A trial to prevent epilepsy in people having surgery for a meningioma brain tumour

Submission date	Recruitment status	[X] Prospectively registered
04/11/2022	Recruiting	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
22/06/2023	Ongoing	Results
Last Edited	Condition category Nervous System Diseases	Individual participant data
02/08/2024		Record updated in last year

Plain English summary of protocol

Background and study aims

STOP'EM is a study for adults with a meningioma that needs surgical removal and who have not had a seizure before. We want to know if a short course of an anti-epileptic drug (AED) started 1 day before surgery prevents seizures happening after surgery.

Meningioma are the commonest primary brain tumour. They grow from the lining of the brain. In the UK each year about 1600 people with a meningioma have surgery. Approximately 70% of people do not present with epileptic seizures, but after surgical removal, around 12% will have a seizure within 12 months. Seizures affect quality of life and lead to uncertainty about the future. In patients who have never had a seizure, neurosurgeons don't know whether giving an AED before surgery (prophylaxis) will prevent seizures. Some neurosurgeons use prophylaxis and others don't.

STOP'EM will compare a well-established AED called levetiracetam, to a placebo (a capsule that looks the same but contains no active drug). STOP'EM will look at whether starting levetiracetam shortly before surgery as a preventative measure:

- 1. reduces the chance of having a seizure in the 12 months after surgery
- 2. allows more people to resume driving 12 months after surgery
- 3. affects the quality of life in patients
- 4. is cost-effective

Who can participate?

Adults who have a meningioma that needs surgical removal & who haven't had a seizure before can take part. We will recruit 1004 patients. Patients will be assigned at random to either:

What does the study involve?

Group 1: levetiracetam for 14 days

Group 2: placebo for 14 days

Participants will follow the normal care pathway and will be followed up regularly for 12 months to assess if they develop seizures & to measure their quality of life.

What are the possible benefits and risks of participating? Benefits:

We hope that the results from the study will help patients and doctors in the future when making decisions about treatment.

Risks:

Possible common side effects when people are taking levetiracetam are drowsiness, headache, fatigue and dizziness, many of which patients will experience after removal of a meningioma. It is not possible to minimise these risks as they are potential side effects from an established drug (levetiracetam).

Where is the study run from? Liverpool Clinical Trials Centre (UK)

When is the study starting and how long is it expected to run for? Nnovember 2022 to September 2027

Who is funding the study? National Institute for Health and Care Research (NIHR) Health Technology Assessment (HTA) Programme (UK)

Who is the main contact?
Priya Francis, stopem@liverpool.ac.uk
Prof Michael Jenkinson, michael.jenkinson@liv.ac.uk

Study website

https://www.stopem-trial.org.uk/

Contact information

Type(s)

Public

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Additional identifiers

EudraCT/CTIS number

2022-002371-10

IRAS number

1005506

ClinicalTrials.gov number

Nil known

Secondary identifying numbers

UoL001699, IRAS 1005506, CPMS 56466

Study information

Scientific Title

Surgeons Trial Of Prophylaxis for Epilepsy in seizure naïve patients with Meningioma: a randomised controlled trial (STOP'EM)

Acronym

STOP'EM

Study objectives

Primary objective:

To determine whether 2 weeks prophylactic levetiracetam treatment reduces the risk of developing seizures within 12 months of surgical resection of newly-diagnosed seizure naïve meningioma compared to placebo

Secondary objectives:

- 1. To improve the understanding of the safety of prophylactic levetiracetam
- 2. To determine whether prophylactic levetiracetam influences quality of life
- 3. To determine the 30-day morbidity and mortality associated with meningioma surgery

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 24/04/2023, London - Central Research Ethics Committee (3rd Floor, Barlow House, 4 Minshull Street, Manchester, M1 3DZ, United Kingdom; +44 207 104 8061; londoncentral. rec@hra.nhs.uk), ref: 22/LO/0868

Study design

Interventional double blind randomized parallel group placebo controlled trial

Primary study design

Interventional

Secondary study design

Randomised parallel trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Intracranial meningioma and epilepsy

Interventions

Levetiracetam 250mg (IMP) or Placebo – Participant will take IMP/placebo twice a day (2 x 250mg capsules, morning and evening) for 14 days in total. Treatment will begin 24 hours prior to surgery (participant will be in hospital for 2-3 days, and at home for the remainder of the treatment period).

Intervention Type

Drug

Phase

Phase III

Drug/device/biological/vaccine name(s)

Levetiracetam

Primary outcome measure

Time to at least one seizure at 12 months post-surgery measured using patient records

Secondary outcome measures

Measured using patient records unless noted otherwise:

- 1. Time to first seizure
- 2. Time to first convulsive seizure
- 3. Time to first unprovoked seizure (seizure from day 8 onwards)
- 4. Driving under licence at 6 and 12 months
- 5. EQ-5D-5L at pre-surgery, 4-6 weeks post-surgery, 12 weeks post-surgery, 52 weeks post-

surgery

- 6. Serious adverse reactions. Active monitoring of SARs will be from the period of randomisation until completion of IMP course, plus 1 week
- 7. Landriel Ibañez classification 30 days post-surgery

Overall study start date

01/11/2022

Completion date

30/09/2027

Eligibility

Key inclusion criteria

- 1. Newly-diagnosed meningioma on MRI
- 2. Seizure-naïve at presentation
- 3. Surgical resection of meningioma planned
- 4. Age ≥16 years
- 5. Written and informed consent

Participant type(s)

Patient

Age group

Mixed

Lower age limit

16 Years

Sex

Both

Target number of participants

1004

Key exclusion criteria

- 1. Posterior fossa meningioma
- 2. Previous history of epilepsy
- 3. Previous history of provoked seizures
- 4. Previous cranial neurosurgery for any cause
- 5. Renal failure (Chronic Kidney Disease [CKD] 4-5)
- 6. Use of anti-epileptic drug for another indication (e.g. trigeminal neuralgia) within 7 days preceding randomisation
- 7. Known hypersensitivity to levetiracetam, other pyrrolidone derivatives or any of the excipients
- 8. Actively breastfeeding
- 9. Weigh below 50kg (if aged 16 or 17 years)

Date of first enrolment

01/07/2024

Date of final enrolment

01/07/2028

Locations

Countries of recruitment

England

United Kingdom

Study participating centre Liverpool Clinical Trials Centre (LCTC)

University of Liverpool
2nd Floor Institute in the Park
Alder Hey Children's NHS Foundation Trust
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Sponsor information

Organisation

University of Liverpool

Sponsor details

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Sponsor type

University/education

Website

http://www.liv.ac.uk/

ROR

https://ror.org/04xs57h96

Funder(s)

Funder type

Government

Funder Name

Health Technology Assessment Programme

Alternative Name(s)

NIHR Health Technology Assessment Programme, HTA

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Publication and dissemination plan

Peer reviewed scientific journals
Internal report
Conference presentation
Publication on website

Submission to regulatory authorities Access to raw data and right to publish freely by all investigators in study or by Independent Steering Committee on behalf of all investigators

Intention to publish date

01/02/2030

Individual participant data (IPD) sharing plan

Anonymous data from the trial will be made available to share with external researchers. All requests for access to these data will be reviewed by the Sponsor and data controllers. stopem@liverpool.ac.uk

IPD sharing plan summary

Available on request