

# MPAC-study: A feasibility study of the co-registration of MRI-imaging with PAtiological assessment of primary tumor extension in patients with uterine Cervical tumors.

Published: 11-07-2012

Last updated: 26-04-2024

The objective of this study is to investigate the feasibility to fuse images of pathological anatomy after hysterectomy according to Wertheim-Okabayashi into the pre-operative T2/DWI/DCE weighted MR images using non-rigid co-registration.

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	Reproductive neoplasms female malignant and unspecified
<b>Study type</b>	Observational invasive

## Summary

### ID

NL-OMON37645

### Source

ToetsingOnline

### Brief title

MPAC-study

### Condition

- Reproductive neoplasms female malignant and unspecified

### Synonym

cervical cancer, uterine cervical carcinoma

### Research involving

Human

## Sponsors and support

**Primary sponsor:** Academisch Medisch Centrum

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

## Intervention

**Keyword:** carcinoma, cervix, extension, MRI

## Outcome measures

### Primary outcome

The feasibility of co-registration of the microscopic images of the surgical specimen into the T2 MRI images will be evaluated.

### Secondary outcome

The secondary endpoint of the study is the correlation of the tumor extend in uterus and parametria on MRI and microscopic images.

## Study description

### Background summary

Radiotherapy plays an important role in the treatment of loco-regional cervix cancer. Guidelines for radiation prescribe the following radiation targets: The whole uterus including corpus, cervix and parametrium on both sides, and pelvic lymph nodes. Irradiating the whole uterus including a margin for its possible positions in multiple fractions of radiotherapy results in a large treatment field including small bowel and bladder as organs at risk. This in turn results in side effects like nausea, vomiting and fibrosis. Reducing the irradiated volume by excluding the fundus of the uterus in selected cases would decrease the severity and occurrence of the side effects. For this, better pretreatment knowledge on the extend of the primary tumor is needed. MRI seems a promising tool for assessing the extend of the primary tumor but has not been validated yet. Furthermore DWI and DCE seems to be useful for this purpose next to the regular T2 weighted images in MRI.

### Study objective

The objective of this study is to investigate the feasibility to fuse images of

pathological anatomy after uterus extirpation according to Wertheim-Okabayashi into the pre-operative T2/DWI/DCE weighted MR images using non-rigid co-registration.

## Study design

A prospective observational feasibility study.

## Study burden and risks

The burden is minimal; patients participating have to visit the hospital once to undergo the MRI-scan with gadolinium contrast with the usual T2 weighted imaging and de extra added DWI and DCE; maximally two weeks preoperatively. The scan usual scan lasts 15 minutes, the extra imaging takes account for an extra 20 minutes of scanning. Few patients can experience a headache or nausea due to the gadolinium. Some patients with claustrophobia may experience fear.

## Contacts

### Public

Academisch Medisch Centrum

Meibergdreef 9  
Amsterdam 1105 AZ  
NL

### Scientific

Academisch Medisch Centrum

Meibergdreef 9  
Amsterdam 1105 AZ  
NL

## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

## Age

Adults (18-64 years)

Elderly (65 years and older)

## Inclusion criteria

Patients with a carcinoma of the cervix for whom a Wertheim surgical procedure is planned. They must be older than 18 years of age and have a WHO status of 0 or 1.

## Exclusion criteria

Exclusion criteria are MRI related. Patients with claustrophobia, a pacemaker, medicine pump, neurostimulator, cochlear implants, other metal implants in the pelvis which would disturb the image. In some cases surgical clips in the brain are contra-indicated, this will be evaluated conform standard protocol. Patients with a GFR < 30 ml/min/1,73 m<sup>2</sup> will be excluded.

## Study design

### Design

**Study type:** Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

### Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 17-05-2013

Enrollment: 15

Type: Actual

## Ethics review

Approved WMO

Date: 11-07-2012

Application type:	First submission
Review commission:	METC Amsterdam UMC
Not approved	
Date:	07-03-2014
Application type:	Amendment
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	NL39945.018.12

## Study results

Date completed:	24-01-2017
Actual enrolment:	15

### Summary results

Trial is ongoing in other countries