# How is urination flow rate, volume and frequency affected in men who have had complete surgical removal of the prostate to treat prostate cancer?

Submission date	Recruitment status  No longer recruiting	Prospectively registered		
14/02/2020		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
28/04/2020	Completed	Results		
Last Edited	Condition category	Individual participant data		
28/04/2020	Urological and Genital Diseases	Record updated in last year		

#### Plain English summary of protocol

Background and study aims

Men diagnosed with prostate cancer understandably often choose treatments that are most likely to get rid of the cancer. Surgical removal of the prostate can lead to changes in the frequency of passing urine and the amount of urine passed. These long-term changes can be bothersome and can lead to changes in lifestyle such as when and how much liquid is drunk. There is little information provided to men before surgery on how prostate removal might affect their urinary frequency and flow rate.

This study aims to measure the effects of prostate removal on urine flow and frequency. It will also interview men who have had prostate removal to find out about their symptoms, any changes to their lifestyle they have made and the information that was available to them before surgery. In addition, there will be interviews of men who are considering whether to have prostate removal to understand the information that would be most helpful. The results will help to guide creation of a leaflet to provide information at the point where a man is deciding about treatment for prostate cancer.

#### Who can participate?

Men who are about to have surgical prostate removal will participate in the part of the study that involves measuring their urinary function. Men who have already had their prostate removed and those who are considering it will participate in the interview part of the study.

#### What does the study involve?

In the urine function measurement part of the study, men will be given a Flowtaker device to measure their urine flow, amount and frequency. The device looks like a jug that stands on a sensor. For one week before surgery and 3 and 12 months after the surgery, participants will pass urine into the device when they are at home. They will also keep a diary of their liquid intake during the week and will fill out questionnaires on symptoms that might be affected by

prostate removal and their quality of life.

For the interview part, the participants will be interviewed for up to 30 minutes on their urinary symptoms and the information they received before their surgery.

What are the possible benefits and risks of participating?

There is no personal benefit from participating. Travel expenses associated with the study will be refunded. There are also no risks expected, though it might be inconvenient at times for men to pass urine into the Flowtaker device rather than a toilet.

Where is the study run from? Newcastle upon Tyne Hospitals NHS Foundation Trust (UK)

When is the study starting and how long is it expected to run for? December 2017 to August 2020

Who is funding the study? The Urology Foundation (UK)

Who is the main contact? Dr Alison Bray, abray3@nhs.net

# Contact information

#### Type(s)

Scientific

#### Contact name

Dr Alison Bray

#### **ORCID ID**

https://orcid.org/0000-0003-1402-804X

#### Contact details

Medical Physics Royal Victoria Infirmary Newcastle upon Tyne United Kingdom NE1 4LP +44 (0)191 233 6161 abray3@nhs.net

## Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

Integrated Research Application System (IRAS)

242020

ClinicalTrials.gov (NCT)

#### Protocol serial number

IRAS 242020

# Study information

#### Scientific Title

Home Assessment of urinary voiding and storage function before and After Radical Prostatectomy for prostate cancer: setting patient expectations (The HAARP study)

#### Acronym

**HAARP** 

#### Study objectives

The aim is to quantify the effect of radical prostatectomy on urinary function, including flow rates, voided volumes, and daytime and night-time frequency. This information will be used to develop patient literature to inform patients of changes following surgery.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Approved 05/04/2018, South West - Cornwall & Plymouth Research Ethics Committee (Level 3, Block B,

Whitefriars, Lewins Mead, Bristol, BS1 2NT; +44 (0)207 104 8241; nrescommittee.southwest-cornwall-plymouth@nhs.net), ref:18/SW/0086

#### Study design

Observational qualitative study

#### Primary study design

Observational

#### Study type(s)

Quality of life

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

Urinary function following radical prostatectomy for prostate cancer

#### Interventions

40 men will complete a fluid intake diary and perform home uroflowmetry for 1 week using the Flowtaker device before surgery and at 3 and 12 months after radical prostatectomy for prostate cancer. They will also complete symptoms questionnaires that ask about their urinary function, bowel habits, sexual function, hormones, and general quality of life.

The researchers will also interview a small number of men to inform the development of a leaflet that can be given to patients who are thinking about having a radical prostatectomy in

order to help them make an informed decision. The interview will ask about urinary symptoms before and after surgery, expectations of urinary symptoms following surgery, information received and changes to lifestyle.

#### Intervention Type

Procedure/Surgery

#### Primary outcome(s)

- 1. Number of voids per 24-h period assessed using the Flowtaker device at baseline and 3 and 12 months after radical prostatectomy
- 2. Number of voids per night assessed using the Flowtaker device at baseline and 3 and 12 months after radical prostatectomy
- 3. Urinary flow rate assessed using the Flowtaker device at baseline and 3 and 12 months after radical prostatectomy
- 4. Voided volume assessed using using the Flowtaker device at baseline and 3 and 12 months after radical prostatectomy

#### Key secondary outcome(s))

- 1. Urinary symptoms measured by the ICIQ-MLUTS questionnaire at baseline and 3 and 12 months after radical prostatectomy
- 2. General well-being measured by the FACT-P questionnaire at baseline and 3 and 12 months after radical prostatectomy
- 3. Qualitative analysis of interviews

#### Completion date

31/08/2020

# **Eligibility**

#### Key inclusion criteria

Men undergoing radical prostatectomy for prostate cancer

#### Participant type(s)

Patient

## Healthy volunteers allowed

No

#### Age group

Adult

#### Sex

Male

#### Key exclusion criteria

- 1. Men with an indwelling urinary catheter
- 2. Men who carry out intermittent self-catheterisation
- 3. Men unable or unwilling to void in a standing position

#### Date of first enrolment

10/05/2018

# Date of final enrolment

31/05/2020

## Locations

#### Countries of recruitment

United Kingdom

England

### Study participating centre

#### Freeman Hospital

The Newcastle upon Tyne Hospitals NHS Foundation Trust Freeman Road High Heaton Newcastle upon Tyne United Kingdom NE7 7DN

# Study participating centre

Southmead Hospital

North Bristol NHS Trust Southmead Road Westbury-on-Trym Bristol United Kingdom BS10 5NB

# Sponsor information

#### Organisation

Newcastle upon Tyne Hospitals NHS Foundation Trust

#### **ROR**

https://ror.org/05p40t847

# Funder(s)

# Funder type

#### Funder Name

The Urology Foundation

# **Results and Publications**

# Individual participant data (IPD) sharing plan

The datasets generated and/or analysed during this study will be included in the subsequent results publication.

## 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
Participant information sheet	version v2.0	03/04/2018	28/04/2020	No	Yes
Participant information sneet		02/05/2019			Yes
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes