A phase III multi-centre randomised controlled trial to assess whether optimal supportive care alone (including dexamethasone) is as effective as optimal supportive care (including dexamethasone) plus whole brain radiotherapy in the treatment of patients with inoperable brain metastases from non-small cell lung cancer

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered		
10/08/2006		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
22/09/2006	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
24/03/2022	Cancer			

## Plain English summary of protocol

http://www.cancerhelp.org.uk/trials/a-trial-looking-at-the-treatment-of-lung-cancer-which-has-spread-to-the-brain

# Contact information

# Type(s)

Scientific

#### Contact name

Dr Paula Mulvenna

#### Contact details

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# Additional identifiers

**EudraCT/CTIS** number

IRAS number

ClinicalTrials.gov number NCT00403065

**Secondary identifying numbers** MRC LU24

# Study information

#### Scientific Title

A phase III multi-centre randomised controlled trial to assess whether optimal supportive care alone (including dexamethasone) is as effective as optimal supportive care (including dexamethasone) plus whole brain radiotherapy in the treatment of patients with inoperable brain metastases from non-small cell lung cancer

### Acronym

QUARTZ (Quality of Life After Radiotherapy and Steroids)

### Study objectives

That optimal supportive care (including dexamethasone) alone is as effective as optimal supportive care (including dexamethasone) plus whole brain radiotherapy, in terms of patient-assessed quality-adjusted life-years in patients with non-small cell lung cancer (NSCLC) and inoperable brain metastases.

## Ethics approval required

Old ethics approval format

# Ethics approval(s)

North West Multicentre Research Ethics Committee, 22/09/2006, ref: 06/MRE08/55

# Study design

Phase III multi-centre randomised controlled trial

# Primary study design

Interventional

# Secondary study design

Randomised controlled trial

# Study setting(s)

Hospital

# Study type(s)

Treatment

### Participant information sheet

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

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

Non-small cell lung cancer with inoperable brain metastases

#### Interventions

Optimal supportive care (OSC, including dexamethasone) alone versus OSC and whole brain radiotherapy (WBRT).

#### Intervention Type

Drug

#### **Phase**

Phase III

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

Dexamethasone

#### Primary outcome measure

Quality-adjusted life-years. Follow-up is weekly until 12 weeks, then 4 weekly, until death.

### Secondary outcome measures

- 1. Overall survival
- 2. Karnofsky Performance Status
- 3. Patient symptoms

Follow-up is weekly until 12 weeks, then 4 weekly, until death.

## Overall study start date

02/03/2007

## Completion date

31/05/2015

# **Eligibility**

## Key inclusion criteria

- 1. Histologically or cytologically proven primary NSCLC
- 2. Computed tomography (CT)/magnetic resonance imaging (MRI) confirming brain metastases
- 3. Inoperable brain metastases as assessed by a lung cancer Multi-Disciplinary Team (MDT) or patients for whom surgery is deemed inappropriate
- 4. Clinician and patient uncertain of the role of whole brain radiotherapy (WBRT)
- 5. Patient able and willing to respond to questions in a weekly telephone assessment
- 6. Patient able and willing to give informed consent
- 7. Aged over 18 years
- 8. Baseline patient assessment form completed

# Participant type(s)

**Patient** 

#### Age group

Adult

#### Lower age limit

18 Years

#### Sex

Both

## Target number of participants

534

#### Key exclusion criteria

Current exclusion criteria as of 14/01/2014:

- 1. Clinician and/or patient certain that WBRT will be of benefit
- 2. Clinician and/or patient certain that WBRT will not be of benefit
- 3. Previous or current illness, which has not been brought under control and/or is likely to interfere with protocol treatment or comparisons
- 4. Chemotherapy (last cycle) within 3 weeks prior to randomisation
- 5. Previous radiotherapy to the brain
- 6. Surgery for brain metastases within one month prior to randomisation

#### Previous exclusion criteria:

- 1. Clinician and/or patient certain that WBRT will be of benefit
- 2. Clinician and/or patient certain that WBRT will not be of benefit
- 3. Previous or current illness, which has not been brought under control and/or is likely to interfere with protocol treatment or comparisons
- 4. Estimated glomerular filtration rate (EGFR) inhibitors within one week prior to randomisation
- 5. Chemotherapy (last cycle) within one month prior to randomisation
- 6. Previous radiotherapy to the brain
- 7. Surgery for brain metastases within one month prior to randomisation

## Date of first enrolment

02/03/2007

#### Date of final enrolment

31/08/2014

# Locations

## Countries of recruitment

Australia

England

United Kingdom

#### Study participating centre

### Newcastle General Hospital

Newcastle upon Tyne United Kingdom NE4 6BE

# Sponsor information

### Organisation

Medical Research Council (MRC) (UK)

### Sponsor details

c/o David Harrop MRC Centre London 2nd Floor Stephenson House 158 -160 North Gower Street London United Kingdom NW1 2DA +44 (0)207 670 4625 dsh@ctu.mrc.ac.uk

## Sponsor type

Research organisation

#### Website

http://www.centre-london.mrc.ac.uk

#### **ROR**

https://ror.org/03x94j517

# Funder(s)

## Funder type

Charity

#### **Funder Name**

Cancer Research UK (CRUK) (UK) (ref: C17956/A6414)

#### Alternative Name(s)

CR\_UK, Cancer Research UK - London, CRUK

#### **Funding Body Type**

Private sector organisation

## Funding Body Subtype

Other non-profit organizations

#### Location

**United Kingdom** 

# **Results and Publications**

## Publication and dissemination plan

Not provided at time of registration

# Intention to publish date

## Individual participant data (IPD) sharing plan

Not provided at time of registration

# 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	01/03/2013		Yes	No
Results article	results	22/10/2016		Yes	No
Plain English results			24/03/2022	No	Yes