# Investigating the timing of high dose rate (HDR) brachytherapy with external beam radiation therapy (EBRT) in intermediate and high risk localised prostate cancer patients and its effects on toxicity and quality of life

Submission date	Recruitment status No longer recruiting	Prospectively registered		
09/04/2015		[X] Protocol		
Registration date	Overall study status	Statistical analysis plan		
10/04/2015 <b>Last Edited</b>	Completed  Condition category	Results		
		[] Individual participant data		
11/12/2018	Cancer	[] Record updated in last year		

## Plain English summary of protocol

http://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-trial-to-find-the-best-timing-for-brachytherapy-and-external-radiotherapy-for-prostate-cancer

# **Contact information**

# Type(s)

Scientific

## Contact name

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### Contact details

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# Additional identifiers

## Protocol serial number

ARCTU-SUH-001

# Study information

### Scientific Title

A randomised controlled feasibility trial to investigate the timing of HDR Brachytherapy with EBRT in intermediate and high risk localised prostate cancer patients and its effects on toxicity and quality of life

## Acronym

**THEPCA** 

## Study objectives

Prospective assessment of genitourinary toxicities according to the treatment sequence of HDR brachytherapy and EBRT.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

NRES Ethics, 22/09/2014, ref: 14/LO/1662

## Study design

Randomised controlled two-arm trial

## Primary study design

Interventional

## Study type(s)

Treatment

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

Prostate cancer

#### **Interventions**

This will be a randomised two arm trial in which intermediate and high risk prostate cancer patients treated with both HDR brachytherapy and EBRT.

In Arm A: Patients receive HDR Brachytherapy before EBRT

In Arm B (control): Patients receive EBRT before HDR Brachytherapy. The assessment of the acute and late toxicities at various time points will be carried out. The treatment should start within 3 months from the randomisation date.

## Intervention Type

Mixed

## Primary outcome(s)

Prospective assessment of genitourinary toxicities according to the treatment sequence of HDR Brachytherapy and EBRT.

# Key secondary outcome(s))

- 1. Treatment outcomes including biochemical response and survival
- 2. Prospective assessment of gastrointestinal toxicities according to the treatment sequence of

## HDR brachytherapy and EBRT

3. Assessment of Radiotherapy Planning Challenges including Image Guided Radiotherapy

## Completion date

01/01/2017

# Eligibility

## Key inclusion criteria

- 1. Patient age >18 years
- 2. Histologically diagnosed Prostate cancer, stages T1b-T3bN0M0
- 3. Any Gleason score
- 4. Any PSA level
- 5. Patient able to consent and fill in the questionnaires

## Participant type(s)

**Patient** 

## Healthy volunteers allowed

No

## Age group

Adult

## Lower age limit

18 years

### Sex

Male

## Key exclusion criteria

- 1. Previous TURP/HoLEP Laser Prostatectomy
- 2. Any Metastatic Disease
- 3. IPSS>20
- 4. Pubic arch interference
- 5. Lithotomy position
- 6. If Anaesthesia is not possible
- 7. Rectal fistula
- 8. Prior pelvic radiotherapy

### Date of first enrolment

25/01/2015

## Date of final enrolment

01/01/2017

# Locations

### Countries of recruitment

United Kingdom

Study participating centre Southend University Hospital NHS Foundation Trust

Prittlewell Chase Westcliff on Sea United Kingdom SSO ORY

# Sponsor information

## Organisation

Southend University Hospital NHS Foundation Trust

## **ROR**

https://ror.org/05fa42p74

# Funder(s)

# Funder type

Not defined

## **Funder Name**

Southend University Hospital NHS Foundation Trust (UK)

# **Results and Publications**

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?
Protocol article	protocol	29/04/2015		Yes	No
HRA research summary			28/06/2023	No	No