

Evaluation of hypoxia using genetic and imaging biomarker in head and neck squamous cell carcinoma

Submission date 10/10/2012	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 11/10/2012	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 16/01/2017	Condition category Cancer	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

Plain English summary of protocol

<http://www.cancerresearchuk.org/cancer-help/trials/a-study-looking-new-way-work-out-oxygen-levels-throat-cancer-bohemian-study>

Contact information

Type(s)

Scientific

Contact name

Dr Yae-eun Suh

Contact details

Clinical Oncology Department
Ground floor Lambeth Wing
St Thomas Hospital
Westminster Bridge Road
London
United Kingdom
SE1 7EH

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yae-eun.suh@kcl.ac.uk

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

13125

Study information

Scientific Title

Biomarkers of hypoxia evaluation with molecular and 64copper (II) diacetylbis (N4) methylthiosemicarbazone (CuATSM) positron emission tomography/computed tomography (PET/CT) imaging techniques in head and neck squamous cell carcinomas (BoHEMIaN study)

Acronym

BoHEMIaN

Study objectives

Hypoxia has long been identified as an important prognostic factor in head and neck cancer. It is associated with poorer loco-regional control and survival in patients treated with radiotherapy. Despite many interventional studies targeting hypoxia, the inability to prospectively identify high risk patients continues to make efforts to overcome hypoxia inefficient, as well as exposing low risk patients to unnecessary treatment toxicity. Current methods being investigated to identify hypoxia from an early stage include the use of molecular and imaging biomarkers of hypoxia. This study will look at existing and novel molecular biomarkers from diagnostic biopsy samples and correlate these with the Cu-ATSM PET/CT derived hypoxia score. The aim is to identify a hypoxic molecular signature which will allow the selection of patients who will benefit from hypoxia imaging, with subsequent tailoring of their treatment.

Ethics approval required

Old ethics approval format

Ethics approval(s)

London City and East NRES, 02/08/2012, ref: 12/LO/1123

Study design

Non-randomised interventional trial

Primary study design

Interventional

Secondary study design

Non randomised study

Study setting(s)

Hospital

Study type(s)

Diagnostic

Participant information sheet

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

Health condition(s) or problem(s) studied

Head and neck cancer

Interventions

Tissue samples will be obtained from the Head and Neck Tissue and Data Bank.

Immunohistochemistry, expression profiling and miRNA screening to investigate markers of hypoxia will be performed. Copper-ATSM PET images will be interpreted using tumour/muscle ratio and standardised uptake values, and patients will be grouped into tumours with a high or low hypoxia index. Previously defined gene/miRNA expression signatures will be tested for association with the Copper-ATSM derived hypoxia score, immunohistochemical markers and 3 month treatment response. Supervised analyses for discovery of differential gene expression and miRNA expression between high/low hypoxia index tumours will be performed.

Intervention Type

Other

Phase

Not Applicable

Primary outcome measure

Characterisation and correlation of molecular and imaging biomarkers of hypoxia

Secondary outcome measures

No secondary outcome measures

Overall study start date

14/10/2012

Completion date

31/12/2014

Eligibility**Key inclusion criteria**

1. Patients with stage III-IV histologically proven HPV negative oropharyngeal squamous cell carcinoma to be treated with radical concomitant chemotherapy and radiotherapy
2. Patients have consented to their original biopsy being stored in the tissue bank at GSTFT
3. Age > 18 years
4. ECOG Performance Status ≤ 2
5. Life expectancy > 12 weeks
6. Adequate organ function and absence of other major concomitant illness, allowing the patient to tolerate the delivery of the radiotracer
7. Patients must be able to provide written and voluntary informed consent
8. All women of childbearing age must have a negative serum or urine pregnancy test documented within 72 hours prior to study enrollment
9. Male and female participants

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

UK Sample Size: 40

Key exclusion criteria

1. Patients with impaired renal function (serum creatinine > 200)
2. Patients with severely impaired liver function
3. Serious intercurrent conditions or other nonmalignant illnesses that are uncontrolled or whose control may be affected by participation in this study
4. Any patient who has urinary or faecal incontinence
5. Previous history of cancer other than skin basal cell carcinoma
6. ECOG Performance Status ≥ 3
7. Pregnant or breastfeeding women

Date of first enrolment

14/10/2012

Date of final enrolment

31/12/2014

Locations**Countries of recruitment**

England

United Kingdom

Study participating centre

St Thomas Hospital

London

United Kingdom

SE1 7EH

Sponsor information**Organisation**

Guy's and St Thomas' NHS Foundation Trust (UK)

Sponsor details

Cranofacial Dental Floor 28
London
England
United Kingdom
SE1 9RT

Sponsor type

Hospital/treatment centre

Website

<http://www.guysandstthomas.nhs.uk/>

ROR

<https://ror.org/00j161312>

Funder(s)**Funder type**

University/education

Funder Name

King's College London Health Partners (UK)

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