

# A randomised two arm trial of modestly accelerated radiotherapy with synchronous cisplatin chemotherapy versus conventional radiotherapy with synchronous cisplatin chemotherapy in the treatment of head and neck squamous cell carcinoma: a pilot study

<b>Submission date</b> 30/09/2004	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 30/09/2004	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 01/10/2012	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**

N0063116003

## **Study information**

**Scientific Title**

**Study objectives**

To assess tolerability (absence of grade IV reactions) of synchronous chemotherapy and modestly accelerated radiotherapy.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Not provided at time of registration

**Study design**

Randomised/Prospective Pilot Phase I/II clinical trial

**Primary study design**

Interventional

**Secondary study design**

Randomised controlled trial

**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**

Cancer: Head and neck

**Interventions**

Twelve eligible patients will receive accelerated radiotherapy (six fractions per week, over 5½ weeks to a total dose of 68 Gray). The extra fraction will be given on any day Monday to Friday (preferably Monday or Friday) and treatment will not normally be given at weekends. Cisplatin chemotherapy will be given at a dose of 100 mg/m<sup>2</sup> on day one of chemotherapy and then again three weeks later. Acute and late radiation toxicities will be monitored using the

Danish Head and Neck Cancer Study Group (DAHANCA) Acute and Late Morbidity Scoring Criteria.

**Intervention Type**

Other

**Phase**

Phase I/II

**Primary outcome measure**

Primary end point: to assess tolerability of modestly accelerated radiotherapy with synchronous cisplatin chemotherapy

**Secondary outcome measures**

1. Disease-free survival
2. Normal tissue toxicity

**Overall study start date**

05/07/2002

**Completion date**

31/12/2008

**Eligibility****Key inclusion criteria**

Patients with histologically proven squamous cell carcinoma of the oropharynx hypopharynx larynx or oral cavity (not nasopharynx/sinuses) and fully meet the criteria will be approached for consent. The study requires 12 patients.

**Participant type(s)**

Patient

**Age group**

Not Specified

**Sex**

Not Specified

**Target number of participants**

12

**Key exclusion criteria**

Not provided at time of registration

**Date of first enrolment**

05/07/2002

**Date of final enrolment**

31/12/2008

# Locations

## Countries of recruitment

England

United Kingdom

## Study participating centre

### Clinical Oncology

Manchester

United Kingdom

M20 4BX

# Sponsor information

## Organisation

Department of Health

## Sponsor details

Richmond House

79 Whitehall

London

United Kingdom

SW1A 2NL

## Sponsor type

Government

## Website

<http://www.dh.gov.uk/Home/fs/en>

# Funder(s)

## Funder type

Government

## Funder Name

Christie Hospital NHS Trust (UK)

# 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	01/03/2011		Yes	No