Sequencing of Chemotherapy and Radiotherapy in Adjuvant Breast cancer

Submission date	Recruitment status No longer recruiting	Prospectively registered		
01/07/2001		☐ Protocol		
Registration date	Overall study status Completed	Statistical analysis plan		
01/07/2001		[X] Results		
Last Edited	Condition category	[] Individual participant data		
25/01/2019	Cancer			

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

ClinicalTrials.gov (NCT) NCT00003893

Protocol serial number BR3015

Study information

Scientific Title

Sequencing of Chemotherapy and Radiotherapy in Adjuvant Breast cancer

Acronym

SECRAB

Study objectives

To answer reliably two questions in the timing of delivery of chemotherapy and radiotherapy in the adjuvant treatment of early breast cancer:

- 1. Can local control be improved by synchronous delivery of adjuvant chemotherapy and radiotherapy thereby not delaying the administration of either modality?
- 2. Can synchronous chemotherapy and radiotherapy be given safely without significant enhancement of acute or late toxicity, without compromising on dose intensity of either modality and without adversely affecting quality of life or cosmesis?

Ethics approval required

Old ethics approval format

Ethics approval(s)

West Midlands Research Ethics Committee, 09/04/1998, MREC/98/7/16

Study design

Randomised controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Breast cancer

Interventions

Two arms:

Arm 1 - Synchronous treatment (Chemotherapy - Radiotherapy - Chemotherapy)

Arm 2 - Sequential treatment (Chemotherapy - Radiotherapy)

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

Local tumour recurrence rates at 5 and 10 years

Key secondary outcome(s))

- 1. Distant and overall recurrence rates
- 2. Survival at 5, 10 and 15 years

- 3. Acute toxicity causing significant treatment delay or dose reduction
- 4. Other late effects of treatment

Completion date

25/03/2004

Eligibility

Key inclusion criteria

- 1. Histological diagnosis of invasive breast carcinoma (unilateral if participating in the Cosmesis Study)
- 2. Wide local excision or mastectomy with macroscopic complete excision of clinically early stage disease and no evidence of metastases
- 3. There is a clear indication for both adjuvant chemotherapy and radiotherapy, or the patient has been randomised to these treatments in another study
- 4. The intended schedules can be given synchronously and the patient is considered suitable to receive either treatment sequence
- 5. Medically fit enough to complete chemotherapy and radiotherapy, with adequate cardiac, renal, hepatic and bone marrow function
- 6. The patient has given written informed consent
- 7. No prior chemotherapy (other than hormone manipulation)
- 8. No prior malignancy (except skin basal/squamous cell or in situ carcinoma)
- 9. Not currently pregnant or lactating, no intention of pregnancy during treatment
- 10. No other medical or social contra-indication to entry and follow-up

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

Female

Key exclusion criteria

N/A

Date of first enrolment

02/07/1998

Date of final enrolment

25/03/2004

Locations

Countries of recruitment

United Kingdom

Study participating centre CRUK Clinical Trials Unit

Birmingham United Kingdom B15 2TT

Sponsor information

Organisation

University Hospitals Birmingham NHS Foundation Trust (UK)

ROR

https://ror.org/014ja3n03

Funder(s)

Funder type

Charity

Funder Name

Cancer Research UK (UK)

Alternative Name(s)

CR_UK, Cancer Research UK - London, Cancer Research UK (CRUK), CRUK

Funding Body Type

Private sector organisation

Funding Body Subtype

Other non-profit organizations

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/04/2006	25/01/2019	Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Plain English results				No	Yes