

Colonic stenting as bridge to surgery versus emergency surgery for management of acute left-sided malignant colonic obstruction: a multicentre randomised trial

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| Submission date 28/12/2006 | Recruitment status No longer recruiting | <input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol |
| Registration date 28/12/2006 | Overall study status Completed | <input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results |
| Last Edited 10/10/2014 | Condition category Digestive System | <input type="checkbox"/> Individual participant data |

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Protocol serial number
N/A

Study information

Scientific Title

Acronym

Stent-in 2 study

Study objectives

Which treatment strategy is the most effective for patients with acute left-sided malignant colonic obstruction: either colonic stenting followed by elective surgery or emergency surgery.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval received from the local medical ethics committee

Study design

Randomised controlled parallel-group multicentre trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Acute left-sided malignant colonic obstruction

Interventions

Patients will be randomised to either emergency surgery (current standard treatment) or colonic stenting as bridge to elective surgery.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

Effectiveness of both strategies in terms of quality of life, morbidity and mortality.

Key secondary outcome(s)

Costs of both strategies.

Completion date

01/01/2010

Eligibility

Key inclusion criteria

1. Symptoms of left-sided malignant colonic obstruction existing less than one week defined as obstructive symptoms with dilation of the colon on plain abdominal X-ray and typical abnormalities on a gastrografenema study compatible with a malignant colonic stricture
2. Aged more than 18 years
3. Informed consent

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

Not Specified

Key exclusion criteria

1. Peritonitis, perforation, fever, sepsis or other serious complications demanding urgent surgery
2. American Society of Anesthesiologists (ASA) IV or V
3. Obstruction due to non-colonic malignancies or from a benign origin
4. Distal tumor margin less than 10 cm from the anal verge

Date of first enrolment

01/01/2007

Date of final enrolment

01/01/2010

Locations**Countries of recruitment**

Netherlands

Study participating centre

Academic Medical Center

Amsterdam

Netherlands

1100 DE

Sponsor information

Organisation

Academic Medical Center (AMC) (The Netherlands)

ROR

<https://ror.org/03t4gr691>

Funder(s)**Funder type**

Hospital/treatment centre

Funder Name

Academic Medical Center (AMC) (The Netherlands)

Alternative Name(s)

Academic Medical Center, AMC

Funding Body Type

Private sector organisation

Funding Body Subtype

Universities (academic only)

Location

Netherlands

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? |
|----------------------------------|---------------|--------------|------------|----------------|-----------------|
| Results article | results | 01/04/2011 | | Yes | No |
| Results article | results | 01/12/2014 | | Yes | No |
| Protocol article | protocol | 03/07/2007 | | Yes | No |
| Study website | Study website | 11/11/2025 | 11/11/2025 | No | Yes |