

Added value of digital PET in (re)staging patients with pancreatic cancer

No registrations found.

Ethical review	Positive opinion
Status	Recruiting
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON22880

Source

NTR

Brief title

PANDIGIPET

Health condition

pancreatic cancer, response assesment, digital PET

Sponsors and support

Primary sponsor: Isala hospital, Zwolle, the Netherlands

Source(s) of monetary or material Support: Isala Innovatie en Wetenschapsfonds, Philips Healthcare

Intervention

Outcome measures

Primary outcome

Diagnostic outcome digital PET/CT

Secondary outcome

Study description

Background summary

For pancreatic cancer, surgery is the only treatment method that can potentially cure the patient. Currently only 20% of the patients are eligible for a surgical resection with curative intention. A recent development in pancreatic cancer treatment is the use of neo-adjuvant chemotherapy before surgery and this has already shown good clinical results. In these patients, contrast-enhanced Computed Tomography scans (ceCT) of the abdomen are acquired for (re)staging. However, response evaluation with CT scans is unreliable because it is not possible to distinguish between post-treatment fibrosis and malignancies. Recently, a novel digital PET/CT system was introduced in Isala, which provides PET images that are significantly more detailed and accurate as compared to the analog PET systems. Furthermore, the tumour marker Serum Ca 19.9 is widely used for pancreatic adenocarcinoma and has shown its value in the assessment of response to neo-adjuvant therapy. The aim of this study is to evaluate the diagnostic value of digital PET/CT as a staging and restaging imaging modality, as compared with ceCT and Ca 19.9, in patients with resectable or borderline resectable pancreatic cancer, who are treated with neo-adjuvant therapy before surgery.

Study objective

Digital PET improves response evaluation compared to conventional methods

Study design

First FDG-PET/CT scan and second FDG-PET/CT scan

Intervention

Participants will undergo two FDG-PET/CT scans on a digital PET/CT system, before the start of the treatment and after neo-adjuvant chemotherapy treatment

Contacts

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Eligibility criteria

Inclusion criteria

- Histological or cytological confirmed malignant peri-ampullary tumour, resectable or borderline resectable, without evidence of distant metastases
- Inclusion in the PREOPANC-2 study
- Written informed consent

Exclusion criteria

- Age < 18 years
- Incapacitated adults
- Prisoners
- Pregnancy
- Unable to undergo a FDG-PET/CT scan
- Metastatic or locally advanced (i.e. unresectable) pancreatic cancer
- Ampullary or distal bile duct cancer.
- Prior radiotherapy, chemotherapy, or resection for pancreatic cancer
- Previous malignancy (excluding non-melanoma skin cancer), unless no evidence of disease and diagnosed more than 2 years before diagnosis of pancreatic cancer

- Serious concomitant systemic disorders that would compromise the safety of the patient or his/her ability to complete the study, at the discretion of the investigator.

Study design

Design

Study type:	Interventional
Intervention model:	Other
Allocation:	Non controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	01-07-2018
Enrollment:	40
Type:	Anticipated

IPD sharing statement

Plan to share IPD: Undecided

Ethics review

Positive opinion	
Date:	23-08-2018
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

ID: 46552

Bron: ToetsingOnline

Titel:

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

No registrations found.

In other registers

Register	ID
NTR-new	NL7243
NTR-old	NTR7442
CCMO	NL64320.075.17
OMON	NL-OMON46552

Study results