

Cancer research

taking place at North Bristol NHS Trust

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R&D No	Project Title	Project Description
2130	STAMPEDE	Systemic Therapy in Advancing or Metastatic Prostate Cancer:
End date:		Evaluation of Drug Efficacy.
31/12/2020		There are increasing numbers of treatments available for advanced
		prostate cancer. These treatments are usually used in prostate cancer
		when hormone treatment is no longer effective and the cancer has
		started to grow again. The aim of this trial, which is called STAMPEDE, is
		to assess some of these treatments, given earlier in the course of the
		disease in combination with hormone treatment.
		The treatments currently assessed in the trial are:
		Radiotherapy to the prostate
		Abiraterone and enzalutamide combination
3214 End date 20/12/2020	FOCUS 4	FOCUS4 – Molecular selection of therapy in colorectal cancer: a molecularly stratified randomised controlled trials programme. FOCUS4 is an umbrella, or platform, for testing novel agents in biomarker-defined subpopulations of first-line advanced disease colorectal cancer patients who are not considered candidates for potentially curative surgery. It is also a trial of a new strategy for testing stratified approaches to therapy in any biologically complex tumour type. See Trial Schema in the Trial Protocol.
3666	The VIOLET	Video assisted thoracoscopic lobectomy versus conventional open
End date:	study	lobectomy for lung cancer, a multi-centre randomised controlled trial
30/04/2019		with an internal pilot.
		Lung cancer is the leading cause of cancer death worldwide and survival
		in the UK remains low. Surgery is the mainstay of the cure, although it is
		associated with serious complications. Recently, minimal access video
		assisted thoracoscopic surgery (VATS) for lung cancer has been
		introduced. VATS leads to less tissue trauma than open surgery and
		there are small randomised trials and some case series showing it is
		safe; however, it is unknown whether it improves patient outcome.
		Therefore, the aim of the VIOLET study is to generate high quality
		evidence to support (or refute) the provision of VATS by comparing
		open surgery with minimal access VATS in a randomised controlled trial
		(RCT). The study will compare the effectiveness, cost-effectiveness and
		acceptability of VATS lobectomy versus open surgery for treatment of
2502	LODIC	lung cancer.
3592	LORIS	A phase III trial of surgery versus active monitoring for low risk ductal
End date:		carcinoma in situ (DCIS).
		The LORIS Trial aims to establish whether patients with newly

05/06/2020		diagnosed low risk DCIS can safely avoid surgery without detriment to
		their wellbeing (psychological and physical) and whether those patients who do require surgery can be identified by pathological and radiological means.
3686	MCL Biobank	Establishing a Biobank and Database as a National Resource for
End date: 31/10/2019	Observational Study	Characterising Indolent and Aggressive forms of Mantle Cell Lymphoma, an Observational Study.
3804	LOGS - A	LOGS - A randomised phase II/II study to assess the efficacy of
End date: 31/12/2019		Trametinib (GSK 1120212) in patients with recurrent of progressive low grade serous ovarian cancer or peritoneal cancer.
3841 End date: 20/07/2020	The UK National Registry of CML	The UK National Registry of Chronic Myeloid Leukaemia (CML)
3589	Add-Aspirin	A phase III, double blind, placebo controlled, randomised trial assessing
End date:	Trial	the effects of aspirin on disease recurrence and survival after primary
28/02/2021		therapy in common non-metastatic solid tumours.
3862	IDRIS	Phase III randomised trial of immunomodulatory therapy in high risk
End date:		solitary bone plasmacytoma (SBP).
30/06/2020		SBP is a form of blood cancer, in which abnormal plasma cells collect at
		a single location in the skeleton. The standard treatment is
		radiotherapy, however around two-thirds of patients either relapse or
		go on to develop a more widespread version of the disease called myeloma.
		Scientists now think these patients relapse because they already have
		very low levels of disease present in their bone marrow when their
		plasmacytoma is diagnosed. Using blood and bone marrow tests, they
		think they are able to identify patients who are most likely to relapse.
		The IDRIS study will investigate whether progression can be delayed or
		prevented by giving these patients further treatment with lenalidomide
		and dexamethasone after radiotherapy.
3871	Myeloma XII	A phase III study to determine the role of ixazomib as an Augmented
End date:	(ACCoRd	Conditioning therapy in salvage autologous stem
01/12/2021	trial) Version 1.0	A phase III study to determine the role of ixazomib as an Augmented
		Conditioning therapy in salvage autologous stem cell transplant (ASCT)
		and as a post-ASCT Consolidation and maintenance strategy in patients
		with Relapsed multiple myeloma.
		This trial aims to determine and compare: a) The depth of response
		between standard melphalan conditioning and augmented (adding
		ixazomib) melphalan conditioning at second ASCT. b) The impact of

