# A phase II randomised study of chemoanticoagulation (Gemcitabine-Dalteparin) vs Chemotherapy alone (Gemcitabine) for locally advanced and metastatic pancreatic adenocarcinoma

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
12/09/2003		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
12/09/2003	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
04/10/2012	Cancer			

#### Plain English summary of protocol

http://cancerhelp.cancerresearchuk.org/trials/a-trial-of-chemotherapy-with-or-without-dalteparin-for-advanced-pancreatic-cancer

## **Contact information**

## Type(s)

Scientific

#### Contact name

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## Additional identifiers

EudraCT/CTIS number

**IRAS** number

### ClinicalTrials.gov number

NCT00462852

### Secondary identifying numbers

N0084122253

## Study information

#### Scientific Title

#### **Study objectives**

To assess the reduction in incidence of venous thrombo-embolism by immediate therapeutic anti-coagulation.

As of 06/08/09 this record has been extensively updated. All updates can be found under the relavent field with the above update date.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Not provided at time of registration

#### Study design

Multicentre randomised controlled trial

#### Primary study design

Interventional

## Secondary study design

Randomised controlled trial

## Study setting(s)

Hospital

## Study type(s)

Treatment

### Participant information sheet

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

Pancreatic cancer

#### **Interventions**

Current information as of 06/08/09:

Patients are stratified according to disease progression (locally advanced vs metastatic) and Karnofsky performance status (≥ 80% vs < 80%), then randomised to 1 of 2 treatment arms: Arm I: Patients receive gemcitabine hydrochloride IV over 30 minutes once weekly in weeks 1-7 and 9-11.

Arm II: Patients receive low molecular weight dalteparin subcutaneously once daily in weeks 1-12. Patients also receive gemcitabine hydrochloride as in arm I. Blood samples are acquired at baseline for analysis of circulating tissue factor and vascular endothelial growth factor. After completion of study treatment, patients are followed periodically.

Initial information at time of registration:

Randomised controlled trial comparing (a) gemcitabine anticoagulation therapy versus (b) gemcitabine standard treatment.

#### Intervention Type

Drug

#### Phase

Phase II

### Drug/device/biological/vaccine name(s)

Gemcitabine-Dalteparin

#### Primary outcome measure

Added 06/08/09:

Incidence of venous thromboembolism reduction

#### Secondary outcome measures

Added 06/08/09:

- 1. Early survival benefits
- 2. Toxicity
- 3. Overall survival
- 4. Time to disease progression
- 5. Effect of drug combination on serological markers of thromboangiogenesis

#### Overall study start date

06/01/2003

#### Completion date

01/12/2006

## Eligibility

#### Key inclusion criteria

Added 06/08/09:

- 1. Histologically or cytologically confirmed metastatic or locally advanced adenocarcinoma of the pancreas (Patients with clinical 'high probability' of pancreatic cancer and biopsy suggestive but not diagnostic of pancreatic cancer may be eligible based on review by the principal investigator)
- 2. Measurable or evaluable disease
- 3. Karnofsky performance status (PS) 60-100% OR WHO PS 0-2
- 4. Life expectancy > 12 weeks
- 5. Absolute neutrophil count > 2,000/mm<sup>3</sup>
- $6. WBC > 3.000/mm^3$
- 7. Platelet count > 100,000/mm<sup>3</sup>

- 8. Creatinine clearance > 50 mL/min
- 9. INR  $\leq$  1.5 times upper limit of normal (ULN)
- 10. Bilirubin < 1.5 times ULN (stent allowed)
- 11. Adequate contraceptive measures in place

### Participant type(s)

Patient

### Age group

**Not Specified** 

#### Sex

Both

### Target number of participants

98

#### Key exclusion criteria

Added 06/08/09:

- 1. Clinical evidence of active venous thromboembolism
- 2. Pregnant or lactating
- 3. Cerebrovascular incident within the last 6 months
- 4. Obvious contraindication to anticoagulation, including the following:
- 4.1. Bleeding diathesis
- 4.2. Active peptic ulcer
- 4.3. Ulcerating cancer into duodenum
- 5. History of other advanced malignancy
- 6. Gross hematuria
- 7. Melaena or gross evidence of gastrointestinal bleeding (other than piles)
- 8. Requiring a central line
- 9. Prior concurrent therapy
- 10. Other significant medial or psychiatric illness that, in the opinion of the investigator, would preclude study participation

#### Date of first enrolment

06/01/2003

#### Date of final enrolment

01/12/2006

## Locations

#### Countries of recruitment

England

United Kingdom

### Study participating centre

### **Department of Oncology**

Hull United Kingdom HU8 9HE

## Sponsor information

#### Organisation

Department of Health (UK)

#### Sponsor details

Richmond House 79 Whitehall London United Kingdom SW1A 2NL

#### Sponsor type

Government

#### Website

http://www.doh.gov.uk

## Funder(s)

### Funder type

Industry

#### Funder Name

The North and South Bank Research and Development Consortium (UK) (NHS R&D Support Funding)

#### **Funder Name**

Pfizer Inc

## **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?
Results article	results	01/07/2010		Yes	No
Results article	results	01/06/2012		Yes	No