

Squamous cell carcinoma prevention in organ transplant recipients using topical treatments

Submission date 10/07/2014	Recruitment status No longer recruiting	☒ Prospectively registered ☐ Protocol
Registration date 10/07/2014	Overall study status Completed	☐ Statistical analysis plan ☒ Results
Last Edited 28/05/2020	Condition category Cancer	☐ Individual participant data

Plain English summary of protocol

<http://www.cancerresearchuk.org/about-cancer/trials/a-study-looking-treatment-prevent-skin-cancer-people-who-have-had-organ-transplant-spot>

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

Clinical Trials Information System (CTIS)

2013-000893-32

Protocol serial number

16962

Study information

Scientific Title

Squamous cell carcinoma prevention in organ transplant recipients using topical treatments: a feasibility study (SPOT)

Acronym

SPOT Trial

Study objectives

A multi-centre, randomised, three arm, open-label, phase II, feasibility study comparing topical treatment of actinic keratoses (AK) in Organ Transplant Recipients (OTR) using 5-fluorouracil or 5% imiquimod (plus sunscreen) to standard care (sunscreen alone) in the prevention of squamous cell carcinoma (cSCC). The main objective of this study is to establish the feasibility of performing a phase III randomised controlled trial evaluating prevention of cSCC using currently available topical interventions.

On 10/12/2014 the following changes were made to the trial record:

1. The overall trial start date was changed from 01/08/2014 to 01/12/2014.
2. The overall trial end date was changed from 01/08/2015 to 01/12/2016.

Ethics approval required

Old ethics approval format

Ethics approval(s)

13/LO/1579; First MREC approval date 17/02/2014

Primary study design

Interventional

Study design

Randomised; Interventional; Design type: Treatment

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Topic: Cancer, Dermatology; Subtopic: Melanoma, Skin (all Subtopics); Disease: Skin, Dermatology

Interventions

1. 5% w/w 5-fluorouracil cream (Efudix®), with discretionary sunscreen as per standard care, for 4 weeks (Treatment Cycle 1), followed by a 4-week resting period and then another 4-week treatment phase (Treatment Cycle 2). Topical treatment will be applied to the chosen treatment zone(s) once or twice per day dependent on the site of the AK.;
2. 5% imiquimod cream (Aldara®), with discretionary sunscreen as per standard care, for 4 weeks (Treatment Cycle 1), followed by a 4-week resting period and then another 4-week treatment phase (Treatment Cycle 2). Topical treatment will be applied to the chosen treatment zone(s) overnight for 3 (Mon, Wed, Fri or Tue, Thu, Sat) to 5 times (Mon-Fri) per week dependent on the site of the AK.;

3. Standard care, discretionary sunscreen only (SPF >30), should be applied daily to all exposed areas of the skin at least 30 minutes before sun exposure and topped up as required, from April to October or during high-UVR exposure activities during winter months.

Intervention Type

Drug

Phase

Phase II

Drug/device/biological/vaccine name(s)

5% w/w 5-fluorouracil cream (Efudix®), 5% imiquimod cream (Aldara®)

Primary outcome(s)

Proportion of patients who would be willing to use the treatment again; Timepoint(s): Month 15

Key secondary outcome(s)

1. Assessment of QoL measure; Timepoint(s): Month 15
2. Clearance of AK; Timepoint(s): End of treatment periods (4 and 8 weeks post treatment)
3. Development of cSCC; Timepoint(s): 12 months post treatment
4. Evaluation of the proposed overall AK quantification scoring criteria; Timepoint(s): Established pre-trial
5. Measure concordance of AK diagnosis by clinicians; Timepoint(s): Month 15
6. Patient treatment preferences; Timepoint(s): Month 15
7. Persistence of clearance of AK; Timepoint(s): End of month 12
8. Proportion of eligible patients who complete treatment cycle 1; Timepoint(s): Week 4
9. Proportion of eligible patients who require & complete treatment cycle 2; Timepoint(s): Week 12
10. Proportion of eligible patients willing to be randomised; Timepoint(s): Randomisation

Completion date

03/07/2018

Eligibility

Key inclusion criteria

1. Organ Transplant Recipient (OTR) Patient Group:
 - 1.1. OTRs aged >18 years
 - 1.2. A minimum of 10 AK (with at least 5 AK occurring within the same skin zone)
 - 1.3. Demonstrably stable renal function on the basis of serum creatinine and estimated Glomerular Filtration Rate (eGFR)
 - 1.4. No recent change in immunosuppressive medication and predicted to remain stable over course of the study
 - 1.5. Able to apply topical cream as directed to the required area or having a carer who agrees to do this at the required frequency and times
 - 1.6. Women of childbearing potential, or men in a relationship with a woman of childbearing potential, prepared to adopt adequate contraceptive measures if sexually active
 - 1.7. Able to give written informed consent
 - 1.8. Willing and able to comply with scheduled visits, treatment plan, laboratory tests and other

study procedures

2. Immunocompetent Patient Group (participating in the DCE substudy only):

2.1. ICP patients aged >18 years

2.1. Present or previous AK (any site, any number)

2.3. Able to give written informed consent

2.4. Willing to spend up at least 20 minutes completing the Long Q

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 Years

Sex

All

Total final enrolment

101

Key exclusion criteria

Organ Transplant Recipients (OTR) only:

1. Pregnant (female patients of child bearing potential should have a urine or blood Human Chorionic Gonadotropin

(hCG) test performed to rule out pregnancy prior to trial entry)

2. Lactating females. Patients who agree to discontinue nursing 14 days prior to commencing treatment and do not

nurse throughout all the treatment period are eligible

3. Life expectancy less than 12 months

4. Known hypersensitivity or intolerance to 5-fluorouracil, imiquimod, sunscreen, or to any of the excipients (including but

not limited to: methylhydroxybenzoate, propylhydroxybenzoate, cetyl alcohol, stearyl alcohol, polysorbate 60, propylene

glycol, methyl parahydroxybenzoate and white soft paraffin)

5. The use of brivudine, sorivudine and analogues is prohibited

Date of first enrolment

01/12/2014

Date of final enrolment

01/12/2016

Locations

Countries of recruitment

United Kingdom

England

Study participating centre
Cancer Research UK Clinical Trials Unit
School of Cancer Studies
University of Birmingham
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Sponsor information

Organisation
Queen Mary University of London (UK)

ROR
<https://ror.org/026zzn846>

Funder(s)

Funder type
Industry

Funder Name
MEDA Pharmaceuticals Ltd (UK)

Funder Name
NIHR (UK) - Research for Patient Benefit (RfPB); Grant Codes: PB-PG-0110-21244

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not expected to be made available

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Basic results			28/05/2020	No	No
HRA research summary			28/06/2023	No	No