

Long-term safety of trastuzumab in patients with HER2-positive breast cancer

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Primary objective • To explore changes in left ventricular ejection fraction (LVEF) values before, during and after trastuzumab treatment Secondary objectives • To explore the reversibility of congestive heart failure associated with trastuzumab...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Heart failures
Study type	Observational invasive

Summary

ID

NL-OMON33506

Source

ToetsingOnline

Brief title

Long-term safety of trastuzumab

Condition

- Heart failures
- Miscellaneous and site unspecified neoplasms benign

Synonym

decrease of left ventricular ejection fraction

Research involving

Human

Sponsors and support

Primary sponsor: Antoni van Leeuwenhoek Ziekenhuis

Source(s) of monetary or material Support: eigen middelen onderzoeksgroep

Intervention

Keyword: - HER2 positive breast cancer, - long-term safety, - trastuzumab

Outcome measures

Primary outcome

- Left ventricular ejection fraction (LVEF)

Secondary outcome

- NT-proBNP en troponin T analysis
- New York Heart Association (NYHA)
- genotype analysis
- electrocardiogram

Study description

Background summary

Patients with HER2-positive breast cancer receive one year of trastuzumab as part of optimal standard adjuvant systemic therapy. The addition of trastuzumab to the standard adjuvant chemotherapy in HER2-positive breast cancer patients markedly improves treatment outcome. Short-term side effects of trastuzumab treatment are mild and mostly treatable. Few long-term data are available of trastuzumab tolerability. In this study we want to recruit long-term breast cancer survivors after adjuvant trastuzumab treatment to participate in a late tolerability study, to determine long-term effects after trastuzumab treatment to added co morbidity over time.

Study objective

Primary objective

- To explore changes in left ventricular ejection fraction (LVEF) values before, during and after trastuzumab treatment

Secondary objectives

- To explore the reversibility of congestive heart failure associated with trastuzumab treatment
- To determine the relation between *Brain Natriuretic Peptide* (NT-proBNP),

troponin T blood levels and changes in left ventricular ejection fractions (LVEF) after trastuzumab treatment

- To determine genetic variability in relevant known single nucleotide polymorphisms [SNPs] in the extracellular-, transmembrane and intracellular domain

Study design

Retrospective part (period before and during trastuzumab treatment) and a prospective part (period after trastuzumab treatment) of the study

Study burden and risks

Three hospital visits will be done during the first- and during the second study period. In one session five tubes of 5 ml blood will be taken for haematological, chemistry and genotype analysis. The following assessments will be performed; MUGA scan and electrocardiogram.

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

Strongly HER2-positive breast cancer, defined as an immunohistochemistry score of 3+ using the HercepTest™, or gene amplification by fluorescence in situ hybridization, or chromogenic in situ hybridization (CISH)

Exclusion criteria

Pregnancy or breast feeding

Study design

Design

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Treatment

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 22-10-2009

Enrollment: 100

Type: Actual

Ethics review

Approved WMO

Date:	14-10-2009
Application type:	First submission
Review commission:	PTC Stichting het Nederlands Kanker Instituut - Antoni van Leeuwenhoekziekenhuis (Amsterdam)

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	NL27175.031.09