

A randomised phase II study of cytotoxic chemotherapy or cytotoxic chemotherapy combined with celecoxib or trastuzumab as primary chemotherapy for patients with high risk localised breast cancer not amenable to breast conserving therapy

Submission date	Recruitment status	<input type="checkbox"/> Prospectively registered
17/11/2006	No longer recruiting	<input type="checkbox"/> Protocol
Registration date	Overall study status	<input type="checkbox"/> Statistical analysis plan
08/02/2007	Completed	<input checked="" type="checkbox"/> Results
Last Edited	Condition category	<input type="checkbox"/> Individual participant data
01/02/2019	Cancer	

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

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Additional identifiers

Protocol serial number

Study information

Scientific Title

A randomised phase II study of cytotoxic chemotherapy or cytotoxic chemotherapy combined with celecoxib or trastuzumab as primary chemotherapy for patients with high risk localised breast cancer not amenable to breast conserving therapy

Study objectives

Addition of celecoxib or trastuzumab to neoadjuvant cytotoxic chemotherapy could increase the pathological response rate.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approval granted from the local ethics committee (Comités de Consultation pour la Protection des Personnes se prêtant à la Recherche Biomédicale [CCPPRB] Paris Nord) on 14/10/2003.

Study design

Open phase II interventional study

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Localised breast cancer not amenable to breast conserving therapy

Interventions

Control arm:

Cytotoxic chemotherapy consisting of Epirubicin 75 mg/sqm and cyclophosphamide 750 g/sqm every three weeks for four cycles, followed by docetaxel 100 mg/sqm every three weeks for four cycles, followed by breast surgery.

Test arm:

Same cytotoxic chemotherapy combined with celecoxib 800 mg/d given during cycles five to eight (Human Epidermal growth factor Receptor (HER2) negative), or trastuzumab 8 mg/kg loading dose then 6 mg/kg every three weeks with docetaxel (cycles five to eight), followed by breast surgery.

Intervention Type

Drug

Phase

Phase II

Drug/device/biological/vaccine name(s)

Celecoxib, trastuzumab and cytotoxic chemotherapy (epirubicin, cyclophosphamide and docetaxel)

Primary outcome(s)

Pathological response rate

Key secondary outcome(s)

1. Clinical response rate
2. Safety

Completion date

15/09/2007

Eligibility

Key inclusion criteria

1. Pathologically proven T1c-T4, N0-N1, M0 invasive breast cancer (Tumour, Nodes, Metastasis [TNM] classification)
2. No prior therapy
3. Age 18 to 65 years
4. Available frozen tumour tissue
5. Written informed consent

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

Female

Key exclusion criteria

1. Male patient
2. Prior therapy for breast cancer
3. Contraindication to study drug(s)
4. Stage IV breast cancer

Date of first enrolment

14/10/2003

Date of final enrolment

15/09/2007

Locations

Countries of recruitment

France

Study participating centre

Centre for Therapeutic Innovations in Oncology and Haematology (CITOH)

Paris

France

75010

Sponsor information

Organisation

Remagus (France)

Funder(s)

Funder type

Government

Funder Name

French government (ref: AOM/2002/02117)

Funder Name

Support from Sanofi-Aventis, Roche Pharma and Pfizer

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?

<u>Results article</u>	results on pre- and post- therapy detection of circulating tumor cells	01/04 /2010	Yes	No	
<u>Results article</u>	main results	01/07 /2010	Yes	No	
<u>Results article</u>	results	01/06 /2011	Yes	No	
<u>Results article</u>	results	10/03 /2019	01/02 /2019	Yes	No