

# Peri-operative strategy in colonic surgery: LAParoscopy and/or FASt track multimodal management versus standard care (LAFA study)

<b>Submission date</b> 20/12/2005	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 20/12/2005	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 13/05/2009	<b>Condition category</b> Surgery	<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

**Study website**  
<http://www.lafa-trial.nl>

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

## **Secondary identifying numbers**

NTR222; ZonMw reference: 945-06-901

# **Study information**

## **Scientific Title**

## **Acronym**

LAFA study

## **Study objectives**

That laparoscopic surgery alone or in combination with fast track peri-operative care is to be preferred over open surgery with standard care in patients having segmental colectomy for malignant disease.

## **Ethics approval required**

Old ethics approval format

## **Ethics approval(s)**

Received from local medical ethics committee

## **Study design**

Multicentre randomised double-blind active controlled parallel group 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**

Laparoscopic surgery

## **Interventions**

Laparoscopic surgery and fast track peri-operative care.

## **Intervention Type**

Procedure/Surgery

## **Phase**

Not Applicable

**Primary outcome measure**

1. Total post-operative hospital stay including readmission within 30 days
2. Quality of life measured by validated questionnaires (SF-36/Gigli) at two and four weeks after surgery
3. Medical and non-medical costs

**Secondary outcome measures**

1. Morbidity
2. Patient satisfaction measured by standardised questionnaires
3. Readmission percentage

**Overall study start date**

01/07/2005

**Completion date**

31/12/2008

## **Eligibility**

**Key inclusion criteria**

1. Aged between 40 and 80 years
2. Colorectal cancer including colon and rectosigmoid cancers
3. Informed consent

**Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Both

**Target number of participants**

400

**Key exclusion criteria**

1. Prior midline laparotomy
2. American Society of Anaesthesiologists (ASA) grade IV
3. Laparoscopic surgeon not available
4. Prior upper and/or lower midline laparotomy
5. Emergency colectomy
6. Contraindications for epidural (coagulation disorders)
7. Planned stoma

**Date of first enrolment**

01/07/2005

**Date of final enrolment**

31/12/2008

## **Locations**

**Countries of recruitment**

Netherlands

**Study participating centre****Academic Medical Centre**

Amsterdam

Netherlands

1100 DD

## **Sponsor information**

**Organisation**

Academic Medical Centre (AMC) (Netherlands)

**Sponsor details**

Meibergdreef 9

Amsterdam

Netherlands

1105 AZ

**Sponsor type**

University/education

**Website**

<http://www.amc.uva.nl/>

**ROR**

<https://ror.org/03t4gr691>

## **Funder(s)**

**Funder type**

Research organisation

**Funder Name**

The Netherlands Organisation for Health Research and Development (ZonMw) (Netherlands)

# 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