

# A study of radiotherapy with or without chemotherapy in primary central nervous system (CNS) lymphoma

<b>Submission date</b> 28/02/2001	<b>Recruitment status</b> Stopped	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 28/02/2001	<b>Overall study status</b> Stopped	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 29/07/2009	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

Not provided at time of registration

## 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

BR06

# Study information

## Scientific Title

## Study objectives

To evaluate the effect of CHOP chemotherapy on event-free and overall survival.

## 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

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

Cancer

## Interventions

Group 1: radiotherapy alone (54 Gy total dose in 27 fractions)

Group 2: radiotherapy as above, followed after 4 weeks by six cycles of CHOP chemotherapy given at 3-week intervals (cyclophosphamide 750 mg/m<sup>2</sup> iv, adriamycin 50 mg/m<sup>2</sup> iv, vincristine 1.4 mg/m<sup>2</sup> iv (max 2 mg) and prednisolone (20 mg po tds for 5 days)

## Intervention Type

Drug

## Phase

Not Specified

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

CHOP chemotherapy

## Primary outcome measure

Survival.

**Secondary outcome measures**

Event-free survival.

**Overall study start date**

01/11/1988

**Completion date**

01/10/1995

**Reason abandoned (if study stopped)**

Slow accrual

## **Eligibility**

**Key inclusion criteria**

1. Pathologically proven primary cerebral lymphoma
2. Aged 18-75
3. No previous radiotherapy or chemotherapy
4. Adequate neurological, physical and mental function

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Upper age limit**

75 Years

**Sex**

Not Specified

**Target number of participants**

Target: 90, accrued: 53

**Key exclusion criteria**

Not provided at time of registration

**Date of first enrolment**

01/11/1988

**Date of final enrolment**

01/10/1995

# Locations

## Countries of recruitment

England

United Kingdom

## Study participating centre

**MRC Clinical Trials Unit**

London

United Kingdom

NW1 2DA

# Sponsor information

## Organisation

Medical Research Council (MRC) (UK)

## Sponsor details

20 Park Crescent

London

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[clinical.trial@headoffice.mrc.ac.uk](mailto:clinical.trial@headoffice.mrc.ac.uk)

## Sponsor type

Research council

## Website

<http://www.mrc.ac.uk>

# Funder(s)

## Funder type

Research council

## Funder Name

Medical Research Council (MRC) (UK)

## Alternative Name(s)

Medical Research Council (United Kingdom), UK Medical Research Council, MRC

**Funding Body Type**

Government organisation

**Funding Body Subtype**

National government

**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****IPD sharing plan summary**

Not provided at time of registration

**Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results in: GM Mead, NM Bleehen, A Gregor, J Bullimore, R Rampling, JT Roberts, M Glaser, P Lantos, JW Ironside, TH Moss, M Brada, JB Whaley and SP Stenning for the MRC Brain Tumour Working Party (). A Medical Research Council Randomised Trial in patients with primary cerebral non-Hodgkin lymphoma. Cancer 89(6): 1359-1370	15/09/2000		Yes	No