Protocol for treatment and research of acute lymphoblastic leukaemia of childhood of the Dutch Childhood Oncology Group (SNWLK/DCOG ALL-9).

No registrations found.

| Ethical review | Positive opinion |
|-----------------------|---------------------|
| Status | Recruitment stopped |
| Health condition type | - |
| Study type | Interventional |

Summary

ID

NL-OMON21934

Source Nationaal Trial Register

Brief title SNWLK-ALL-9

Health condition

Acute lymphoblastic leukaemia of childhood.

Sponsors and support

Primary sponsor: DCOG Source(s) of monetary or material Support: health insurance and governement

Intervention

Outcome measures

Primary outcome

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Survival.

Secondary outcome

Event free survival.

Study description

Background summary

The dutch ALL-6 protocol (1984-1988) for standard risk childhood ALL was one of the first to use dexamethasone as steroid instead of prednisone. This led to surprisingly good results. The ALL-9 protocol thus was meant to reproduce these results and to extend the use to patients with high risk ALL. Presently the probability of 5-year EFS is 80%+/-2%, (for SR patients 83%, for HR patients 70%)overall.

Study objective

This reduced intensity protocol is instituted to:

- 1. Confirm the data obtained in the SNWLK-ALL-6 protocol for standard risk patients;
- 2. Offer significant improvement of cure rate in high risk patients, comparable to international childhood ALL protocols;
- 3. Offer the possibility to conduct window studies with monotherapy;
- 4. Validate the prognostic significance of in vitro drug reststance testing;
- 5. Standardise the minimal residual disease test;

6. Evaluate the side effects, especially osteonecrosis and psychological effects of dexamethasone.

Study design

N/A

Intervention

Stratification into standard risk and high risk.

Contacts

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Eligibility criteria

Inclusion criteria

All children with acute lymphoblastic leukaemia from 1 year (365 days) until 18 years of age, excluding mature B-cell ALL.

Exclusion criteria

- 1. Mature B-cell ALL;
- 2. Relapsed ALL;
- 3. Secondary ALL;
- 4. Pretreatment with corticostroids or cytostatic drugs in the 4 weeks preceding diagnosis;
- 5. Patient of whom essential diagnostic tests are missing;
- 6. Patients in whom essential parts of therapy were not given.

Study design

Design

| Study type: | Interventional |
|------------------------|----------------|
| Intervention model: | Other |
| Control: N/A , unknown | |

Recruitment

| NL | |
|---------------------------|---------------------|
| Recruitment status: | Recruitment stopped |
| Start date (anticipated): | 01-01-1997 |
| Enrollment: | 918 |
| Туре: | Actual |

Ethics review

| Positive opinion | |
|-------------------|------------------|
| Date: | 24-08-2005 |
| Application type: | First submission |

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

| Register | ID |
|----------|-------|
| NTR-new | NL420 |

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Register

NTR-old Other ISRCTN ID NTR460 : N/A ISRCTN21542083

Study results

Summary results

N/A