		adding consolidation and maintenance treatment versus no further treatment, on progression free survival.
3930	Rational	A randomised phase III multi-centre trial comparing radical surgery and
End date:	treatment	radical radiotherapy as first definitive treatment for primary Merkel cell
30/03/2021	selection for	carcinoma (MCC) with an observational study for patients ineligible for
	Merkel Cell	the randomised trial.
	Carcinoma	MCC is rare but greatly impacts on patients. It starts on skin (the
	(MCC)	primary), grows fast and often spreads. Spread to other organs is
		usually fatal. It must be treated effectively or it rapidly regrows. MCC
		can be treated by surgery called Wide Local Excision (WLE) and is
		responsive to radiotherapy. In WLE, surgeons remove the primary with
		margin to reduce the chance of leaving behind satellite tumours.
		Sometimes radiotherapy is used after WLE to kill residual cancer.
		Radiotherapy to the primary with a margin can control MCC without
		prior extensive surgery. There are no trials to help decide whether it is
		best to use radiotherapy first or WLE.
		Rational MCC aims to provide this evidence and has two components,
		Rational Compare and Rational Review. In Rational Compare, the
		patient and specialists must believe that either WLE or radiotherapy
		could be equally effective as first treatment. These patients will be
		randomised to either treatment. Alternatively, patients will enter
		Rational Review if one of the treatments in particular is preferred.
3958	PTCL Biobank	Establishment of a Peripheral T-cell Lymphoma (PTCL) Biobank and
End date:	Observational	Database: An Observational Study.
06/11/2021	Study.	Patients with PTCL have a poor outlook. Current first line treatments
		are inadequate and are associated with high rates of early relapse.
		Despite the recent introduction of novel agents for patients with
		relapsed disease prognosis is again very poor. There are currently no
		targeted treatments although monoclonal antibodies directed against Tfh surface markers including PD1 are available (Ansell et al, 2014) and
		have been trialled in other conditions. Similarly therapeutic anti-ICOS
		antibodies (Medlmmune, MEDI-570) have been trialled in autoimmune
		conditions and a phase 1/2 trial for PTCL is about to start recruitment in
		Canada (Clinical Trials Identifier: NCT02520791).
		Over the next few years, therefore, treatment for PTCL is anticipated to
		change radically. A PTCL Biobank will be a valuable resource to expedite
		the development of diagnostic tests, based on the new genetics of
		these diseases and biobank samples will also be used to investigate
		biomarkers for response to specific therapies and the prediction of
		relapse.
3974	MesoTRAP	Malignant pleural mesothelioma is a cancer, caused by asbestos,
End date:	Feasibility	affecting 2500 UK patients each year. The main symptom is
30/09/2019	Study	breathlessness caused by fluid building up in the space between the
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		lung to re-expand. However, sometimes tumour growing over the surface of the lung prevents it from re-expanding. This 'trapped' lung results in fluid re-accumulation and repeated drainage leading to significant patient distress and multiple hospital visits. One approach to dealing with 'trapped' lung in mesothelioma is to insert a thin tube (Indwelling Pleural Catheter) into the space around the lung. The tube can stay in place for a long time allowing patients to drain off fluid at home. The other approach is a keyhole surgical operation to remove as much tumour as possible from the lining of the lung to allow it to re-expand. We do not know which of these two approaches is more effective at relieving breathlessness. We want to undertake a study to find out which approach is best.
4153 End date: 31/08/2019	National cohort study of late effects of Hodgkin Lymphoma treatment	This study proposes to investigate a range of clinically significant comorbidities which develop in female Hodgkin Lymphoma survivors treated in childhood and young adulthood.
4297 End date: 20/04/2020	MUK nine a: Screening Study	An observational and screening study to identify high risk myeloma patients suitable for novel treatment approaches and determine treatment outcomes for non-high risk myeloma patients. Multiple myeloma is a disorder of plasma cells in the bone marrow. It is the second most common haematologic cancer in the EU, causing about 21,000 deaths in the EU in 2008. The aim of this phase II study is to assess whether future trials in this setting are feasible, and to determine risk status for participants with myeloma, in order to recruit high risk participants into MUK nine B. Participants who are found to be high risk and who are eligible will be provided with information on MUK nine B. Participants who are found not to be high risk will be treated according to NICE standard treatment (which may include other clinical trials). Patients will be followed up and data and biological samples will be centrally collected according to the schedule of MUK nine A to generate a knowledge resource about real-world treatment outcomes in newly diagnosed myeloma in the UK.
4342 End date: 31/08/2020	Adjuvant canakinumab vs placebo in stages IB, II- IIIA resected NSCLC	This is a multicenter, randomized, double blind, placebo-controlled study evaluating the efficacy and safety of canakinumab versus placebo as adjuvant therapy in adult subjects with stages AJCC/UICC v. 8 II-IIIA and the subset of IIIB with (T>5cm N2 disease) completely resected (R0) nonsmall cell lung cancer (NSCLC).