

# Gemcitabine and Docetaxel versus Doxorubicin as first line treatment in previously untreated advanced unresectable or metastatic soft tissue Sarcomas

<b>Submission date</b> 29/07/2009	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 11/09/2009	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 24/01/2022	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

<http://www.cancerhelp.org.uk/trials/a-trial-comparing-gemcitabine-docetaxel-with-doxorubicin-soft-tissue-sarcomas-geddis>

## Contact information

### Type(s)

Scientific

### Contact name

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## Additional identifiers

### Protocol serial number

UCL 09/0060

# Study information

## Scientific Title

A prospective randomised controlled phase III trial of gemcitabine and docetaxel compared with doxorubicin as first line treatment in previously untreated advanced unresectable or metastatic soft tissue sarcomas

## Acronym

GeDDiS

## Study objectives

The proposed study aims to determine whether the combination of gemcitabine and docetaxel is associated with an improved clinical outcome compared with single agent doxorubicin.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Central London REC 2, Royal Free Hospital, London, 11/08/2010, ref: 10/H0713/54

## Study design

Randomised controlled phase III multi-national trial

## Primary study design

Interventional

## Study type(s)

Treatment

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

Soft tissue sarcomas

## Interventions

Standard arm: doxorubicin 75 mg/m<sup>2</sup> day 1 every three weeks for up to 6 cycles.

Experimental arm: gemcitabine 675 mg/m<sup>2</sup> days 1 and 8, docetaxel 75 mg/m<sup>2</sup> day 8 every three weeks for up to 6 cycles with granulocyte-colony stimulating factor (GCSF) support days 8 - 15.

Both arms consist of six, three weekly cycles, a total of 18 weeks of treatment. Following treatment, patients will be followed up two monthly with clinical evaluation and scanning until disease progression, or death.

## Intervention Type

Drug

## Phase

Phase III

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

Gemcitabine, docetaxel, doxorubicin

### **Primary outcome(s)**

Progression-free survival, assessed using the RECIST Criteria every six weeks (after each set of two cycles); following treatment assessment will be 2-monthly.

### **Key secondary outcome(s)**

1. Overall survival, time to progression and objective response rate assessed using the RECIST Criteria every six weeks (after each set of two cycles); following treatment assessment will be 2-monthly
2. Toxicity, continuously assessed and recorded using the NCI Common Terminology Criteria for Adverse Events v4.0
3. Quality of life, measured using the EORTC QLQ C30 for patients aged 16 years and greater and the PEDQOL questionnaire for patients aged less than 15 years. The EQ5D will also be used for health economic evaluation. Measured at baseline, prior to cycle 3 (6 weeks), prior to cycle 6 (15 weeks) and six weeks after the completion of treatment.

### **Completion date**

01/01/2013

## **Eligibility**

### **Key inclusion criteria**

1. Locally advanced or metastatic soft tissue sarcoma, incurable by surgery or radiotherapy
2. Evidence of disease progression in the 6 weeks prior to trial entry
3. No prior chemotherapy regimen for advanced or metastatic disease; (neo)adjuvant therapy is allowed
4. World Health Organization (WHO) performance status 0 - 2
5. Aged greater or equal to 13 years, either sex
6. Histologically confirmed soft tissue sarcoma excluding: alveolar soft part sarcoma, gastrointestinal stromal tumour, Ewing's sarcoma family of tumours, rhabdomyosarcoma
7. Desmoplastic small round cell tumour, extra-skeletal myxoid chondrosarcoma
8. Histological material available for central review
9. Measurable disease evaluable by Response Evaluation Criteria In Solid Tumours (RECIST) criteria
10. Life expectancy of at least 3 months
11. Adequate organ function:
  - 11.1. Neutrophils greater than 1.5
  - 11.2. Platelets greater than 100
  - 11.3. Bilirubin less than or equal to 1.5 x upper limit of normal (ULN)
  - 11.4. Aspartate aminotransferase (AST) less than or equal to 3 x ULN
  - 11.5. Serum creatinine less than or equal to 1.5 x ULN; measured creatinine clearance greater or equal to 50 ml/min
12. Ejection fraction as assessed by multiple-gated acquisition scan (MUGA) or echocardiogram (ECHO) greater than or equal to 50%

### **Participant type(s)**

Patient

### **Healthy volunteers allowed**

No

**Age group**

Mixed

**Sex**

All

**Key exclusion criteria**

1. Known active central nervous system (CNS) metastases
2. Grade 3 or 4 peripheral neuropathy
3. Pregnancy or lactating
4. Active uncontrolled infection including known a history of acquired immune deficiency syndrome (AIDS)
5. Patients with previous non-sarcomatous malignancy should not have detectable disease and must not be on active treatment for the disease
6. Any serious and/or unstable pre-existing medical, psychiatric or other condition that could interfere with patient safety or obtaining informed consent

**Date of first enrolment**

01/01/2010

**Date of final enrolment**

01/01/2013

**Locations****Countries of recruitment**

United Kingdom

England

Australia

Ireland

**Study participating centre**

UCL Hospital NHS Trust

London

United Kingdom

NW1 2PG

**Sponsor information****Organisation**

University College London (UCL) (UK)

ROR

<https://ror.org/02jx3x895>

## Funder(s)

### Funder type

Charity

### Funder Name

Cancer Research UK (CRUK) (UK)

### Alternative Name(s)

CR\_UK, Cancer Research UK - London, Cancer Research UK (CRUK), CRUK

### Funding Body Type

Private sector organisation

### Funding Body Subtype

Other non-profit organizations

### Location

United Kingdom

## Results and Publications

### Individual participant data (IPD) sharing plan

Not provided at time of registration

### IPD sharing plan summary

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/10/2017		Yes	No
<a href="#">HRA research summary</a>			28/06/2023	No	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes
<a href="#">Plain English results</a>			24/01/2022	No	Yes