Phase I/II feasibility study of cetuximab with 5fluorouracil (5FU) and mitomycin C or cisplatin with concurrent radiotherapy in muscle invasive bladder cancer

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered			
17/08/2011		☐ Protocol			
Registration date	Overall study status Completed	Statistical analysis plan			
17/08/2011		[X] Results			
Last Edited 11/01/2023	Condition category	[] Individual participant data			

Plain English summary of protocol

https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-trial-of-cetuximab-with-chemotherapy-and-radiotherapy-for-muscle-invasive-bladder-cancer-tuxedo

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

Clinical Trials Information System (CTIS)

2009-014805-15

Protocol serial number

Study information

Scientific Title

Phase I/II feasibility study of cetuximab with 5-fluorouracil (5FU) and mitomycin C or cisplatin with concurrent radiotherapy in muscle invasive bladder cancer

Acronym

TUXEDO

Study objectives

This is a Phase I combination study, followed by an early phase II, single-arm, multicentre, openlabel study.

The primary objective of the phase I study is to determine the feasibility and toxicity profile of cetuximab with 5FU and mitomycin C, and in addition to determine the optimal dose of cisplatin in combination with cetuximab. Feasibility will be based on assessment of using the proposed drugs in combination with radical radiotherapy.

The primary objective of the phase II study is to assess preliminary evidence of the efficacy of the treatment selected from phase I, by determining whether a combination of radiotherapy with cetuximab, and chemotherapy, improves cystoscopic local control of advanced bladder cancer at three months after treatment.

Ethics approval required

Old ethics approval format

Ethics approval(s)

11/LO/1313

Study design

Non-randomised; Interventional; Design type: Treatment

Primary study design

Interventional

Study type(s)

Screening

Health condition(s) or problem(s) studied

Topic: National Cancer Research Network; Subtopic: Bladder Cancer; Disease: Bladder (advanced)

Interventions

- 1. FU: In cohort I, patients receive 5FU in weeks 1 and 4 as a continuous infusion for 5 days (total of 10 days) concurrently with radiotherapy 2. Cetuximab, Loading dose given in week before start of RT, then given on day 1 of each week of RT (weeks 1 7)
- 3. Cisplatin: Patients in cohorts II and III of phase I receive cisplatin on the first day of each week of radiotherapy (weeks 1 7)
- 4. Mitomycin C: In cohort I, patients receive mitomycin C on day 1 only of week 1 of radiotherapy

5. Radical Radiotherapy: All patients in the study receive 64Gy in 32 fractions (given over 5 days in weeks 1 - 7)

Follow Up Length: 18 month(s); Study Entry: Registration only

Intervention Type

Drug

Phase

Phase I/II

Drug/device/biological/vaccine name(s)

Mitomycin C, 5FU, cetuximab, cisplatin

Primary outcome(s)

Feasibility and toxicity; Timepoint(s): Phase I outcome

Key secondary outcome(s))

Cystoscopic local control at three months post-treatment; Timepoint(s): Primary outcome in Phase II

Completion date

29/11/2013

Eligibility

Key inclusion criteria

- 1. Aged 18 or over
- 2. Histologically proven invasive bladder carcinoma [adenocarcinoma, transitional cell carcinoma (TCC) or squamous cell carcinoma (SCC)]
- 3. Localised muscle invasive carcinoma either surgically or by imaging (T2-T4a N0 M0)
- 4. World Health Organisation (WHO) performance status grade 0 to 1
- 5. Adequate haematological function (haemoglobin > 10g/dl; white blood cells (WBC) > 3.0x109/L; absolute neutrophils count (ANC) > 1.5x109/L; platelet count > 100,000/mm3)
- 6. Adequate hepatic function {billirubin < 1.5 upper limit fo normal (ULN), Alkaline phosphatase (ALP) < 2xULN, [aspartate aminotransferase (AST)/alanine aminotransferase (ALT)] < 3.0xULN}
- 7. Glomerular filtration rate (GFR) > 40 ml/min [by ethylenediamine tetraacetic acid (EDTA) clearance, 24h urine collection, or Cockcroft-Gault]
- 8. Available for long-term follow-up
- 9. Able to receive a radical course of radiotherapy
- 10. Patients written informed consent
- 11. Have received 3-4 cycles of neo-adjuvant chemotherapy (preferably Gemcitabine/Cisplatin) with a positive response (confirmed by cystoscopy & radiological response) with pre neo-adjuvant imaging computerised tomography (CT) scan or magnetic resonance imaging (MRI) of abdomen and pelvis.; Target Gender: Male & Female; Lower Age Limit 18 years

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Total final enrolment

33

Key exclusion criteria

- 1. Uncontrolled systemic disease which would preclude the patient from participating in the study including severe or uncontrolled cardiovascular disease (congestive heart failure New York Heart Association (NYHA) III or IV, unstable angina pectoris, history of myocardial infarction within the last twelve months, significant arrhythmias
- 2. Pregnant or breast feeding
- 3. Concomitant or previous malignancy which is likely to interfere with protocol treatment
- 4. Inflammatory bowel disease
- 5. Previous pelvic radiotherapy
- 6. Bilateral hip replacements compromising accurate radiotherapy planning
- 7. Evidence of significant clinical disorder, or laboratory finding which, in the opinion of the investigator, makes it undesirable for the patient to participate in the trial
- 8. Male and female patients (of childbearing age) not using adequate contraception
- 9. Significant decrease in GFR during previous chemotherapy treatments
- 10. Widespread carcinoma in situ (CIS), or CIS remote from the muscle invasive tumour
- 11. Simultaneous upper tract, urethral or prostatic transitional cell carcinoma
- 12. Untreated hydronephrosis
- 13. Participation in another trial within the previous 30 days [except for observational studies, e.
- g. Bladder Cancer Prognosis Programme (BCPP)]

Date of first enrolment

07/11/2011

Date of final enrolment

29/11/2013

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

Cancer Research UK Clinical Trials Unit

Birmingham United Kingdom B15 2TT

Sponsor information

Organisation

University of Birmingham

ROR

https://ror.org/03angcq70

Funder(s)

Funder type

Government

Funder Name

Clinical Trials Awards and Advisory Committee (CTAAC) (UK) Grant Codes: C547/A10900

Results and Publications

Individual participant data (IPD) sharing plan

Not added at time of registration

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created		Peer reviewed?	Patient- facing?
Results article		31/07 /2022	02/08 /2022	Yes	No
Abstract results		20/05 /2017	14/04 /2022	No	No
Abstract results		20/02 /2020	14/04 /2022	No	No
HRA research summary			28/06 /2023	No	No
Other publications	Results of sub-study investigating whether urinary DNA analysis can be used to investigate whether treatment response is associated with tumor mutations	07/09 /2021	14/04 /2022	Yes	No