

Randomised phase III trial comparing concurrent chemoradiation and adjuvant chemotherapy with pelvic radiation alone in high risk and advanced stage endometrial carcinoma

Submission date 28/09/2006	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 28/09/2006	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 21/04/2022	Condition category Cancer	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

<http://www.cancerhelp.org.uk/trials/a-trial-looking-at-radiotherapy-and-chemotherapy-after-surgery-in-women-with-womb-cancer>

Contact information

Type(s)

Scientific

Contact name

Dr C L Creutzberg

ORCID ID

<https://orcid.org/0000-0002-7008-4321>

Contact details

Leiden University Medical Center (LUMC)
Department of Clinical Oncology
PO Box 9600
Leiden
Netherlands
2300 RC
+31 (0)71 526 5120
c.l.creutzberg@lumc.nl

Additional identifiers

Clinical Trials Information System (CTIS)

2007-004917-33

ClinicalTrials.gov (NCT)

NCT00411138

Protocol serial number

CKTO 2006-04; LUMC P06.031

Study information

Scientific Title

Randomised phase III trial comparing concurrent chemoradiation and adjuvant chemotherapy with pelvic radiation alone in high risk and advanced stage endometrial carcinoma: PORTEC-3

Acronym

PORTEC-3

Study objectives

The addition of concurrent and adjuvant chemotherapy to postoperative radiation therapy will increase five year overall survival and failure-free survival of patients with high-risk and advanced stage endometrial carcinoma.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval received from the local medical ethics committee

Study design

Randomised controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Endometrial carcinoma

Interventions

Patients are randomised (1:1) to receive external beam pelvic radiotherapy (standard arm: 48.6 Gy in 1.8 Gy fractions), or pelvic radiotherapy with concurrent chemotherapy (two cycles of cisplatin) followed by adjuvant chemotherapy (four cycles of carboplatin and paclitaxel; experimental arm).

Intervention Type

Drug

Phase

Phase III

Drug/device/biological/vaccine name(s)

Cisplatin, carboplatin, paclitaxel

Primary outcome(s)

1. Five year actuarial overall survival
2. Five year actuarial failure-free survival (with failure defined as relapse or death due to endometrial carcinoma or to treatment complications)

Key secondary outcome(s)

1. Quality of life
2. Severe treatment related morbidity
3. Five year rates of vaginal, pelvic and distant relapse

Completion date

01/01/2020

Eligibility

Key inclusion criteria

1. Histologically confirmed endometrial carcinoma, with one of the following postoperative International Federation of Gynecology and Obstetrics (FIGO 1988) stages and grade:
 - 1.1. Stage IB grade 3 with documented Lymphatic Vascular Space Invasion (LVSI)
 - 1.2. Stage 1C grade 3
 - 1.3. Stage II grade 3
 - 1.4. Stage IIIA or IIIC (IIIA based on peritoneal cytology alone is only eligible if grade 3)
 - 1.5. Stage IB or IC, stage II or stage III with serous or clear cell histology
2. World Health Organisation (WHO) performance status zero to two
3. White Blood Cells (WBC) more than or equal to $3.0 \times 10^9/L$
4. Platelets more than or equal to $100 \times 10^9/L$
5. Bilirubin less than or equal to 1.5 x Upper Normalised Limit (UNL)
6. Aspartate Aminotransferase (ASAT)/Alanine Aminotransferase (ALAT) less than or equal to 2.5 x UNL
7. Written informed consent

As of 11/02/2011 the criteria has been updated to also include the new FIGO 2009 staging system:

Histologically confirmed endometrial carcinoma, with one of the following postoperative FIGO 2009 stages and grade:

1. Stage IA with myometrial invasion, grade 3 with documented LVSI
2. Stage IB grade 3
3. Stage II
4. Stage IIIA or IIIC; or IIIB if parametrial invasion only
5. Stage IA (with myometrial invasion), IB, II, or III with serous or clear cell histology

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Not Specified

Sex

All

Total final enrolment

686

Key exclusion criteria

1. Previous malignancy, except for basal cell carcinoma of the skin, less than ten years
2. Previous pelvic radiotherapy
3. Hormonal therapy or chemotherapy for this tumor
4. Macroscopic stage IIB for which Wertheim type hysterectomy
5. Prior diagnosis of Crohn's disease or ulcerative colitis
6. Residual macroscopic tumor after surgery
7. Creatinine clearance less than or equal to 60 ml/min (calculated according to Cockcroft) or less than or equal to 50 ml/min (EthyleneDiamineTetraacetic Acid [EDTA] clearance, or measured creatinine clearance)
8. Impaired cardiac function, prohibiting the infusion of large amounts of fluid during cisplatin therapy
9. Peripheral Neuropathy more than or equal to grade two

Date of first enrolment

15/09/2006

Date of final enrolment

20/12/2013

Locations**Countries of recruitment**

United Kingdom

Australia

Canada

France

Italy

Netherlands

New Zealand

Study participating centre
Leiden University Medical Center (LUMC)
Leiden
Netherlands
2300 RC

Sponsor information

Organisation
Leiden University Medical Center (LUMC) (The Netherlands)

ROR
<https://ror.org/05xvt9f17>

Funder(s)

Funder type
Charity

Funder Name
KWF Kankerbestrijding

Alternative Name(s)
Dutch Cancer Society, Dutch Cancer Society (KWF Kankerbestrijding), KWF, DCS

Funding Body Type
Private sector organisation

Funding Body Subtype
Other non-profit organizations

Location
Netherlands

Funder Name
Cancer Research UK

Alternative Name(s)
CR_UK, Cancer Research UK - London, Cancer Research UK (CRUK), CRUK

Funding Body Type

Private sector organisation

Funding Body Subtype

Other non-profit organizations

Location

United Kingdom

Funder Name

National Health and Medical Research Council

Alternative Name(s)

National Health and Medical Research Council, Australian Government, NHMRC National Health and Medical Research Council, NHMRC

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Australia

Funder Name

Cancer Australia

Alternative Name(s)

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Australia

Funder Name

Canadian Cancer Society Research Institute

Alternative Name(s)

l'Institut de recherche de la Société canadienne du cancer, Société canadienne du cancer, CCSRI, IRSCC

Funding Body Type

Private sector organisation

Funding Body Subtype

Associations and societies (private and public)

Location

Canada

Funder Name

Agenzia Italiana del Farmaco, Ministero della Salute

Alternative Name(s)

Italian Medicines Agency, Agenzia Italiana del Farmaco, Italian Medicines Agency, Ministry of Health, AIFA

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Italy

Results and Publications

Individual participant data (IPD) sharing plan

Not provided at time of registration

IPD sharing plan summary

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/08/2016		Yes	No
Results article	results	01/02/2018		Yes	No
Results article	results	01/09/2019	30/07/2019	Yes	No
Results article	results of correlation between molecular subgroup and prognosis	10/10/2020	05/03/2021	Yes	No
Results article	Radiotherapy Quality Assurance	11/12/2021	21/04/2022	Yes	No
Plain English results			24/03/2022	No	Yes

[Study website](#)

Study website

11/11
/2025

11/11
/2025

No

Yes