Ultrasound guided fine needle aspiration cytology and sentinel node biopsy in the detection of occult lymph node metastases of early oral and oropharyngeal cancer

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Evaluation and comparison of sentinel node biopsy (SNB) and ultrasound guided fine needle aspiration cytology (USgFNAC) in the management of the clinically negative neck in patients planned for transoral excision of oral and oropharyngeal squamous...

Ethical review Approved WMO

Status Pending

Health condition type Miscellaneous and site unspecified neoplasms malignant and

unspecified

Study type Observational invasive

Summary

ID

NL-OMON31627

Source

ToetsingOnline

Brief title

SNUS trial

Condition

Miscellaneous and site unspecified neoplasms malignant and unspecified

Synonym

oral cancer, oral squamous cell carcinoma

Research involving

Human

Sponsors and support

Primary sponsor: Vrije Universiteit Medisch Centrum

Source(s) of monetary or material Support: ZonMw DoelmatigheidsOnderzoek VEMI

Intervention

Keyword: head and neck cancer, lymph node metastases, sentinel node, ultrasound guided fine needle aspiration cytology

Outcome measures

Primary outcome

Diagnostic accuracy of selection for treatment of the neck by strategies based on USgFNAC and/or SNB.

Secondary outcome

Number of neck dissections, quality of life, patients* perspective and cost-effectiveness of selection strategies based on USgFNAC and/or SNB or elective treatment of the neck.

Study description

Background summary

The treatment of the clinically negative neck (N0) in small oral or oropharyngeal carcinoma is controversial. When there is a low likelihood of occult (clinically undetectable) lymph node metastases, is the choice between elective neck dissection or a wait and see policy. Because of the risk of overand undertreatment there is need for a reliable diagnostic technique. Ultrasound guided fine needle aspiration cytology (USgFNAC) is routinely used in the detection of lymph node metastases. The sentinel node procedure is a promising technique which is nowadays routinely used in other tumor types.

Study objective

Evaluation and comparison of sentinel node biopsy (SNB) and ultrasound guided fine needle aspiration cytology (USgFNAC) in the management of the clinically negative neck in patients planned for transoral excision of oral and

oropharyngeal squamous cell carcinoma.

Study design

Prospective, observational study of 60 patients to define accuracy of either technique in a head-to-head comparison, and to model the cost effectiveness of USgFNAC and/or SNB-based diagnosis-therapy combinations. The volume and direct medical costs of treatment and follow-up will be extracted from hospital databases and patient files. A model will evaluate the costs and effects of possible diagnostic and treatment strategies in this patient group.

Study burden and risks

Sentinel node procedure and ultrasound guided fine needle aspiration cytology are used routinely in several tumor types. In the literature on head and neck cancer no serious adverse events have been reported using these diagnostic techniques. The diagnostic techniques will be performed by experienced head and neck surgeons, nuclear physicians, radiologists and pathologists.

Contacts

Public

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Scientific

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

Patients with a primary biopsy proven oral/oropharyngeal squamous cell carcinoma which can be locally (transorally) resected and a clinically negative neck.

Exclusion criteria

Transoral excision not possible Neck entered for reconstruction Clinical lymph node metastasis

Study design

Design

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-01-2008

Enrollment: 60

Type: Anticipated

Ethics review

Approved WMO

Date: 07-11-2007

Application type: First submission

Review commission: METC Amsterdam UMC

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

CCMO NL19558.029.07