Are aberrant crypt foci putative precursor lesions of colorectal cancer: a pilot study

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1) to sample ACF in colorectal mucosa of patients without an increased risk of CRC, patients at an increased of recurrent advanced adenoma based on a personal history of adenomas, patients with established CRC and patients with HNPCC and to...

Ethical review Approved WMO

Status Recruitment stopped

Health condition type Malignant and unspecified neoplasms gastrointestinal NEC

Study type Observational invasive

Summary

ID

NL-OMON32090

Source

ToetsingOnline

Brief title

Aberrant Crypt Foci (ACF) and Colorectaal Cancer (CRC)

Condition

Malignant and unspecified neoplasms gastrointestinal NEC

Synonym

Large Bowel Cancer

Research involving

Human

Sponsors and support

Primary sponsor: Universitair Medisch Centrum Utrecht

Source(s) of monetary or material Support: Ministerie van OC&W

Intervention

Keyword: Aberrant Crypt Foci, Colonscopy, Colorectal Cancer

Outcome measures

Primary outcome

the primary endpoint is to determine number and type of ACF in patients without an increased risk of CRC, patients at an increased of recurrent advanced adenoma based on a personal history of adenomas, patients with established CRC and patients with HNPCC.

Secondary outcome

The secondary endpoint is to study the activation of the Wnt pathway in ACF and in matched normal mucosa/advanced adenoma/CRC.

Study description

Background summary

colorectal cancer (CRC) is the second most often diagnosed cancer in westernized nations. Aberrant crypt foci (ACF) may represent the earliest precursor lesions in CRC development. Although CRC, adenoma and ACF share same genetic and epigenetic alterations, other links remain to be established between features of colonic malignant tumor, their adenomatous precursors, and ACF, before they are acknowledged as the earliest form of colonic transformation.

The adenomatous polyposis coli and β -catenin genes are the two major components of the Wnt signaling pathway that has been shown to play an important role in the formation of certain cancers. The overactivation of the pathway, which results in abnormal accumulation of beta-catenin protein in nuclei, contributes to most CRCs, both sporadic and hereditary.

We propose that the investigation of normal colonic tissue and ACF for target genes of the Wnt signaling in different patient groups, stratified for CRC-risk, may aid in understanding whether a subset of ACF are likely to progress to cancer and whether this has clinical implications.

Study objective

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1) to sample ACF in colorectal mucosa of patients without an increased risk of CRC, patients at an increased of recurrent advanced adenoma based on a personal history of adenomas, patients with established CRC and patients with HNPCC and to determine whether the number of ACF discriminates among different patient groups stratified by CRC-risk. 2) To understand whether aberrations of regulation of *Wnt signaling* could identify ACF that are likely to progress to cancer.

Study design

ACF will be discriminated in colonic mucosa by endoscopy during high-resolution close-focus chromoendoscopy. Colonic mucosa will be stained during colonoscopy using indigo carmine to accentuate the contours of ACF. During endoscopy, biopsies are taken from ACF, (but also from CRC if present) and from matched normal mucosa, in different groups of patients according to CRC-risk. The obtained biopsies will be processed and Wnt signaling will be studied using confocal microscopy.

Study burden and risks

The burden associated with participation in this study is minor. The are very small extra risks due to taking extra biopsies.

Contacts

Public

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

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

Inclusion criteria

We will enroll patients undergoing colonoscopy for the following indications:

- colorectal cancer screening (10)
- colorectal cancer surveillance because of increased risk of recurrent (advanced) adenoma (10)
- colorectal cancer surveilance in established HNPCC patients (10)
- patients with CRC (pre-surgery colonoscopy) (10)

Exclusion criteria

Patients with known or suspected inflammatory bowel disease.

Study design

Design

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled
Primary purpose: Basic science

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 20-03-2009

Enrollment: 40

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T۱	ype:	Actual

Medical products/devices used

Registration: No

Ethics review

Approved WMO

Date: 17-06-2008

Application type: First submission

Review commission: METC Universitair Medisch Centrum Utrecht (Utrecht)

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 NL21528.041.08