

# Neo-adjuvant versus Adjuvant chemotherapy in Upper Tract Urothelial Carcinoma: A feasibility phase II randomized clinical trial (\*URANUS\*)

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This study has been transitioned to CTIS with ID 2024-514991-41-01 check the CTIS register for the current data. To assess the proportion of UTUC patients with adequate renal function and fit to receive either neo- or adjuvant cisplatin-based...

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruiting
<b>Health condition type</b>	Renal and urinary tract neoplasms malignant and unspecified
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON48801

### Source

ToetsingOnline

### Brief title

URANUS

### Condition

- Renal and urinary tract neoplasms malignant and unspecified
- Genitourinary tract disorders NEC

### Synonym

cancer in urinary upper tract, urethelial carcinoma

### Research involving

Human

## Sponsors and support

**Primary sponsor:** Leids Universitair Medisch Centrum

**Source(s) of monetary or material Support:** investigator-initiated onderzoek

## Intervention

**Keyword:** Adjuvant Chemotherapy, Neoadjuvant Chemotherapy, Radical nephroureterectomy, Upper Tract Urothelial Carcinoma (UTUC)

## Outcome measures

### Primary outcome

Proportion of UTUC patients with adequate renal function that were able to receive either neo- or adjuvant cisplatin-based chemotherapy treatment

Proportion of UTUC patients randomized to neo- or adjuvant chemotherapy that were able to start and finalize three courses of planned chemotherapy

Actually delivered dose versus planned dose of chemotherapy administered in patients randomized to neo- or adjuvant chemotherapy.

### Secondary outcome

1- and 2-year Disease Free Survival (DFS), Overall Survival (OS) and Cancer-Specific Survival (CSS)

Safety and tolerability of neo-adjuvant versus adjuvant chemotherapy

Evaluate histopathology in each group and histological response in the neo-adjuvant patient group

## Study description

### Background summary

There are no definitive treatment recommendations for patients diagnosed with UTUC and therefore there is variable clinical practice amongst centres and

countries.

Radical nephroureterectomy (RNU) is considered the gold standard treatment and patients with good renal function are often offered perioperative chemotherapy. URANUS explores feasibility and collection of real world data of UTUC treatment in European and other countries (i.e. Japan).

## **Study objective**

This study has been transitioned to CTIS with ID 2024-514991-41-01 check the CTIS register for the current data.

To assess the proportion of UTUC patients with adequate renal function and fit to receive either neo- or adjuvant cisplatin-based chemotherapy treatment  
To assess the proportion of UTUC patients randomized to neo- or adjuvant chemotherapy that is actually able to start and finalize three courses of planned chemotherapy

To assess the administered versus planned dose of chemotherapy in patients randomized to neo- or adjuvant chemotherapy

## **Study design**

URANUS Study is Cohort Prospective Exploratory phase II randomized clinical trial.

Patients with a diagnosis of invasive UTUC who are scheduled to undergo a radical nephro-ureterectomy (RNU) or distal ureterectomy and resection of all macroscopically abnormal nodes and clinically staged as cT2-cT4, cN0-N1 M0, will be included in the study. From this initial number of patients, a renal function evaluation will be performed.

Those who fulfil randomization treatment criteria ( $GFR \geq 55$  ml/min) and are able to receive chemotherapy will be randomized to adjuvant chemotherapy (after RNU)(GROUP C) or neo-adjuvant chemotherapy (before RNU)(GROUP B).

Patients allocated to neo-adjuvant or adjuvant chemotherapy will receive 3 cycles of gemcitabine/cisplatin or 3 cycles of dose dense methotrexate, vinblastine, doxorubicin, and cisplatin combination therapy. Patients with poor renal function ( $GFR < 55$  ml/min) or with good renal function but unfit for cisplatin-based chemotherapy will not receive chemotherapy treatment (GROUP A). Participants in the three groups will be followed up according to recommended routine practice. The study drugs are prescribed in routine clinical practice (clinical guidelines recommendation) in these patients. This study does not attempt to change chemotherapy prescribing habits.

## **Intervention**

Surgery is standard patient care

Chemotherapy in patients with bladder and upper tract rinary carcinoma is often also considered standard of patient care.

Thus, no true intervention within the context of the study, while the study mainly aims to collect real world data

### **Study burden and risks**

There is no extra burden or risk for patients in URANUS trial. The study is based on standard of care of UTUC patients.

## **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**

Histological and radiological defined UTUC: Histologically-confirmed diagnosis of predominantly urothelial carcinoma of the upper urinary tract

Patients with UTUC cT2-cT4 cN0-N1 M0 (TNM classification)  
Patients without bladder cancer or with concomitant non muscle invasive bladder cancer.  
Adequate organ system function  
CT scan of the chest, abdomen and pelvis and bone scan without evidence of distant metastasis

## Exclusion criteria

Histology of pure adenocarcinoma, pure squamous cell carcinoma, sarcomatoid or predominant small cell carcinoma.  
Any major contraindication to a surgical procedure.  
Other active neoplasms.  
Concomitant muscle invasive bladder cancer.

## Study design

### Design

Study phase:	2
Study type:	Interventional
Intervention model:	Parallel
Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Treatment

### Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	28-05-2018
Enrollment:	25
Type:	Actual

### Medical products/devices used

Product type:	Medicine
Brand name:	ADRIAMYCIN

Generic name:	ADRIAMYCIN
Registration:	Yes - NL intended use
Product type:	Medicine
Brand name:	CISPLATIN
Generic name:	CISPLATIN
Registration:	Yes - NL intended use
Product type:	Medicine
Brand name:	GEMCITABINE
Generic name:	GEMCITABINE
Registration:	Yes - NL intended use
Product type:	Medicine
Brand name:	METHOTREXATE
Generic name:	METHOTREXATE
Registration:	Yes - NL intended use
Product type:	Medicine
Brand name:	VINBLASTIN
Generic name:	VINBLASTIN
Registration:	Yes - NL intended use

## Ethics review

Approved WMO

Date: 06-07-2017

Application type: First submission

Review commission: METC Leiden-Den Haag-Delft (Leiden)

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Approved WMO

Date: 27-11-2017

Application type: First submission

Review commission: METC Leiden-Den Haag-Delft (Leiden)

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Approved WMO

Date: 31-10-2018  
Application type: Amendment  
Review commission: METC Leiden-Den Haag-Delft (Leiden)  
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Approved WMO  
Date: 25-04-2019  
Application type: Amendment  
Review commission: METC Leiden-Den Haag-Delft (Leiden)  
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Approved WMO  
Date: 12-03-2020  
Application type: Amendment  
Review commission: METC Leiden-Den Haag-Delft (Leiden)  
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## 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
EU-CTR	CTIS2024-514991-41-01
EudraCT	EUCTR2016-004017-27-NL
ClinicalTrials.gov	NCT02969083
CCMO	NL60960.058.17