# Endoscopic Stenting versus Operative Intervention in Malignant Gastric Outlet Obstruction(STENTOP), a multi-center randomized controlled trial.

Published: 26-08-2010 Last updated: 04-05-2024

To investigate which treatment modality is preferable in patients with an irresectable malignant gastric outlet obstruction: endoscopic stent placement or a surgical gastrojejunostomy.

Ethical review Approved WMO

**Status** Recruitment stopped

**Health condition type** Gastrointestinal stenosis and obstruction

Study type Interventional

# **Summary**

#### ID

NL-OMON35111

#### **Source**

**ToetsingOnline** 

**Brief title** 

**STENTOP** 

#### **Condition**

- Gastrointestinal stenosis and obstruction
- Gastrointestinal neoplasms malignant and unspecified
- Gastrointestinal therapeutic procedures

#### **Synonym**

Malignant gastric outlet obstruction

#### Research involving

Human

#### **Sponsors and support**

**Primary sponsor:** Erasmus MC, Universitair Medisch Centrum Rotterdam **Source(s) of monetary or material Support:** Ministerie van OC&W

#### Intervention

**Keyword:** Gastrojejunostomy, Malignant gastric outlet obstruction, Self-expandable metal stent

#### **Outcome measures**

#### **Primary outcome**

Percentage of days alive within the first 24 weeks after intervention with an oral intake of at least soft solids (GOOSS  $\geq$  2)

#### **Secondary outcome**

Gut Function Score (GFS), technical success, length of procedure-related hospital stay, complication rate (including pain intensity using a numerical rating scale, NRS), recurrent obstruction and reintervention rate, quality of life (QoL), costs and survival.

# **Study description**

#### **Background summary**

Malignant gastric outlet obstruction is a late complication in patients with primary gastric or periampullary malignancy or metastatic disease. Palliation of obstructive symptoms is essential in these patients. Surgical gastrojejunostomy as well as endoscopic stent placement can be performed. At this moment there isn\*t a definite scientific based rationale to favor one over the other with respect to efficacy, complications, quality of life and costs.

#### **Study objective**

To investigate which treatment modality is preferable in patients with an irresectable malignant gastric outlet obstruction: endoscopic stent placement

or a surgical gastrojejunostomy.

#### Study design

Prospective, multi-center randomized controlled study with a follow-up of 24 weeks.

#### Intervention

In one treatment group a Self Expandable Metal Stent (SEMS) will be used. In the other treatment group an open or laparoscopic gastrojejunostomy will be performed.

#### Study burden and risks

Patients will be contacted by telephone at regular intervals for assessing questionnaires. Also, during the first 3 weeks patients will be asked to fill in a symptom-diary. In our opinion this will not put burden on patients significantly.

The randomisation between endoscopic stent placement and surgical intervention will not expose patients to additional risks. Initially, stent placement seems to be a less invasive procedure. However, recent studies demonstrate that on the long term stent placement may be complicated with a higher rate reobstruction and reintervention. Thus, at this moment it is unclear which treatment modality is preferable with respect to risks and complications.

## **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

Malignancy of peri-duodenal area
Gastric Oulet Obstruction Scoring System (GOOSS) <= 1
Life expectancy >= 4 weeks
Informed consent
Age >= 18 years

### **Exclusion criteria**

Potentially curable disease

Pre-procedural evidence of additional strictures in the gastrointestinal tract beyond the level of the duodenum

Previous gastrojejunostomy

Previous treatment with self-expandable metal stent for same condition

# Study design

## **Design**

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Open (masking not used)

Control: Active

Primary purpose: Treatment

#### Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 23-02-2011

Enrollment: 20

Type: Actual

# **Ethics review**

Approved WMO

Date: 26-08-2010

Application type: First submission

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

# **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 NL31101.078.09