

Sponsor information

Organisation

Academic Medical Centre (AMC) (Netherlands)

Sponsor details

Meibergdreef 9 Amsterdam Netherlands 1105 AZ

Sponsor type

University/education

Website

http://www.amc.uva.nl/

ROR

https://ror.org/03t4gr691

Funder(s)

Funder type

Funder Name

AstraZeneca (The Netherlands) - unrestricted grant

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

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?
Results article	Results	15/02/2007		Yes	No