# Randomised controlled study of iron supplementation to support the response to recombinant human erythropoietin for the treatment of chemotherapy-induced anaemia

Submission date	Recruitment status	<ul><li>Prospectively registered</li></ul>
17/11/2006	Stopped	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
04/05/2007	Stopped	Results
<b>Last Edited</b> 07/08/2009	<b>Condition category</b> Haematological Disorders	Individual participant data
		<ul><li>Record updated in last year</li></ul>

### Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

### Contact name

Dr Samir Agrawal

### Contact details

Barts and the London NHS Trust St Bartholomews Hospital West Smithfield London United Kingdom EC1A 7BE +44 (0)20 7601 2331 s.g.agrawal@qmul.ac.uk

# Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

### Secondary identifying numbers

**Version 2 (Oct 2006)** 

# Study information

### Scientific Title

### Acronym

High Iron Study

### Study objectives

Parental iron will optimise the response to recombinant erythropoietin therapy in patients who are iron replete.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Approval received from the East London and the City Research Ethics Committee on the 17th October 2006 (ref: 06/Q0605/93).

### Study design

Randomised, controlled, open label, prospective 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

Chemotherapy induced anaemia

### **Interventions**

As of 07/08/2009 the status of this record was updated to read: 'STOPPED', as this trial terminated early due to poor patient recruitment. The initial anticipated end date was 01/11/2007 but this was extended after the lack of recruitment.

Eighty patients will be treated and randomised to receive either epoietin or epoietin plus 200 mg intravenous iron sucrose (Venefor) weekly for ten weeks or until a haemoglobin (Hb) of 13 g /dl is achieved (whichever is first). Any patient requiring blood transfusion while on the study will be considered to have completed the study at the time of the transfusion. Patients will be followed until the Hb reaches 13 g or until the end of the study period. Haemoglobin levels will be measured weekly.

### Other blood tests include:

Baseline: zinc protoporphyrin (ZPP), reticulocyte haemoglobin content (CHR), transferrin saturation (TSAT), full blood count (FBC), ferritin, reticulocytes (Retic), vitamin B12, red cell folate, soluble transferrin receptor (sTFR), serum erythropoietin (EPO)

Week one: FBC, CHR, retic

Week four, eight and 12: as per baseline (without B12 and red cell folate)

### Intervention Type

Supplement

### Phase

**Not Specified** 

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

Iron supplementation (Venefor), epoietin

### Primary outcome measure

The primary outcome will be the maximum haemoglobin achieved during the conduct of the study.

### Secondary outcome measures

The secondary outcome will be the time to zenith haemoglobin or the achievement of a haemoglobin level of more than 13 g. All side effects will be recorded and graded although none are anticipated. A further stratification will be responsive, stable or progressive disease.

### Overall study start date

01/11/2006

### Completion date

24/04/2009

### Reason abandoned (if study stopped)

Participant recruitment issue

# **Eligibility**

### Key inclusion criteria

- 1. Any patients with a haemoglobin of less than or equal to 10.5 g/dl who is going to receive at least six more weeks of chemotherapy for any non-myeloid malignancy
- 2. Any patients with a percent saturation of transferrin more than or equal to 20% and a serum ferritin between 225 and 2250 pmol/L. Confirmatory data will include a reticulocyte

haemoglobin content (CHR) more than 31 and zinc protoporphyrin (ZPP) less than 80

- 3. Patients must be able to understand and signed written informed consent
- 4. An Eastern Cooperative Oncology Group (ECOG) performance status of zero to two

### Participant type(s)

**Patient** 

### Age group

**Not Specified** 

### Sex

**Not Specified** 

### Target number of participants

Eighty patients

### Key exclusion criteria

- 1. Patients with an anaemia of origin other than cancer or cancer chemotherapy
- 2. Prior intravenous (IV) iron therapy
- 3. Expectation of actual transfusion requirement during the course of the study. A transfusion given after randomisation wil be a study endpoint for that patient.
- 4. Allergy or intolerance to recombinant erythropoietin
- 5. Uncontrolled hypertension
- 6. Active infection
- 7. Primary bone marrow malignancies except for multiple myeloma, chronic lymphocytic leukaemia and indolent non Hogkin's lymphoma, where erythropoiesis-stimulating agents (ESA) therapy has been proven to be beneficial

### Date of first enrolment

01/11/2006

### Date of final enrolment

24/04/2009

# Locations

### Countries of recruitment

England

**United Kingdom** 

Study participating centre Barts and the London NHS Trust

London United Kingdom EC1A 7BE

# Sponsor information

### Organisation

Barts and the London NHS Trust (UK)

### Sponsor details

Research and Development Department
3rd Floor Rutland House
42-46 New Road
Whitechapel
London
England
United Kingdom
E1 2AX
+44 (0)20 7882 7260
Gerry.Leonard@bartsandthelondon.nhs.uk

### Sponsor type

Hospital/treatment centre

### Website

http://www.bartsandthelondon.org.uk/

### **ROR**

https://ror.org/00b31g692

# Funder(s)

### Funder type

Hospital/treatment centre

### **Funder Name**

St. Bartholomew's Hospital (UK) - internal funding

# **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