# Squamous cell carcinoma prevention in organ transplant recipients using topical treatments

| Submission date              | Recruitment status No longer recruiting | [X] Prospectively registered   |  |  |
|------------------------------|---|--------------------------------|--|--|
| 10/07/2014                   |   | ☐ Protocol                     |  |  |
| Registration date 10/07/2014 | Overall study status Completed          | Statistical analysis plan      |  |  |
|                              |   | [X] Results                    |  |  |
| Last Edited                  | Condition category                      | [] Individual participant data |  |  |
| 28/05/2020                   | Cancer                                  |                                |  |  |

#### Plain English summary of protocol

http://www.cancerresearchuk.org/about-cancer/trials/a-study-looking-treatment-prevent-skin-cancer-people-who-have-had-organ-transplant-spot

# Contact information

# Type(s)

Scientific

#### Contact name

Mrs Yolande Jefferson-Hulme

#### Contact details

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# Additional identifiers

# **EudraCT/CTIS** number

2013-000893-32

IRAS number

ClinicalTrials.gov number

# Secondary identifying numbers

16962

# Study information

#### Scientific Title

Squamous cell carcinoma prevention in organ transplant recipients using topical treatments: a feasibility study (SPOT)

#### **Acronym**

**SPOT Trial** 

#### Study objectives

A multi-centre, randomised, three arm, open-label, phase ll, feasibility study comparing topical treatment of actinic keratoses (AK) in Organ Transplant Recipients (OTR) using 5-fluorouracil or 5% imiquimod (plus sunscreen) to standard care (sunscreen alone) in the prevention of squamous cell carcinoma (cSCC). The main objective of this study is to establish the feasibility of performing a phase III randomised controlled trial evaluating prevention of cSCC using currently available topical interventions.

On 10/12/2014 the following changes were made to the trial record:

- 1. The overall trial start date was changed from 01/08/2014 to 01/12/2014.
- 2. The overall trial end date was changed from 01/08/2015 to 01/12/2016.

#### Ethics approval required

Old ethics approval format

# Ethics approval(s)

13/LO/1579; First MREC approval date 17/02/2014

# Study design

Randomised; Interventional; Design type: Treatment

# Primary study design

Interventional

# Secondary study design

Randomised controlled trial

# Study setting(s)

Hospital

# Study type(s)

Treatment

# Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

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

Topic: Cancer, Dermatology; Subtopic: Melanoma, Skin (all Subtopics); Disease: Skin, Dermatology

#### **Interventions**

- 1. 5% w/w 5-fluorouracil cream (Efudix®), with discretionary sunscreen as per standard care, for 4 weeks (Treatment Cycle 1), followed by a 4-week resting period and then another 4-week treatment phase (Treatment Cycle 2). Topical treatment will be applied to the chosen treatment zone(s) once or twice per day dependent on the site of the AK.;
- 2. 5% imiquimod cream (Aldara®), with discretionary sunscreen as per standard care, for 4 weeks (Treatment Cycle 1), followed by a 4-week resting period and then another 4-week treatment phase (Treatment Cycle 2). Topical treatment will be applied to the chosen treatment zone(s) overnight for 3 (Mon, Wed, Fri or Tue, Thu, Sat) to 5 times (Mon-Fri) per week dependent on the site of the AK.;
- 3. Standard care, discretionary sunscreen only (SPF >30), should be applied daily to all exposed areas of the skin at least 30 minutes before sun exposure and topped up as required, from April to October or during high-UVR exposure activities during winter months.

#### Intervention Type

Drug

#### **Phase**

Phase II

#### Drug/device/biological/vaccine name(s)

5% w/w 5-fluorouracil cream (Efudix®), 5% imiguimod cream (Aldara®)

#### Primary outcome measure

Proportion of patients who would be willing to use the treatment again; Timepoint(s): Month 15

