

Colonic stenting as bridge to surgery versus emergency surgery for management of acute left-sided malignant colonic obstruction: a multicentre randomised trial

Submission date 28/12/2006	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 28/12/2006	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 10/10/2014	Condition category Digestive System	<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

Study information

Scientific Title

Acronym

Stent-in 2 study

Study objectives

Which treatment strategy is the most effective for patients with acute left-sided malignant colonic obstruction: either colonic stenting followed by elective surgery or emergency surgery.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval received from the local medical ethics committee

Study design

Randomised controlled parallel-group multicentre trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Acute left-sided malignant colonic obstruction

Interventions

Patients will be randomised to either emergency surgery (current standard treatment) or colonic stenting as bridge to elective surgery.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

Effectiveness of both strategies in terms of quality of life, morbidity and mortality.

Key secondary outcome(s)

Costs of both strategies.

Completion date

01/01/2010

Eligibility**Key inclusion criteria**

1. Symptoms of left-sided malignant colonic obstruction existing less than one week defined as obstructive symptoms with dilation of the colon on plain abdominal X-ray and typical abnormalities on a gastrografen enema study compatible with a malignant colonic stricture

2. Aged more than 18 years
3. Informed consent

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

Not Specified

Key exclusion criteria

1. Peritonitis, perforation, fever, sepsis or other serious complications demanding urgent surgery
2. American Society of Anesthesiologists (ASA) IV or V
3. Obstruction due to non-colonic malignancies or from a benign origin
4. Distal tumor margin less than 10 cm from the anal verge

Date of first enrolment

01/01/2007

Date of final enrolment

01/01/2010

Locations**Countries of recruitment**

Netherlands

Study participating centre

Academic Medical Center

Amsterdam

Netherlands

1100 DE

Sponsor information**Organisation**

Academic Medical Center (AMC) (The Netherlands)

ROR

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

Funder(s)

Funder type

Hospital/treatment centre

Funder Name

Academic Medical Center (AMC) (The Netherlands)

Alternative Name(s)

Academic Medical Center, AMC

Funding Body Type

Private sector organisation

Funding Body Subtype

Universities (academic only)

Location

Netherlands

Results and Publications

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?
Results article	results	01/04/2011		Yes	No
Results article	results	01/12/2014		Yes	No
Protocol article	protocol	03/07/2007		Yes	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes