# A prospective randomised phase III study of observation versus screening MRI and preemptive treatment in castrate resistant prostate cancer patients with spinal metastasis

Submission date	Recruitment status	[X] Prospectively registered		
28/11/2012	No longer recruiting	☐ Protocol		
Registration date 29/11/2012	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	[] Individual participant data		
14/03/2022	Cancer			

#### Plain English summary of protocol

http://www.cancerresearchuk.org/cancer-help/trials/a-trial-looking-mri-scans-pick-up-early-signs-prostate-cancer-pressing-spine-prompts

# Contact information

## Type(s)

Scientific

#### Contact name

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#### Contact details

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## Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

## Secondary identifying numbers

13129

# Study information

#### Scientific Title

A prospective randomised phase III study of observation versus screening MRI and preemptive treatment in castrate resistant prostate cancer patients with spinal metastasis

#### Acronym

**PROMPTS** 

#### **Study objectives**

Does detection of radiological spinal cord compression (rSCC) by screening magnetic resonance imaging (MRI) of the spine and pre-emptive treatment reduce the incidence of clinical spinal cord compression (SCC) in asymptomatic castrate resistant prostate cancer (CRPC) patients with spinal metastasis?

More details can be found at: http://public.ukcrn.org.uk/Search/StudyDetail.aspx?StudyID=13129

#### Ethics approval required

Old ethics approval format

## Ethics approval(s)

12/LO/1109

## Study design

Randomised; Interventional; Design type: Screening

## Primary study design

Interventional

## Secondary study design

Randomised controlled trial

## Study setting(s)

Hospital

## Study type(s)

Screening

#### Participant information sheet

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

Prostate Cancer

#### **Interventions**

Control Group: Patients followed up as per standard practice i.e. in accordance with National Institute of Clinical Excellence (NICE) guidelines, MRI spine performed if patient develops clinical neurological deficit or significant spinal pain with treatment given if there is overt SCC on MRI.

Intervention Group, Baseline screening MRI and pre-emptive treatment to sites of radiological (r) SCC; following pre-emptive treatment patients will receive an MRI scan every 6 months (rSCC is defined as radiological spinal cord compromise).

#### Intervention Type

Other

#### Phase

Phase III

#### Primary outcome measure

Not provided at time of registration

#### Secondary outcome measures

Not provided at time of registration

#### Overall study start date

30/12/2012

#### Completion date

01/05/2015

# **Eligibility**

#### Key inclusion criteria

- 1. Histologically / cytologically confirmed adenocarcinoma of the prostate or clinical diagnosis of prostate cancer with osteoblastic bone metastases and Prostate-specific antigen (PSA) ≥ 100ng /ml
- 2. Castrate resistant disease\*
- 3. One or more spinal metastasis on imaging (technetium bone scan with confirmatory X-ay as appropriate clinically) undertaken at any time during the patients illness
- 4. Life expectancy of 6 months or more
- 5. Eastern Cooperative Oncology Group (ECOG) performance status 02
- 6. Written, informed consent
- \*(rising PSA (> 5 ng /ml and >50% rise from nadir) after luteinizing hormone releasing hormone agonist (LHRHa) therapy or orchidectomy with or without antiandrogen)

#### Participant type(s)

Patient

#### Age group

Adult

#### Sex

Male

## Target number of participants

Planned Sample Size: 541; UK Sample Size: 541

#### Key exclusion criteria

- 1. Back pain related to metastatic cancer, requiring regular (daily) analgesics
- 2. Previous active malignancy within the last 5 years other than basal cell carcinoma or low grade superficial bladder cancer
- 3. Current or previous spinal cord compression (SCC) or neurologic deficit
- 4. Brain metastasis
- 5. Spinal MRI within last 12 months
- 6. CT or PET CT scan of thorax AND abdomen within the last 6 months
- 7. Previous external beam radiotherapy to the vertebra or spinal surgery with the primary aim to prevent or treat SCC+
- 8. Serious or uncontrolled coexistent non-malignant diseases
- 9. Any contra indications for MRI
- 10. Inability to comply with neurologic and Quality of Life (QoL) assessments
- 11. Previous palliative radiotherapy to painful spinal metastases in now asymptomatic patients is permissible

## Date of first enrolment

30/12/2012

#### Date of final enrolment

01/05/2015

## Locations

#### Countries of recruitment

England

**United Kingdom** 

# Study participating centre

15 Cotswold Road

Sutton United Kingdom SM2 5NG

# Sponsor information

#### Organisation

Institute of Cancer Research Experimental Cancer Medicine Centre

## Sponsor details

Cancer Research 123 Old Brompton Road London United Kingdom SW7 3RP

#### Sponsor type

Research organisation

#### Website

http://www.ecmcnetwork.org.uk/network-centres/london-institute-cancer-research/

#### **ROR**

https://ror.org/043jzw605

# Funder(s)

#### Funder type

Charity

#### **Funder Name**

Cancer Research UK (UK) Grant Codes: C8262/A13749

#### Alternative Name(s)

CR\_UK, Cancer Research UK - London, CRUK

#### **Funding Body Type**

Private sector organisation

#### Funding Body Subtype

Other non-profit organizations

#### Location

**United Kingdom** 

## **Results and Publications**

#### Publication and dissemination plan

Not provided at time of registration

#### Intention to publish date

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

Not provided at time of registration

#### 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 14/03/2022 Yes No