#### Secondary outcome measures

- 1. Assessment of QoL measure; Timepoint(s): Month 15
- 2. Clearance of AK; Timepoint(s): End of treatment periods (4 and 8 weeks post treatment)
- 3. Development of cSCC; Timepoint(s): 12 months post treatment
- 4. Evaluation of the proposed overall AK quantification scoring criteria; Timepoint(s): Established pre-trial
- 5. Measure concordance of AK diagnosis by clinicians; Timepoint(s): Month 15
- 6. Patient treatment preferences; Timepoint(s): Month 15
- 7. Persistence of clearance of AK; Timepoint(s): End of month 12
- 8. Proportion of eligible patients who complete treatment cycle 1; Timepoint(s): Week 4
- 9. Proportion of eligible patients who require & complete treatment cycle 2; Timepoint(s): Week 12
- 10. Proportion of eligible patients willing to be randomised; Timepoint(s): Randomisation

# Overall study start date

01/12/2014

# Completion date

03/07/2018

# **Eligibility**

#### Key inclusion criteria

- 1. Organ Transplant Recipient (OTR) Patient Group:
- 1.1. OTRs aged >18 years
- 1.2. A minimum of 10 AK (with at least 5 AK occurring within the same skin zone)
- 1.3. Demonstrably stable renal function on the basis of serum creatinine and estimated Glomerular Filtration Rate (eGFR)
- 1.4. No recent change in immunosuppressive medication and predicted to remain stable over course of the study
- 1.5. Able to apply topical cream as directed to the required area or having a carer who agrees to do this at the required

frequency and times

1.6. Women of childbearing potential, or men in a relationship with a woman of childbearing potential, prepared to adopt

adequate contraceptive measures if sexually active

- 1.7. Able to give written informed consent
- 1.8. Willing and able to comply with scheduled visits, treatment plan, laboratory tests and other study procedures
- 2. Immunocompetent Patient Group (participating in the DCE substudy only):
- 2.1. ICP patients aged >18 years
- 2.1. Present or previous AK (any site, any number)
- 2.3. Able to give written informed consent
- 2.4. Willing to spend up at least 20 minutes completing the Long Q

#### Participant type(s)

**Patient** 

#### Age group

Adult

#### Lower age limit

18 Years

#### Sex

Both

# Target number of participants

Planned Sample Size: 120; UK Sample Size: 120

#### Total final enrolment

101

#### Key exclusion criteria

Organ Transplant Recipients (OTR) only:

1. Pregnant (female patients of child bearing potential should have a urine or blood Human Chorionic Gonadotropin

(hCG) test performed to rule out pregnancy prior to trial entry)

2. Lactating females. Patients who agree to discontinue nursing 14 days prior to commencing treatment and do not

nurse throughout all the treatment period are eligible

- 3. Life expectancy less than 12 months
- 4. Known hypersensitivity or intolerance to 5-fluorouracil, imiguimod, sunscreen, or to any of the

excipients (including but not limited to: methylhydroxybenzoate, propylhydroxybenzoate, cetyl alcohol, stearyl alcohol, polysorbate 60, propylene glycol, methyl parahydroxybenzoate and white soft paraffin)

5. The use of brivudine, sorivudine and analogues is prohibited

#### Date of first enrolment

01/12/2014

# Date of final enrolment

01/12/2016

# Locations

#### Countries of recruitment

England

**United Kingdom** 

# Study participating centre Cancer Research UK Clinical Trials Unit

School of Cancer Studies University of Birmingham Edgbaston Birmingham United Kingdom B15 2TT

# Sponsor information

# Organisation

Queen Mary University of London (UK)

# Sponsor details

R&D Office
Barts & London School of Medicine
The QMI building
5 Walden Street
London
England
United Kingdom
E1 2EF

sponsorsrep@bartshealth.nhs.uk

#### Sponsor type

University/education

#### **ROR**

https://ror.org/026zzn846

# Funder(s)

#### Funder type

Industry

#### Funder Name

MEDA Pharmaceuticals Ltd (UK)

#### **Funder Name**

NIHR (UK) - Research for Patient Benefit (RfPB); Grant Codes: PB-PG-0110-21244

# **Results and Publications**

# Publication and dissemination plan

We intend to publish protocol, trial results and translational sub-study results.

#### Intention to publish date

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not expected to be made available

# **Study outputs**

| Output type          | Details | Date created | Date added | Peer reviewed? | Patient-facing? |
|----------------------|---------|--------------|------------|----------------|-----------------|
| Basic results        |         |              | 28/05/2020 | No             | No              |
| HRA research summary |         |              | 28/06/2023 | No             | No              |