Longitudinal assessment of therapyrelated early ageing in adolescent and young adult (AYA) cancer patients

Published: 16-11-2021 Last updated: 12-10-2024

To determine markers related to early ageing and senescence in AYA cancer patients before and after systemic therapy, in order to assess treatment-related early vascular ageing and associated tumour and patient characteristics.

Ethical review Approved WMO **Status** Recruiting

Health condition type Miscellaneous and site unspecified neoplasms malignant and

unspecified

Study type Observational invasive

Summary

ID

NL-OMON49923

Source

ToetsingOnline

Brief title

Early ageing in AYA cancer patients

Condition

Miscellaneous and site unspecified neoplasms malignant and unspecified

Synonym

(non-)Hodgkin lymphoma, and cervical cancer, breast cancer, cancer: including leukemia, Ewing sarcoma, osteosarcoma, testicular cancer

Research involving

Human

Sponsors and support

Primary sponsor: Universitair Medisch Centrum Groningen

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Source(s) of monetary or material Support: UMCG Kanker Researchfonds

Intervention

Keyword: AYA, cancer, early ageing

Outcome measures

Primary outcome

Primary endpoint is change in senescence marker P16 between start of systemic therapy and one year later.

Secondary outcome

Secondary endpoints are:

Changes in senescence-associated secretory phenotype (SASP) and vascular markers; prevalence of classical cardiovascular risk factors (lipids, BMI, glucose); tumour (treatment), patient (age, sex, pre-existent cardiometabolic status), and sociodemographic (lifestyle) factors related to the changes in senescence, SASP and cardiovascular risk factors.

Study description

Background summary

Compared with survivors of childhood cancer, there is sparse knowledge about the long-term morbidity and mortality of adolescent and young adult (AYA) cancer patients, who are diagnosed at age 18-39 and have an 80% chance to survive. Following cancer treatment, many cancer survivors, including those at AYA age, have an increased risk of cardiovascular disease. Early ageing has been described in paediatric and certain adult cancer survivor populations. One of the responsible mechanisms behind biological ageing is cellular senescence, characterized by a stable arrest of the cell cycle which occurs in response to stress and damage. In all organisms the number of senescent cells increases with age and senescence has been associated with age-related diseases, like atherosclerosis and Alzheimer. Early ageing as a result of intensive cancer treatment with systemic therapy and radiation may result in early

cardiovascular disease. However, information about senescence, early vascular ageing and related patient and tumour characteristics is missing for AYAs.

Study objective

To determine markers related to early ageing and senescence in AYA cancer patients before and after systemic therapy, in order to assess treatment-related early vascular ageing and associated tumour and patient characteristics.

Study design

Longitudinal cohort study; measurements before start of systemic therapy and one year later.

Study burden and risks

Study measurements will be performed twice and consist of blood withdrawal and physical examination (including weight, height, waist-hip ratio, and blood pressure).

Contacts

Public

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Scientific

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Inclusion criteria

- Aged 18-39 years at cancer diagnosis
- Having a histologically and/or cytologically confirmed cancer diagnosis, including leukemia, (non-)Hodgkin lymphoma, testicular cancer, osteosarcoma, Ewing sarcoma, breast cancer, and cervical cancer.
- Scheduled to start systemic therapy with curative intent. Allowed treatments (concurrent or sequential) are: surgery, radiotherapy, chemotherapy, antibodies

Exclusion criteria

- who are not able to understand the patient information letter and informed consent form
- who will be treated with immune checkpoint inhibitors or targeted therapy with inhibitors of angiogenesis
- who have been treated with systemic therapy or radiotherapy for a previous malignancy (exceptions: in situ carcinoma of the cervix or uterus and adequately treated basal and squamous cell carcinoma of the skin).

Study design

Design

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

Recruitment

NL

Recruitment status: Recruiting
Start date (anticipated): 10-02-2022

Enrollment: 120

Type: Actual

Ethics review

Approved WMO

Date: 16-11-2021

Application type: First submission

Review commission: METC Universitair Medisch Centrum Groningen (Groningen)

Approved WMO

Date: 07-10-2024

Application type: Amendment

Review commission: METC Universitair Medisch Centrum Groningen (Groningen)

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 NL78186.042.21

Other volgt