

Colorectal cancer cohort study (COLO-COHORT)

Submission date	Recruitment status	<input type="checkbox"/> Prospectively registered
11/07/2019	Recruiting	<input type="checkbox"/> Protocol
Registration date	Overall study status	<input type="checkbox"/> Statistical analysis plan
23/12/2019	Ongoing	<input type="checkbox"/> Results
Last Edited	Condition category	<input type="checkbox"/> Individual participant data
20/01/2026	Cancer	<input checked="" type="checkbox"/> Record updated in last year

Plain English summary of protocol

<https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-study-looking-bowel-cancer-risk-colo-cohort>

Contact information

Type(s)

Scientific

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Additional identifiers

ClinicalTrials.gov (NCT)

NCT04185779

Study information

Scientific Title

Colorectal Cancer Cohort Study (COLO-COHORT)

Acronym

COLO-COHORT

Study objectives

1. It is possible to identify factors (derived from socio-demographics, medical history, family history, lifestyle, FIT test results, blood test results) which successfully predict risk of colorectal neoplasia in individuals with symptoms attending for colonoscopy
2. It is possible to identify those individuals most likely to have advanced adenomas (adenomas $\geq 10\text{mm}$, any villous component, presence of high-grade dysplasia) or CRC at surveillance colonoscopy
3. Individuals with and without colorectal neoplasia have distinct microbiome profiles
4. To develop a platform of patients who consent to future contact for future research studies (COLO-SPEED)

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 20/06/2019, West Midlands - Edgbaston Research Ethics Committee (Royal College of Surgeons Edinburgh, Birmingham B3 2BB; 02071048036; NRESCCommittee.WestMidlands-Edgbaston@nhs.net), ref: 19/WM/0193

Study design

Observational multicentre cross-sectional study

Primary study design

Observational

Study type(s)

Diagnostic

Health condition(s) or problem(s) studied

Colorectal neoplasia, colorectal cancer

Interventions

Group A (cross-sectional arm, 10,000 patients)

In 6,000 patients from this group, patients will be asked to submit a Faecal Immunochemical Test (FIT) sample and be asked to have blood tests taken including blood for DNA extraction. In the remaining patients, we will record recent blood results of interest. For all patients, we will obtain information on their past medical history, alcohol history, smoking history, family history, anthropometric measurements including waist circumference, and information from their colonoscopy and histology of polyps removed or biopsies taken.

COLO-SPEED, Group B:

Patients will be asked to consent to future contact for collection of additional information, contact for future research studies, use of samples or information from this study to be used in future research studies, for longitudinal follow up through medical notes or national databases, and use of information from previous lower gastrointestinal endoscopy and histology as well as laboratory results in future research studies.

Follow up for patients who consent for long term follow up will be 10 years post consent.

Intervention Type

Other

Primary outcome(s)

The occurrence of colorectal neoplasia (colorectal cancer and advanced adenomas), measured by reviewing patient endoscopy reports, blood results, and health questionnaire. These will be analysed via logistic regression and subsequent structural equation modelling. Timepoint: baseline

Key secondary outcome(s)

Stool microbiome in different patient subgroups (i.e., normal colon, adenomas, bowel cancer), measured by reviewing stool samples at baseline

Completion date

14/01/2036

Eligibility

Key inclusion criteria

Group A:

1. Aged ≥ 30 years and able to give informed consent
2. Patients attending colonoscopy:
 - 2.1 Through Bowel Cancer Screening Programme (FIT positive, Bowelscope conversion, surveillance)
 - 2.2 Through standard NHS care (most commonly due to iron deficiency anaemia, altered bowel habit, weight loss, rectal bleeding, planned polypectomy, those referred on basis of family history, abnormal cross-sectional imaging, polyp surveillance or post CRC surveillance)

(COLO-SPEED) Group B:

1. Any patient attending for colonoscopy and able to give informed consent
2. At least 18 years old
3. In a centre supported by COLO-SPEED infrastructure (i.e. in North of England)

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Mixed

Lower age limit

30 years

Upper age limit

99 years

Sex

All

Total final enrolment

0

Key exclusion criteria

Group A:

1. Unable to give informed consent
2. Known polyposis syndrome
3. Previous total colectomy
4. Known colonic stricture which would limit complete colonoscopy
5. Attending for planned therapeutic procedure other than polypectomy, such as insertion of colonic stent
6. Attending for assessment of known inflammatory bowel disease (IBD) activity or for IBD surveillance
7. Patients currently recruited into an interventional CTIMP for CRC prevention

COLO-SPEED (Group B):

1. DOes not meet inclusion criteria

Date of first enrolment

01/08/2019

Date of final enrolment

31/08/2026

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

South Tyneside District Hospital

Harton Lane

South Shields

England

NE34 0PL

Sponsor information

Organisation

South Tyneside and Sunderland NHS Foundation Trust

ROR

<https://ror.org/044j2cm68>

Funder(s)

Funder type

Charity

Funder Name

Guts UK Charity

Alternative Name(s)

Guts UK

Funding Body Type

Private sector organisation

Funding Body Subtype

Other non-profit organizations

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

The study management group will develop guidelines and processes at which other researchers can access this data, and this will be subject to review and approval from the study management group and PPI representatives. The guidelines and process to this will be made available on the study website (colospeed.org which is being developed). Patients will have been able to consent to use of their information in future research studies, as such only data from those who have consented to this will be made available. The timelines at which the data will be available and for how long will be disclosed at a later date.

IPD sharing plan summary

Other

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
HRA research summary			28/06/2023	No	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes