The ADENOMA study - a study of a device to improve detection of polyps during colonoscopy

| Submission date | Recruitment status | [X] Prospectively registered |
|-------------------------------|---|------------------------------|
| 27/08/2014 | No longer recruiting | Protocol |
| Registration date | Overall study status | Statistical analysis plan |
| 06/10/2014 | Completed | [X] Results |
| Last Edited 21/05/2021 | Condition category Digestive System | Individual participant data |

Plain English summary of protocol

http://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-study-looking-at-a-device-that-may-help-to-find-polyps-in-the-bowel-the-adenoma-study

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

NCT02552017

Secondary identifying numbers

v 5.0, 07.08.2014

Study information

Scientific Title

Accuracy of Detection using ENdocuff Optimisation of Mucosal Abnormalities

Acronym

ADENOMA

Study objectives

It is predicted that using the Endocuff Vision will improve the adenoma detection rate.

Primary objective:

1. To detect a difference in adenoma detection rate between Endocuff-Assisted Colonoscopy (EAC) and Standard Colonoscopy (SC)

Secondary objectives:

- 1. To detect a difference in mean adenomas detected per procedure (MAP2) between EAC and SC
- 2. To establish the rate of cuff exchange (that is, how often the cuff has to be removed)
- 3. To demonstrate non-inferiority of caecal intubation rates and insertion time to caecum between EAC and SC
- 4. To demonstrate non-inferiority in complete withdrawal time in procedures where no polyps are detected between EAC and SC
- 5. To demonstrate non-inferiority of patient satisfaction with EAC compared to SC
- 6. To identify any difference in future colonoscopic workload produced by increased ADR in terms of number of potential follow-up procedures based on BSG adenoma surveillance guidelines between the EAC and SC groups

These outcomes will be analysed on an intention-to-treat basis.

Ethics approval required

Old ethics approval format

Ethics approval(s)

NRES Committee North East - York. REC, ref. 14/NE/1111 - review date 12/09/2014

Study design

Multicentre prospective randomised controlled interventional study

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Diagnostic

Participant information sheet

Not available in web format, please use the contact details to request a patient information sheet

Health condition(s) or problem(s) studied

Conditions requiring colonoscopy assessment, colonic adenomas

Interventions

Two study arms:

- 1. Control arm routine colonoscopy performed in standard fashion with no Endocuff Vision attached to scope
- 2. Intervention arm colonoscopy performed with Endocuff Vision device attached to end of colonoscope

Intervention will be for the duration of the colonoscopy only. Participants will also complete a patient experience questionnaire immediately after, and within a week after, the procedure. Histology results of any polyps detected will be reviewed by the research team, and 30-day adverse events recorded.

Intervention Type

Device

Phase

Not Applicable

Primary outcome measure

Adenoma detection rate (ADR)

Secondary outcome measures

- 1. Mean adenomas detected per procedure (MAP)
- 2. The rate of cuff exchange (that is, how often the cuff has to be removed)
- Caecal intubation rates and insertion time to terminal ileum (to demonstrate non-inferiority)
- 4. Complete withdrawal time in procedures where no polyps are detected (to demonstrate non-inferiority)
- 5. Patient satisfaction
- 6. To identify any difference in future colonoscopic workload produced by increased adenoma detection rate in terms of number of potential follow-up procedures based on BSG adenoma surveillance guidelines between the EAC and SC groups

Overall study start date

06/10/2014

Completion date

30/06/2016

Eligibility

Key inclusion criteria

- 1. Age 18 years and over
- 2. Referral for screening, surveillance or diagnostic colonoscopy
- 3. Ability to give informed consent

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

1772 participants (886 in each arm of the study)

Key exclusion criteria

- 1. Absolute contraindications to colonoscopy
- 2. Established or suspicion of large bowel obstruction or pseudo-obstruction
- 3. Known colon cancer or polyposis syndromes
- 4. Known colonic strictures
- 5. Known severe diverticular segment (that would be likely to prevent passage of the colonoscope)
- 6. Patients with acute colitis (ulcerative, Crohns and diverticulitis)
- 7. Patients lacking capacity to give informed consent
- 8. Pregnancy

Date of first enrolment

06/10/2014

Date of final enrolment

30/06/2016

Locations

Countries of recruitment

England

United Kingdom

Study participating centre South Tyneside Hospital South Shields United Kingdom

NE34 OPL

Sponsor information

Organisation

South Tyneside NHS Foundation Trust (UK)

Sponsor details

South Tyneside Hospital
Harton Lane
South Shields
England
United Kingdom
NE34 0PL
+44 (0)191 404 1000
claire.livingstone@stft.nhs.uk

Sponsor type

Hospital/treatment centre

ROR

https://ror.org/044j2cm68

Funder(s)

Funder type

Industry

Funder Name

ARC Medical Design Ltd (UK)

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?
Plain English results No Yes

results

Results article
HRA research summary

01/02/2019

28/06/2023

Yes No No No