

# BiopSave: validation of a novel blood test for the diagnosis of prostate cancer

<b>Submission date</b> 07/09/2012	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 10/10/2012	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 07/05/2021	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

<http://cancerhelp.cancerresearchuk.org/trials/a-study-to-see-if-a-new-blood-test-can-diagnose-prostate-cancer>

## Study website

<http://www.biosignatures.com/BiopSave>

## Contact information

### Type(s)

Scientific

### Contact name

Mr David Miller

### Contact details

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## Additional identifiers

EudraCT/CTIS number

IRAS number

**ClinicalTrials.gov number**

**Secondary identifying numbers**

PR-CT-001 2012/July (02)

## **Study information**

### **Scientific Title**

BiopSave: a blinded, prospective, non-randomised observational controlled study to validate a novel proteomic blood test for the diagnosis of prostate cancer

### **Acronym**

BiopSave

### **Study objectives**

It is hypothesised that a panel of candidate biomarkers, identified during an earlier pilot study as being present in the blood of prostate cancer patients, can be measured using the Biosignatures proteomics platform and successfully used to predict the likelihood of a patient having prostate cancer diagnosed by prostate biopsy. Diagnostic predictions will be made blinded to biopsy result and the accuracy of these predictions compared to actual biopsy results at designated analysis milestones by an independent data monitoring committee. The null hypothesis is that the candidate biomarkers identified during the pilot study had a coincidental association with the patients known to have prostate cancer in that cohort and therefore have no ability to make diagnostic predictions regarding the likelihood of prostate cancer being detected by prostate biopsy in newly recruited patients.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

NRES Committee South Central - Oxford C, 19/07/2012, ref: 12/SC/0432

### **Study design**

Blinded prospective non-randomised controlled observational study, with an anticipated duration of 54 months

### **Primary study design**

Observational

### **Secondary study design**

Non randomised controlled trial

### **Study setting(s)**

Hospital

### **Study type(s)**

Diagnostic

### **Participant information sheet**

See additional files

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

Prostate cancer in-vitro diagnostic assay validation

**Interventions**

Aside from taking of blood samples on one occasion, the study is non-interventional.

**Intervention Type**

Other

**Phase**

Not Applicable

**Primary outcome measure**

A validation of the performance of the Biosignatures BiopSave product, demonstrating the capability of this proteomic blood test to predict the diagnostic results of prostate biopsies carried out on patients presenting for assessment at urology clinic with the suspicion of having an undiagnosed prostate cancer, particularly those patients in a specific sub-set: PSA concentration between 2.5 and 20 ng/ml, DRE findings not immediately suspicious of prostate cancer, have not undergone previous prostate biopsy or resection procedures.

**Secondary outcome measures**

1. A validation of the performance of the BiopSave product in patients who have a PSA concentration outside of the primary range of interest and/or who have DRE findings which are suspicious of prostate cancer and/or who have had prostate biopsy or resection procedures carried out in the past.
2. A comparison of the performance of the BiopSave product to a variety of other prostate disease biomarkers recently reported in the literature.
3. An assessment of the capability of the BiopSave product, or related refined versions of the assay to predict the overall prostate disease diagnostic status of study participants one year after initial prostate biopsy.

**Overall study start date**

10/09/2012

**Completion date**

01/07/2018

**Eligibility****Key inclusion criteria**

1. Are between 40 and 80 years of age
2. Are considered to possibly have an undiagnosed prostate cancer
3. Are considered suitable for prostate biopsy
4. Are able to provide written informed consent agreeing to participation in the study prior to any study-specific procedures being carried out

**Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Male

**Target number of participants**

800

**Total final enrolment**

624

**Key exclusion criteria**

1. Are known to currently have another cancer or have been treated for cancer within the last five years
2. Are not considered suitable for prostate biopsy
3. Are outside of the target age range
4. Are infected with HIV, a viral Hepatitis or another highly-infectious blood-borne disease
5. Are incapable of providing written informed consent agreeing to participation in the study

**Date of first enrolment**

10/09/2012

**Date of final enrolment**

30/06/2017

## **Locations**

**Countries of recruitment**

England

United Kingdom

**Study participating centre**

**The Freeman Hospital**

Freeman Road

Newcastle-upon-Tyne

United Kingdom

NE7 7DN

## **Sponsor information**

**Organisation**

Biosignatures Limited (UK)

**Sponsor details**

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**Sponsor type**

Industry

**Website**

<http://www.biosignatures.com>

**ROR**

<https://ror.org/05jhd9y87>

## **Funder(s)**

**Funder type**

Industry

**Funder Name**

Biosignatures Limited (UK)

## **Results and Publications**

**Publication and dissemination plan**

Results will be published in specialist urology journals following un-blinding and pivotal data analysis.

Added 04/05/2021:

Early Interim 1 results presented as a poster at the HUPO 2017 conference:

Dracup et al (2017). "Bridging the "translation gap": A prospective study to validate biomarker panels predictive of prostate cancer." <https://www.hupo.org/resources/Documents/Congress/2017/HUPO2017%20Abstracts-FINAL.pdf>

**Intention to publish date**

31/12/2021

**Individual participant data (IPD) sharing plan**

The datasets generated during and/or analysed during the current study are/will be available upon request from David Miller.

Added 04/05/2021:

The datasets generated during and/or analyzed during the current study are/will be available upon request from Biosignatures Ltd.

What data in particular will be shared? All of the individual participant data collected during the trial, after deidentification.

What other documents will be available? Study protocol, informed consent form, clinical study report.

When will data be available (start and end dates)? Immediately following publication. No end date.

With whom? Investigators whose proposed use of the data has been approved by and independent review committee (IRB/Ethics Committee).

For what types of analyses? To achieve the aims in the approved proposal.

By what mechanism will data be made available? Proposals should be directed to the Newcastle Biobank (<https://www.ncl.ac.uk/biobanks/researchers/sample-access/>)

Whether participant consent was obtained? Participants gave consent for the use of their blood samples and deidentified data to be used for future research, as a “gift to science”.

Comments on data anonymization. Identifiable data was not accessed outside of the care team.

At recruitment participants were assigned a unique alpha-numeric identification code by research nursing staff. All information and blood samples which left the clinical site were only identifiable by this unique code.

Any ethical or legal restrictions? None.

## IPD sharing plan summary

Available on request

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Participant information sheet</a>	version V2		05/05/2021	No	Yes
<a href="#">Basic results</a>		04/05/2021	07/05/2021	No	No