## National breast cancer study of Epirubicin plus CMF versus classical CMF Adjuvant Therapy

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
01/07/2001		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
01/07/2001	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
25/01/2019	Cancer			

#### Plain English summary of protocol

http://www.cancerhelp.org.uk/trials/national-breast-cancer-study-of-epirubicin-as-adjuvant-therapy

## Contact information

#### Type(s)

Scientific

#### Contact name

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## Additional identifiers

ClinicalTrials.gov (NCT)

NCT00003577

Protocol serial number

BR3014

## Study information

Scientific Title

National breast cancer study of Epirubicin plus CMF versus classical CMF Adjuvant Therapy

#### Acronym

**NEAT** 

#### **Study objectives**

In women with early breast cancer, adjuvant combination chemotherapy which schedules 4 cycles of epirubicin, followed by 4 cycles of classical CMF, is significantly superior to classical CMF for 6 cycles, in terms of disease-free and overall survival.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Not provided at time of registration

#### Study design

Randomised controlled trial

#### Primary study design

Interventional

#### Study type(s)

Treatment

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

Breast

#### **Interventions**

- 1. Group A: Chemotherapy, cyclophosphamide, methotrexate and 5-fluorouracil (CMF) repeated every 3 weeks for six cycles.
- 2. Group B: Chemotherapy, epirubicin repeated every 3 weeks for four cycles followed by CMF repeated every 3 weeks for four cycles.

#### **Intervention Type**

Drug

#### Phase

Phase III

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

Epirubicin plus CMF versus classical CMF Adjuvant Therapy

#### Primary outcome(s)

- 1. 5 year disease-free survival
- 2. 5 year overall survival

#### Key secondary outcome(s))

- 1. Acute toxicity comparison between the two study arms
- 2. Quality of life and limited health economic comparisons between the two study arms, in a subset of 300 patients from designated centres

#### Completion date

31/07/2001

## Eligibility

#### Key inclusion criteria

- 1. Histological diagnosis of invasive breast cancer
- 2. Clinically early stage disease
- 3. Definitive surgery (either wide local excision or mastectomy) to the breast with complete excision of tumour
- 4. In the opinion of the clinician there is a definite indication for adjuvant chemotherapy, or the patient has been randomised to receive chemotherapy in the ABC study
- 5. Fit to receive chemotherapy in either of the two arms
- 6. No previous radiotherapy or chemotherapy
- 7. Adequate renal, hepatic and bone marrow function
- 8. Randomisation within 6 weeks of surgery, ideally within 1 month
- 9. No previous malignancy except, basal cell carcinoma or in situ carcinoma of the cervix

#### Participant type(s)

**Patient** 

#### Healthy volunteers allowed

No

#### Age group

Adult

#### Sex

Female

#### Key exclusion criteria

Not provided at time of registration

#### Date of first enrolment

30/04/1996

#### Date of final enrolment

31/07/2001

### Locations

#### Countries of recruitment

United Kingdom

England

# Study participating centre CR UK Clinical Trials Unit, Institute for Cancer Studies, The University of Birmingham, Edgbaston Birmingham United Kingdom B15 2TT

## Sponsor information

#### Organisation

University of Birmingham (UK)

#### **ROR**

https://ror.org/03angcq70

## Funder(s)

#### Funder type

Industry

#### **Funder Name**

Cancer Research UK

#### Alternative Name(s)

CR UK, Cancer Research UK - London, Cancer Research UK (CRUK), CRUK

#### **Funding Body Type**

Private sector organisation

#### **Funding Body Subtype**

Other non-profit organizations

#### Location

**United Kingdom** 

#### **Funder Name**

Pharmacia and Upjohn

## **Results and Publications**

## Individual participant data (IPD) sharing plan

## IPD sharing plan summary

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	02/11/2006		Yes	No
Results article	results	21/10/2008	25/01/2019	Yes	No
Plain English results				No	Yes