

Temozolomide in children with recurrent or refractory central nervous system (CNS) tumours [Temozolomide bij kinderen met een gerecidiveerde of refractaire centraal zenuwstelsel tumor]

Submission date 20/12/2005	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 20/12/2005	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 24/06/2008	Condition category Cancer	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

NTR227

Study information

Scientific Title

Acronym

TMZ studie

Study objectives

Administration of a higher cumulative dose of temozolomide leads to a higher response rate in patients with recurrent primitive neuro-ectodermal tumours and recurrent high grade gliomas of the central nervous system (CNS), while this treatment does not lead to more side effects.

Please note that as of 24/06/2008 more details on the sources of funding have been added to this record (i.e., funding now confirmed). This can be seen below in the sources of funding section.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised, multicentre, active controlled parallel group 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

Glioma high grade, primitive neuroectodermal tumour (PNET)

Interventions

Two different dose schedules of temozolomide are compared:

1. In the standard arm 200 mg/m²/dag is administered 5 days per 28 days
2. In the experimental arm 150 mg/m² is administered 2 x 7 dagen (day 0 - 6 and day 14 - 20) per 28 days

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Temozolomide

Primary outcome measure

Difference in magnetic resonance imaging (MRI) response after 12 weeks between the two arms.

Secondary outcome measures

Difference in side effects after 12 weeks between the two arms.

Overall study start date

01/01/2004

Completion date

01/01/2009

Eligibility

Key inclusion criteria

1. Aged 3 - 18 years
2. Pathology: primitive neuroectodermal tumour (PNET)/high grade glioma
3. Measurable tumour
4. Lansky score greater than 50%
5. Expected life span of 12 weeks or more
6. Informed consent

Participant type(s)

Patient

Age group

Child

Lower age limit

3 Years

Upper age limit

18 Years

Sex

Both

Target number of participants

54

Key exclusion criteria

Non-conformation to inclusion criteria

Date of first enrolment

01/01/2004

Date of final enrolment

01/01/2009

Locations

Countries of recruitment

Netherlands

Study participating centre

Erasmus Medical Center

Rotterdam

Netherlands

3015 GJ

Sponsor information

Organisation

Dutch Childhood Oncology Group (Stichting Kinder Oncologie [SKION]) (The Netherlands)

Sponsor details

Leyweg 299

Den Haag

Netherlands

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+31 (0)70 367 4545

info@skion.nl

Sponsor type

Research organisation

Website

<http://www.skion.nl/>

ROR

<https://ror.org/01zs6bp63>

Funder(s)

Funder type

Industry

Funder Name

Added as of 24/06/2008:

Funder Name

Schering-Plough B.V. (The Netherlands)

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