

# Nephroblastoma clinical trial and study

|                                        |                                                   |                                                                                                              |
|----------------------------------------|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| <b>Submission date</b><br>04/08/2005   | <b>Recruitment status</b><br>No longer recruiting | <input type="checkbox"/> Prospectively registered<br><input type="checkbox"/> Protocol                       |
| <b>Registration date</b><br>04/08/2005 | <b>Overall study status</b><br>Completed          | <input type="checkbox"/> Statistical analysis plan<br><input type="checkbox"/> Results                       |
| <b>Last Edited</b><br>29/10/2021       | <b>Condition category</b><br>Cancer               | <input type="checkbox"/> Individual participant data<br><input type="checkbox"/> Record updated in last year |

## 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

### Protocol serial number

NTR58

## Study information

### Scientific Title

Nephroblastoma clinical trial and study

### Acronym

SIOP 2001

**Study objectives**

1. To continue a risk-adapted stratification of therapeutic intensity, incorporating response to pre-operative chemotherapy, in all children with Wilms tumour and other renal tumours of childhood
2. To test the treatment hypothesis that doxorubicin is not necessary in patients with intermediate risk tumours and local stage II or III by a multicentre prospective randomised trial
3. To determine prospectively the prognostic significance of specific histological subtypes following pre-operative chemotherapy, as specified in the protocol. In particular, the study aims to: confirm the adverse prognostic significance of the blastemal predominant subtypes and whether this can be offset by intensifying therapy and investigate the hypothesis that the epithelial and stromal-predominant subtypes have a favourable prognosis and investigate the prognostic significance of the percentage necrosis after pre-operative chemotherapy in relation to the type and amount of residual viable tumour.
4. To minimise acute and late toxicity without jeopardising event free and overall survival by reducing treatment for: patients with focal anaplasia, and patients with stage I, intermediate risk tumours
5. To determine prospectively the prognostic significance of tumour volume following pre-operative chemotherapy and its relation to histological subtype
6. To determine prospectively the prognostic significance of specimen weight at time of nephrectomy and its relation to histological subtype
7. To reduce the number of drug administrations, hospital visits and thereby costs in the preoperative phase

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Ethics approval received from local ethics committee.

**Primary study design**

Interventional

**Study design**

Randomised, double-blind, active controlled, parallel group trial

**Study type(s)**

Treatment

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

Nephroblastoma

**Interventions**

Establishing equivalence between two post-operative treatments. Trial arm with doxorubicin versus trial arm without doxorubicin.

**Intervention Type**

Drug

**Phase**

Not Specified

**Drug/device/biological/vaccine name(s)**

Doxorubicin

**Primary outcome(s)**

Event free survival (EFS).

**Key secondary outcome(s)**

No secondary outcome measures

**Completion date**

01/06/2009

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

1. All localised disease nephroblastoma patients age more than 6 months or less than 18 years at time of diagnosis
2. Unilateral tumour with clinical and ultrasonic characteristics compatible with nephroblastoma or biopsy proven histological diagnosis
3. Written informed consent and national ethical committee approval
4. Stage II and III intermediate risk histology after pre-treatment according to protocol and after operation

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Child

**Lower age limit**

6 Months

**Upper age limit**

18 Years

**Sex**

All

**Total final enrolment**

583

**Key exclusion criteria**

1. All other kind of renal tumours of infancy
2. Patients without previous anti-tumour treatment

**Date of first enrolment**

01/06/2002

**Date of final enrolment**

01/06/2009

## Locations

**Countries of recruitment**

Netherlands

**Study participating centre**

SIOP Nephroblastoma Trial and Study Office

Amsterdam

Netherlands

1105 AZ

## Sponsor information

**Organisation**

Academic Medical Centre (AMC) (The Netherlands)

**ROR**

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

## Funder(s)

**Funder type**

Research organisation

**Funder Name**

The Foundation of Paediatric Cancer Research (Stichting Kindergeneeskundig Kankeronderzoek [SKK]) (The Netherlands)

**Funder Name**

German Cancer Aid (Deutsche Krebshilfe) (Germany)

**Funder Name**

The Swedish Childhood Cancer Foundation (Barncancerfonden) (Sweden)

# Results and Publications

## Individual participant data (IPD) sharing plan

Not provided at time of registration

## 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="#">Plain English results</a> |         | 21/07/2015   | 29/10/2021 | No             | Yes             |