# Cluster randomised triAl of PSA testing for Prostate cancer

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
30/09/2004		Protocol		
Registration date 29/11/2004	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	[] Individual participant data		
30/06/2025	Cancer			

#### Plain English summary of protocol

Background and study aims

Screening for prostate cancer continues to cause controversy because of concerns about over-diagnosis and unnecessary treatment. The aim of this study is to help policy makers decide whether PSA testing for prostate cancer should be introduced by evaluating the effectiveness of PSA testing in reducing prostate cancer mortality (i.e. the number of deaths), and its cost-effectiveness (i.e. comparing the health-related costs in combination with the effectiveness of PSA testing, in order to assist policy makers in their decisions about how to achieve the best use of resources).

#### Who can participate?

Men aged 50 - 69 years from about 573 GP practices in eight UK centres (Sheffield, Newcastle, Bristol, Birmingham, Cardiff, Leeds, Cambridge and Leicester).

#### What does the study involve?

Participants will be randomly allocated to one of two groups. One group is invited to have a PSA test (population-based PSA testing) and the other group continues to receive standard NHS care in the UK, based on the NHS prostate cancer risk management programme. The study involves medical records being looked at by trained researchers working with local NHS Trusts. Trained researchers will put information about any tests or treatment received for prostate problems onto a computer, making sure no personal details (name, address etc.) will be recorded. Data will be identified only by a study number.

What are the possible benefits and risks of participating?

The study will have no impact on an individuals medical care. There are no direct benefits, although participation will contribute towards a better understanding of how prostate problems are currently diagnosed and managed by UK doctors.

Where is the study run from? University of Bristol (UK)

When is the study starting and how long is it expected to run for? March 2004 to March 2016

Who is funding the study? Cancer Research UK (CRUK) (UK)

Who is the main contact? Prof Richard Martin

https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-trial-looking-at-a-single-blood-test-for-prostate-cancer-cap

# Contact information

#### Type(s)

Scientific

#### Contact name

Prof Richard Martin

#### Contact details

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# Additional identifiers

Protocol serial number

N/A

# Study information

#### Scientific Title

Cluster randomised triAl of PSA testing for Prostate cancer

#### Acronym

CAP

## Study objectives

Current hypothesis as of 06/08/2014:

The hypothesis under investigation is that population screening in the form of prostate specific antigen (PSA) testing of men aged 50 - 69 years reduces mortality from prostate cancer.

The objective of the study is to evaluate the effectiveness of population screening for prostate cancer by establishing a cluster randomised trial allocating general practices to either population-based PSA testing (the ProtecT trial, ISRCTN20141297) or unscreened standard

practice in order to: provide an unbiased estimate of the effect of a single screening round for prostate cancer on prostate cancer-specific and all-cause mortality in the population, and to contribute to the international effort to investigate the impact of prostate cancer screening.

#### Previous hypothesis:

The hypothesis under investigation is that population screening in the form of prostate specific antigen (PSA) testing of men aged 50 - 69 years reduces the overall mortality from prostate cancer.

The objective of the study is to evaluate the effectiveness of population screening for prostate cancer by establishing a cluster randomised trial allocating general practices to either intensive case-finding (the ProtecT trial) or unscreened standard practice in order to: provide an unbiased estimate of the effect of a single screening round for prostate cancer on prostate cancerspecific and all-cause mortality in the population, and to contribute to the international effort to investigate the impact of prostate cancer screening.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Randomisation of practices into intervention (ISRCTN20141297) and control arms approved on 21/06/2001 (ref: MREC/01/4/025), also permitted follow-up of participants in the intervention arm. Multicentre Research Ethics Committee approval on 12/02/2004 (ref: MREC/03/4/093) gave permission for follow-up in the control arm, and review of medical records on 24/11/2005 (ref: 05/MRE04/78).

## Study design

Randomised controlled trial

#### Primary study design

Interventional

#### Study type(s)

Screening

#### Health condition(s) or problem(s) studied

Prostate cancer

#### **Interventions**

Current interventions as of 06/08/2014:

General practices are randomised to participate in The ProtecT study (see ISRCTN20141297) or the control arm of the trial. In the ProtecT arm of the trial men are being invited to be tested for the presence of prostate cancer through population-based PSA testing. In the control arm men receive standard NHS care (NHS prostate cancer risk management programme).

