# Traditional open, open fAst track recovery and laParoscopic fASt track multimodal management for surgical patients with colon carcinomas: TAPAS study

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
13/05/2009		☐ Protocol		
Registration date 24/07/2009	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	[] Individual participant data		
10/08/2010	Cancer			

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Mr Jurrian Reurings

#### Contact details

Dunantstraat 10 Tilburg Netherlands 5017 KD j.reurings@elisabeth.nl

# Additional identifiers

**EudraCT/CTIS** number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N/A

# Study information

#### Scientific Title

A prospective cohort study to investigate cost-minimisation of Traditional open, open fAst track recovery and laParoscopic fASt track multimodal management for surgical patients with colon carcinomas: TAPAS study

#### Acronym

TAPAS study

## **Study objectives**

The TAPAS study is likely to indicate the treatment programme which is most cost minimising in the participating hospitals. Together with the evidence on equality of long term clinical effectiveness (from literature), it will justify or reject hospital investments on fast track and/or laparoscopic programmes. Dissemination of the outcome to other hospitals may have a major impact on medical expense nationwide.

## Ethics approval required

Old ethics approval format

# Ethics approval(s)

METC commission EZ Tilburg approved on the 13th January 2007 (ref: 0665)

## Study design

Prospective observational cohort study

# Primary study design

Observational

# Secondary study design

Cohort study

# 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

Colon carcinoma/colorectal surgery

#### **Interventions**

Cohort 1: Conventional open surgery is the control exposure

Cohort 2: Open surgery with fast track recovery

Cohort 3: Laparoscopic surgery with fast track recovery

Three separate time periods are used in order to prevent attrition bias. Before each new cohort starts a quality control will be carried out by the expert project advisors from the research group on fast track recovery and laparoscopic surgery. The overall follow-up is 1 year.

#### **Intervention Type**

Other

#### Phase

Not Applicable

## Primary outcome measure

Costs (direct medical and indirect non-medical). Analysed for the in hospital period and time back to work.

## Secondary outcome measures

- 1. Mortality
- 2. Post-operative morbidity
- 3. Complications (early complications less than 30 days post-operative; late complications 30 52 days post-operative)
- 4. Surgical-oncological resection margins
- 5. Hospital stay
- 6. Time back to recovery/work
- 7. Cosmesis
- 9. Pain and health status
- 10. Quality of life

All outcome measures and in particular quality of life is measured pre-operation and at 6, 12 and 52 weeks post-operation.

# Overall study start date

01/01/2007

# Completion date

01/01/2011

# **Eligibility**

# Key inclusion criteria

- 1. Male or female patients with malignant disease of the colon with indication to elective surgical resection
- 2. Aged 18 years or older
- 3. Reasonable to good health (American Society of Anaesthesiologists [ASA] grade I or II)
- 4. No known relevant allergies
- 5. Written informed consent

# Participant type(s)

Patient

# Age group

Adult

## Lower age limit

18 Years

#### Sex

Both

## Target number of participants

 $3 \times 15 \times 5 = 225$  participants

#### Key exclusion criteria

- 1. Pregnancy
- 2. Aged under 18 years
- 3. Moderate to severe systemic disease (ASA III and higher)
- 4. History of previous upper abdominal surgery
- 5. History of previous abdominal surgery
- 6. Psychiatric disease or inability to assess follow up (e.g. lack of knowledge of the Dutch language)

#### Date of first enrolment

01/01/2007

# Date of final enrolment

01/01/2011

# Locations

#### Countries of recruitment

Netherlands

# Study participating centre

Dunantstraat 10

Tilburg Netherlands 5017 KD

# Sponsor information

## Organisation

St Elisabeth Hospital (St Elisabeth Ziekenhuis) (Netherlands)

#### Sponsor details

Hilvarenbeekseweg 60 Tilburg Netherlands 5022 GC

## Sponsor type

Hospital/treatment centre

#### Website

http://www.elisabeth.nl/

#### **ROR**

https://ror.org/04gpfvy81

# Funder(s)

# Funder type

Hospital/treatment centre

#### Funder Name

St Elisabeth Hospital (St Elisabeth Ziekenhuis) (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

# **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	14/06/2010		Yes	No