# **TCRM** study

No registrations found.

**Ethical review** Positive opinion

**Status** Pending

Health condition type -

**Study type** Observational non invasive

## **Summary**

#### ID

NL-OMON26316

**Source** 

NTR

**Brief title** 

TCRM study

#### **Health condition**

**TCRM** 

Transcervical

Resection

Myoom

Myoma

**Fibroid** 

### **Sponsors and support**

**Primary sponsor: VUMC** 

Source(s) of monetary or material Support: fund = initiator = sponsor

#### Intervention

#### **Outcome measures**

#### **Primary outcome**

Reduction of menstrual blood loss (measured with Pictorial Blood Assessment Chart (PBAC)).

#### **Secondary outcome**

Reduction of menstrual pain (use of painkillers will be registered)

Reduction of symptoms and improvement of health related quality of life (measured with UFS QOL NL)

Increase in serum Hb value

Surgical outcome parameters, including surgery time, fluidloss, blood loss, percentage of resection, complications, recovery

## **Study description**

#### **Background summary**

Patients are asked to fill in 3 questionnaires and keep a period diary.

#### **Study objective**

Submucous fibroids are known to be related to heavy menstrual bleeding (HMB), dysmenorrhea and fertility problems. Transcervical resection of fibroids (TCRM) is a widely implemented treatment for submucous fibroids, to be precise FIGO PALM-COEIN classification type 0, 1 and 2 fibroids. However, reduction of abnormal uterine bleeding after TCRM has never been quantified. Aim: to demonstrate reduction of heavy menstrual bleeding after TCRM (PBAC score).

#### Study design

Not applicable

#### Intervention

Trans Cervical Resection of Myoma

### **Contacts**

#### **Public**

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## **Eligibility criteria**

#### Inclusion criteria

FIGO (PALM-COEIN) classification submucous uterine fibroids type 0, 1 and 2 Women with heavy menstrual bleeding defined as PBAC score > 150 (= 120 ml) Maximum of 2 submucous fibroids

Maximum fibroid diameter of 4 cm

Residual myometrium between fibroid capsule and serosa of at least 5 mm

Regular cycle (with or without oral contraceptives)

#### **Exclusion criteria**

Age below 18 years

Women who do not master the Dutch or the English language

Pregnancy

Congenital uterine abnormalities, except for arcuate uterus

Presence of FIGO (PALM-COEIN) classification type 3-4 and type 2-5 fibroids

Use of GnRH analogs or Ulipristal

Known coagulopathy or use of heparine or coumarine derivates

Other disorders that may induce HMB (polyps, known atypical endometrial cells, cervical dysplasia, cervical or pelvic infection, assumed malignancy, irregular cycle >35 days or intercycle variation of 2 weeks or more)

Contra-indications for general or spinal anaesthesia or conscious sedation

Women not willing to participate

## Study design

### Design

Study type: Observational non invasive

Intervention model: Parallel

Allocation: Non controlled trial

Masking: Open (masking not used)

Control: N/A, unknown

#### Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-03-2014

Enrollment: 150

Type: Anticipated

## **Ethics review**

Positive opinion

Date: 21-01-2014

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 NL4270 NTR-old NTR4406

Other METC VUMC: 2013.379

# **Study results**