#### Previous interventions:

Practices are randomised to participate in The ProtecT study (see ISRCTN20141297) or the comparison arm of the trial. In the ProtecT arm of the trial men are being invited to be tested for the presence of prostate cancer in a process of case-finding that is almost identical to population screening. In the comparison arm men are not subject to intensive case-finding for prostate cancer.

#### **Intervention Type**

Other

#### Phase

Not Applicable

#### Primary outcome(s)

Current primary outcome measure as of 04/02/2021:

Prostate cancer mortality at 15 years

See statistical analysis plan for further details: http://hdl.handle.net/1983/97a58ee2-e559-49e3-9029-954bd5dd5bd9

DOI: 10.17605/OSF.IO/7Y3G6

Previous primary outcome measure:

Prostate cancer mortality at 10 years

Added 06/08/2014:

See statistical analysis plan for further details: http://hdl.handle.net/1983/6d41509f-ab93-4f96-9869-c320acbc4ae1

#### Key secondary outcome(s))

Current secondary outcome measures as of 04/02/2021:

Measured at 5 and 10, 15 and 20 years:

- 1. All-cause mortality
- 2. Disease status and staging
- 3. Cost-effectiveness: The projected lifetime effectiveness and cost-effectiveness of a range of UK-focused screening options, incorporating parameter estimates computed from CAP and ProtecT data to create a UK-specific decision analytic model
- 4. Health-related quality of life
- 5. Age-specific lead-time and over-diagnosis rates (utilising observed trial data)

Previous secondary outcome measures as of 06/08/2014:

Measured at 5 and 10, 15 and 20 years:

- 1. All-cause mortality
- 2. Disease status and staging
- 3. Cost-effectiveness
- 4. Health-related quality of life

Previous secondary outcome measures:

Measured at 5 and 10 years:

- 1. All-cause mortality
- 2. Disease status and staging
- 3. Cost-effectiveness
- 4. Health-related quality of life

#### Completion date

01/03/2016

# **Eligibility**

#### Key inclusion criteria

Current inclusion criteria as of 06/08/2014:

All men aged 50 - 69 years from 573 GP practices in eight UK centres (Sheffield, Newcastle, Bristol, Birmingham, Cardiff, Leeds, Cambridge, Leicester). An additional centre, Edinburgh, where routine data on cause of death did not undergo validation, will be included in a secondary analysis.

Previous inclusion criteria:

All men aged 50 - 69 years from approximately 400 GP practices in nine UK centres (Sheffield, Newcastle, Bristol, Birmingham, Cardiff, Edinburgh, Leeds, Cambridge, Leicester)

#### Participant type(s)

**Patient** 

#### Healthy volunteers allowed

No

#### Age group

Adult

#### Sex

Male

## Key exclusion criteria

Current exclusion criteria as of 06/08/2014:

Inclusion criteria not met. Men identified as already having a prostate cancer diagnosis.

Previous exclusion criteria:

Does not meet inclusion criteria

#### Date of first enrolment

01/03/2004

#### Date of final enrolment

01/03/2016

# Locations

#### Countries of recruitment

**United Kingdom** 

England

Study participating centre University of Bristol

Bristol United Kingdom BS8 2PS

# Sponsor information

#### Organisation

University of Bristol (UK)

#### **ROR**

https://ror.org/0524sp257

# Funder(s)

## Funder type

Charity

#### **Funder Name**

Cancer Research UK (CRUK) (UK) (refs: C11043/A4286, C18281/A11326, C18281/A8145 and C18281/A15064)

## 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

Not provided at time of registration

# IPD sharing plan summary

# **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient- facing?
Results article	results	01/01 /2008		Yes	No
Results article	results	01/04 /2009		Yes	No
Results article	results	01/11 /2010		Yes	No
Results article	results	01/11 /2011		Yes	No
Results article	results	04/06 /2013		Yes	No
Results article	results	10/06 /2014		Yes	No
Results article	results	23/01 /2015		Yes	No
Results article	results	29/04 /2016		Yes	No
Results article	results	13/10 /2016		Yes	No
Results article	results	06/03 /2018		Yes	No
Results article	prespecified secondary outcomes at 15-year follow-up	07/05 /2024	30/06 /2025	Yes	No
Participant information sheet	Participant information sheet	11/11 /2025	11/11 /2025	No	Yes
Plain English results			26/10 /2022	No	Yes
Study website	Study website	11/11 /2025	11/11 /2025	No	Yes