

# Automatic recognition of irregularities in the oesophagus

No registrations found.

<b>Ethical review</b>	Positive opinion
<b>Status</b>	Recruiting
<b>Health condition type</b>	-
<b>Study type</b>	Observational non invasive

## Summary

### ID

NL-OMON26564

### Source

NTR

### Brief title

ARGOS

### Health condition

Esophageal cancer, Barrett's esophagus, HD endoscopy, computer-aided diagnosis

## Sponsors and support

**Primary sponsor:** Academic Medical Center (AMC) Amsterdam

**Source(s) of monetary or material Support:** KWF-STW, ViNotion BV, Fujifilm Europe, Catharina Hospital Eindhoven, TU Eindhoven, AMC Amsterdam

## Intervention

## Outcome measures

### Primary outcome

- Classification scores of the CAD system

### Secondary outcome

- Speed of the algorithm

## Study description

### Background summary

Esophageal cancer is one of the most lethal tumors worldwide. When esophageal cancer is diagnosed, it is often in a late stage and only half of the patients undergo curative surgical removal of the esophagus. When discovered in an early stage, it can be treated minimally invasive without removing the esophagus with excellent outcome. Patients with Barrett's esophagus (BE) have an increased risk of esophageal adenocarcinoma (EAC). Therefore, they undergo regular endoscopy for early cancer detection.

EAC in a Barrett's esophagus is difficult to detect during surveillance endoscopies. This is partly because of its subtle appearance and partly because most endoscopists rarely encounter early BE neoplasia and therefore are unfamiliar with its endoscopic appearance . A computer aided detection (CAD) system might assist endoscopists in the recognition and subsequent characterization of early BE neoplasia, thereby improving efficacy of BE surveillance. The aim of this study is to develop a CAD algorithm using high quality endoscopic imagery of BE neoplasia.

### Study objective

The development of a computer aided detection (CAD) system might be able to assist endoscopists in the recognition and subsequent characterization of early Barrett's neoplasia, thereby improving efficacy of BE surveillance.

### Study design

not applicable

### Intervention

No interventions will take place.

For this study, extra endoscopic imagery will be obtained by making endoscopic images and (zoom) videos.

## Contacts

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## Eligibility criteria

### Inclusion criteria

Patients >18 years with:

- non-dysplastic Barrett's esophagus; or
- dysplastic Barrett's esophagus; or
- early adenocarcinoma of the esophagus

### Exclusion criteria

- Patients previously treated for Barrett neoplasia

## Study design

### Design

Study type: Observational non invasive

Intervention model: Other

**Control:** N/A , unknown

## Recruitment

NL  
Recruitment status: Recruiting  
Start date (anticipated): 01-08-2017  
Enrollment: 150  
Type: Anticipated

## IPD sharing statement

**Plan to share IPD:** Undecided

## Ethics review

Positive opinion  
Date: 27-02-2018  
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	NL6835
NTR-old	NTR7072
Other	METC AMC : W17_251

## Study results

### Summary results

Not applicable