A randomised controlled trial to assess the costeffectiveness of intensive versus no scheduled follow-up in patients who have undergone resection for colorectal cancer with curative intent - pilot study

Submission date	Recruitment status	Prospectively registered
25/04/2003	No longer recruiting	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
25/04/2003	Completed	Results
Last Edited	Condition category	[] Individual participant data
30/05/2012	Cancer	Record updated in last year

Plain English summary of protocol

http://cancerhelp.cancerresearchuk.org/trials/a-trial-looking-at-followup-after-colorectal-surgery

Study website

http://www.facs.soton.ac.uk/

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers HTA 99/10/09

Study information

Scientific Title

Acronym

FACS (Follow-up After Colorectal Surgery)

Study objectives

Aim: To assess the cost-effectiveness of intensive versus no scheduled follow-up in patients who have undergone resection for colorectal cancer with curative intent.

Objectives:

- 1. To confirm the feasibility of recruiting 5000 participants from 20 centres to the trial in two years.
- 2. To assess the effectiveness and cost-effectiveness of serial blood CEA measurement in detecting treatable recurrence and thereby improving 5 year survival.
- 3. To assess the effectiveness and cost-effectiveness of hospital follow-up involving regular ultrasound and CT imaging compared with no imaging and follow-up in general practice in detecting treatable recurrence and thereby improving 5 year survival.

Details of this study can also be found at: http://www.hta.ac.uk/1229
The ISRCTN record of main FACS trial that followed this pilot study can be found at: http://www.controlled-trials.com/ISRCTN41458548.

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)

Hospital

Study type(s)

Treatment

Participant information sheet

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

Health condition(s) or problem(s) studied

Cancer (neoplasms): Rectum; Cancer (neoplasms): Colon

Interventions

Monitoring of carcinoembryonic antigen (CEA) in primary care vs intensive imaging in hospital. Follow-up after 3 months.

See details of ISRCTN41458548: FACS main trial on http://www.controlled-trials.com/isrctn/trial/ISRCTN41458548/0/41458548.html

Intervention Type

Other

Phase

Not Applicable

Primary outcome measure

Not provided at time of registration.

Secondary outcome measures

Not provided at time of registration.

Overall study start date

01/09/2002

Completion date

29/02/2004

Eligibility

Key inclusion criteria

Patients who have undergone resection for colorectal cancer with curative intent.

Participant type(s)

Patient

Age group

Not Specified

Sex

Both

Target number of participants

Not provided at time of registration.

Key exclusion criteria

Not provided at time of registration.

Date of first enrolment

01/09/2002

Date of final enrolment

29/02/2004

Locations

Countries of recruitment

England

United Kingdom

Study participating centre School of Medicine

Southampton United Kingdom SO16 6YD

Sponsor information

Organisation

Department of Health (UK)

Sponsor details

Quarry House Quarry Hill Leeds United Kingdom LS2 7UE +44 (0)1132 545 843 Sheila.Greener@doh.gsi.gov.uk

Sponsor type

Government

Website

http://www.dh.gov.uk/en/index.htm

ROR

https://ror.org/03sbpja79

Funder(s)

Funder type

Government

Funder Name

NIHR Health Technology Assessment Programme - HTA (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