

The Big Lung Trial: Does Short-Term Chemotherapy Improve the Survival of Patients with Non-Small Cell Lung Cancer (NSCLC)

Submission date 19/08/2002	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 19/08/2002	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 26/10/2018	Condition category Cancer	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

<http://cancerhelp.cancerresearchuk.org/trials/blt-the-big-lung-trial2>

Contact information

Type(s)

Scientific

Contact name

Dr - -

Contact details

UKCCCR Register Co-ordinator
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London
United Kingdom
NW1 2DA

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

BLT

Study information

Scientific Title

The Big Lung Trial: Does Short-Term Chemotherapy Improve the Survival of Patients with Non-Small Cell Lung Cancer (NSCLC)

Study objectives

Not provided at time of registration

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Not specified

Study type(s)

Not Specified

Participant information sheet

Health condition(s) or problem(s) studied

Lung (non-small cell)

Interventions

1. CHEMOTHERAPY REGIMEN: Three cycles of one of the following regimens should be given: Cisplatin plus vindesine; Mitomycin C, ifosfamide and cisplatin; Mitomycin C, vinblastine and cisplatin; Navelbine and Cisplatin.

Chemotherapy may be given as follows:

- A. Adjuvant Chemotherapy Option: Chemotherapy to start as soon as possible after surgery or following completion of radical radiotherapy.
- B. Neo-adjuvant Option: Chemotherapy should start as soon as possible.
- C. Supportive Care Group: Chemotherapy should start as soon as possible after randomisation and be given concurrently with supportive care.

2. CONTROL REGIMEN: No chemotherapy.

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

Not provided at time of registration

Secondary outcome measures

Not provided at time of registration

Overall study start date

01/01/1995

Completion date

31/12/2005

Eligibility

Key inclusion criteria

1. Fulfil local criteria for diagnosis of NSCLC
2. Be fit to receive, and have no clear contraindications to chemotherapy
3. Patients randomised to adjuvant chemotherapy should be able to start chemotherapy within 10 weeks of completion of surgery or radical radiotherapy
4. No concurrent malignancy, or any history of malignancy, other than non-melanomatous skin cancer within the last 3 years

Participant type(s)

Patient

Age group

Not Specified

Sex

Not Specified

Target number of participants

Not provided at time of registration

Key exclusion criteria

Not provided at time of registration

Date of first enrolment

01/01/1995

Date of final enrolment

31/12/2005

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

UKCCCR Register Co-ordinator

London

United Kingdom

NW1 2DA

Sponsor information

Organisation

NHS R&D 'Time-Limited' National Programmes

Sponsor details

Commissioning Units

Canynge Hall

Whiteladies Road

Bristol

United Kingdom

BS8 2PR

Sponsor type

Government

ROR

<https://ror.org/02wnqcb97>

Funder(s)

Funder type

Government

Funder Name

NHS Research and Development Programme (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

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Plain English results				No	Yes
Results article	results	01/07/2004		Yes	No
Results article	results	01/05/2005		Yes	No
Results article	results	20/10/2005		Yes	No