

# Interlaboratory variability in the grading of dysplasia and morphology of duodenal adenomas in a nationwide cohort.

No registrations found.

<b>Ethical review</b>	Not applicable
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	-
<b>Study type</b>	Observational non invasive

## Summary

### ID

NL-OMON24042

### Source

NTR

### Brief title

Interlab FAP

### Health condition

Familial adenomatous polyposis (FAP), attenuated FAP, MUTYH-adenomatous polyposis (MAP).

## Sponsors and support

**Primary sponsor:** None

**Source(s) of monetary or material Support:** None

## Intervention

## Outcome measures

### Primary outcome

Dysplasia grading

## Secondary outcome

Morphology grading

## Study description

### Background summary

#### Rationale

Familial adenomatous polyposis (FAP) patients face an increased risk of duodenal polyposis of up to 90% at age 70. Moreover, FAP patients face an increased cumulative risk of duodenal cancer of 2-5%. Endoscopic duodenal surveillance starting at the age of 25-30 is recommended to prevent duodenal cancer. The frequency of surveillance is determined in accordance to the Spigelman classification, which measures the severity of duodenal polyposis. Histopathologic variables are an important part of the Spigelman classification, as two of the four components are based on histopathological outcomes. Especially dysplasia grading seems to be an important factor in determining the risk of duodenal cancer. However, since a grading system for dysplasia and morphology of duodenal lesions is missing these lesions are classified according to guidelines for colorectal lesions. This might lead to an increased interlaboratory variability, resulting in variance in risk stratification between different health care providers.

#### Main objective

The aim of this study is analyse the interlaboratory variability in the grading of dysplasia of duodenal adenomas in daily practice, in a nationwide cohort.

#### Study design

All histopathological reports of duodenal adenomas from patients with a history of FAP and/or a history of (sub)total colectomy from 1991 - 2019 will be identified from the Dutch Pathology Registry (PALGA). The proportion of adenomas with high-grade dysplasia will be determined and compared between all laboratories.

#### Study population

Patients with a history of FAP and/or a history of (sub)total colectomy who have (a) histopathological report(s) on duodenal adenomas.

#### Main study parameters

Dysplasia grading, morphology grading.

### Study objective

There is considerable interlaboratory variation in the grading of dysplasia in duodenal adenomas.

## Study design

None

## Contacts

### Public

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### Scientific

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## Eligibility criteria

### Inclusion criteria

- Patients with a FAP/AFAP/MAP diagnosis or with a history of a (sub)total colectomy prior to duodenum tissue sampling
- Duodenal biopsy/polypectomy between 1991 - 2019

### Exclusion criteria

- No duodenal specimen between 1991 - 2019

## Study design

### Design

Study type:	Observational non invasive
Intervention model:	Other

Allocation:	Non controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

## Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	30-06-2020
Enrollment:	1000
Type:	Actual

## IPD sharing statement

**Plan to share IPD:** Undecided

## Ethics review

Not applicable	
Application type:	Not applicable

## 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	NL8757
Other	the Dutch Pathology Registry (PALGA) : 2020-41

## Study results