# A randomised controlled trial of duct endoscopy as an adjunct to standard surgery for pathological nipple discharge

Submission date	Recruitment status	Prospectively registered
29/09/2006	No longer recruiting	Protocol
Registration date	Overall study status	Statistical analysis plan
29/09/2006	Completed	Results
Last Edited	Condition category	Individual participant data
15/03/2017	Cancer	<ul><li>Record updated in last year</li></ul>

## Plain English summary of protocol

http://www.cancerhelp.org.uk/trials/a-study-looking-at-changes-inside-the-breast-ducts-of-women-who-have-nipple-discharge

## Contact information

## Type(s)

Scientific

#### Contact name

Mr Gerald Gui

#### Contact details

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## Additional identifiers

## Protocol serial number

N0258175375

# Study information

#### Scientific Title

A randomised controlled trial of duct endoscopy as an adjunct to standard surgery for pathological nipple discharge

#### Acronym

**INTEND II** 

#### Study objectives

To clarify the future role of the intraduct approach in a systematic manner by a randomised controlled trial that would establish whether this approach should be encouraged or disparaged.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

The Royal Marsden Local Research Ethics Committee (LREC), 20/03/2006, ref: 06/Q0801/29

#### Study design

Randomised controlled trial

#### Primary study design

Interventional

#### Study type(s)

Treatment

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

Cancer: Breast

#### **Interventions**

Randomised test intervention vs standardized intervention, non-blinded (Phase III)

## Intervention Type

Other

#### Phase

Phase III

## Primary outcome(s)

- 1. Successful visualisation of lesions in the duct endoscopy group correlating to pathological findings
- 2. Size of the tissue resection in the DE versus no DE group

## Key secondary outcome(s))

Not provided at time of registration

## Completion date

31/03/2011

# **Eligibility**

## Key inclusion criteria

- 1. 100 RMH female patients undergoing duct excision biopsy for the routine management of PND with symptoms of either spontaneous symptomatic discharge from a single duct
- 2. Patients with bloodstained nipple discharge or abnormal cytology of the duct fluid
- 3. Routine preoperative screening: mammogram and ultrasound, where appropriate, in accordance with the breast unit protocol
- 4. Have not had previous periareolar incisions or surgical biopsy in the same quadrant as the target lesion
- 5. Have intact nipples
- 6. Have an ECOG score of 0-1
- 7. Able to give informed consent

#### Participant type(s)

Patient

#### Healthy volunteers allowed

No

#### Age group

Adult

#### Sex

**Female** 

#### Key exclusion criteria

- 1. Currently pregnant or pregnant within the past 6 months
- 2. Currently lactating or lactated within the past 6 months
- 3. Have received chemotherapy within the past 6 months
- 4. Have an active infection in the breast
- 5. Have a previous history of breast cancer (including invasive carcinoma, Pagets disease and DCIS)
- 6. Have silicone injections or breast implants (pre-pectoral) that disrupt the ductal architecture of the breast
- 7. Have prior breast surgery that may cause the ductal system not to communicate with the nipple, as determined by the clinician
- 8. Be unwilling or unable to provide written informed consent

#### Date of first enrolment

01/03/2006

#### Date of final enrolment

31/03/2011

## Locations

#### Countries of recruitment

United Kingdom

England

Study participating centre Breast Diagnostic Unit London United Kingdom SW3 6JJ

# Sponsor information

#### Organisation

Record Provided by the NHSTCT Register - 2006 Update - Department of Health

# Funder(s)

## Funder type

Government

#### **Funder Name**

The Royal Marsden NHS Foundation Trust (UK), NHS R&D Support Funding

# **Results and Publications**

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?

Participant information sheet Participant information sheet 11/11/2025 No Yes