# A phase II trial of docetaxel, cisplatin and 5fluorouracil (5-FU) chemotherapy in locally advanced and metastatic carcinoma of the penis

Submission date	Recruitment status	[X] Prospectively registered	
30/01/2008	No longer recruiting	☐ Protocol	
Registration date	Overall study status	Statistical analysis plan	
30/04/2008	Completed	[X] Results	
Last Edited	Condition category	[] Individual participant data	
26/10/2018	Cancer		

## Plain English summary of protocol

http://cancerhelp.cancerresearchuk.org/trials/trial-chemotherapy-cancer-penis-penile-tpf

## Contact information

## Type(s)

Scientific

#### Contact name

Dr Amit Bahl

#### Contact details

Bristol Haematology & Oncology Centre Horfield Road Bristol United Kingdom BS28ED

## Additional identifiers

EudraCT/CTIS number

**IRAS** number

ClinicalTrials.gov number

Secondary identifying numbers

ICR-CTSU/2008/10016

## Study information

#### Scientific Title

A phase II trial of docetaxel, cisplatin and 5-fluorouracil (5-FU) chemotherapy in locally advanced and metastatic carcinoma of the penis

### Acronym

Penile TPF

## **Study objectives**

The goal is to determine, in inoperable cancer of the penis, the feasibility and efficacy of giving chemotherapy consisting of two drugs that are known to be active (cisplatin and 5-fluorouracil [5-FU]) with a newer drug, docetaxel. This combination (TPF) has been proven to be highly active in some similar cancers. This is a limited phase II trial to gain insight into the potential activity of this regimen.

## Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Not provided at time of registration

### Study design

Non-randomised controlled trial

## Primary study design

Interventional

## Secondary study design

Non randomised study

## 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

Penis cancer

#### **Interventions**

All participants will receive the same regimen. The regimen consists of docetaxel 75 mg/m2 day 1 + cisplatin 60 mg/m2 day 1 + 5FU 750 mg/m2 days 1-5 with a cycle of 21 days, three cycles to be given in total prior to formal re-staging.

## Intervention Type

#### Phase

Phase I/II

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

Cisplatin, 5-Fluorouracil, docetaxel

## Primary outcome measure

Overall response rate (complete remission rate + partial remission rate). This will be objectively assessed by magnetic resonance imaging (MRI) or computed tomography (CT) scan after completion of the proposed 3 cycles of TPF chemotherapy or at the time of discontinuation of chemotherapy. Scans will be reviewed centrally to confirm outcome.

## Secondary outcome measures

- 1. Proportion of patients with inoperable locoregional disease rendered operable by TPF chemotherapy. Timepoints of measurement not yet defined as of 30 January 2008
- 2. Progression-free survival. Timepoints of measurement not yet defined as of 30 January 2008.
- 3. Overall survival. Duration of follow-up not yet defined as of 30 January 2008.
- 4. Acute toxicity (as determined by Common Toxicity Criteria [CTC]) after each cycle and at 3 months
- 5. Late toxicity (CTC). Timepoints of measurement not yet defined as of 30 January 2008.

## Overall study start date

01/06/2008

## Completion date

01/06/2010

## **Eligibility**

## Key inclusion criteria

Patients with cancer of the penis fit to receive chemotherapy as palliative or definitive treatment or as treatment on relapse will be eligible. It is expected that the decision to include some groups of patients (e.g., Stage T3, N1 patients) will depend on local policy - discussion within the multidisciplinary Team (MDT) of all eligible patients will be encouraged.

#### Inclusion criteria:

- 1. Male, >18 years
- 2. Histologically-proven squamous cell carcinoma of the penis
- 3. Eligible disease stage:
- 3.1. M1
- 3.2. M0, Tx, N3 (i.e. involvement of deep inquinal or pelvic lymph nodes)
- 3.3. M0, Tx, N2 (i.e. involvement of multiple or bilateral superficial lymph nodes) and deemed inoperable by MDT
- 3.4. M0, T3 N1 (tumour invades urethra or prostate and single inguinal lymph node involved)
- 3.5. M0, T4 (tumour invades other adjacent structures) (any N)
- 4. Glomerular filtration rate (GFR) greater or equal to 60 ml/min
- 5. Written, informed consent

## Participant type(s)

**Patient** 

## Age group

Adult

## Lower age limit

18 Years

#### Sex

Male

## Target number of participants

26

#### Key exclusion criteria

- 1. Pure verrucous carcinoma of the penis
- 2. Squamous carcinoma of the urethra
- 3. T1 N1 M0 disease
- 4. T2 N1 M0 disease
- 5. T3 N1 M0 where the MDT feels that neoadjuvant chemotherapy is not advisable
- 6. Unfit for this regimen (as assessed by the MDT)
- 7. Previous chemotherapy
- 8. Previous radiotherapy (subsequent radiotherapy for loco-regional consolidation is permitted)
- 9. Contraindication to chemotherapy

#### Date of first enrolment

01/06/2008

## Date of final enrolment

01/06/2010

## Locations

## Countries of recruitment

England

**United Kingdom** 

## Study participating centre Bristol Haematology & Oncology Centre

Avon United Kingdom BS2 8ED

## Sponsor information

## Organisation

Sponsor not yet defined (UK)

## Sponsor details

-

**United Kingdom** 

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## Sponsor type

Not defined

## Funder(s)

## Funder type

Charity

#### **Funder Name**

Cancer Research UK

## 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

## 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	12/11/2013		Yes	No