# Long-term results of two-stage breast reconstruction with polyurethanecovered versus textured implants: a prospective, multicenter randomized controlled trial

Published: 25-09-2018 Last updated: 10-04-2024

Primary Objective: to determine whether polyurethane covered silicone implants (PCI) give a different capsular contracture rate than textured silicone implants (TI) in two-stage implant breast reconstruction after mastectomy in women. Secondary...

**Ethical review** Approved WMO **Status** Recruiting

**Health condition type** Breast therapeutic procedures

Study type Interventional

# **Summary**

#### ID

**NL-OMON50674** 

#### Source

ToetsingOnline

#### **Brief title**

TIPI TRAIL: Textured Implants versus Polyurethane-covered Implants

#### **Condition**

• Breast therapeutic procedures

#### **Synonym**

breast implant hardening, capsular contracture, capsule contracture

### Research involving

Human

### **Sponsors and support**

**Primary sponsor:** Erasmus MC, Universitair Medisch Centrum Rotterdam

Source(s) of monetary or material Support: POLYTECH Health & Aesthetics

B.V., POLYTECH Health & Aesthetics GmbH

### Intervention

**Keyword:** Breast Implants, Capsular Contracture, Long Term Adverse Effects, Mammaplasty

### **Outcome measures**

### **Primary outcome**

The primary outcome is capsular contracture. This is a clinical diagnosis classified in the modified Baker classification, which allows for correct interpretation of capsular contracture in a reconstructed breast. Baker grade 3 or 4 capsular contractures are considered clinically relevant. A breast with a grade 3 contracture feels and looks moderately firm, but this firmness is still compatible with an acceptable outcome, although the patient may be dissatisfied. Reoperation is not necessarily required. Grade 4 represents an excessively firm reconstructed breast, resulting in a poor aesthetic result and/or significant patient symptoms such as pain. Surgical intervention is required.

### **Secondary outcome**

- Other complications: e.g. cutaneous rash, hematoma, seroma, infection, skin necrosis, implant rupture, malposition, exposure, and visibility/palpability.

  Also, explantation is registered together with its indication.
- Quality of life and patient satisfaction
- Breast Implant-Associated Anaplastic Large Cell Lymphoma (BIA-ALCL)

# **Study description**

### **Background summary**

Two-step implant-based breast reconstruction is a common reconstructive technique after mastectomy. It is associated with some implant specific complications. Capsular contracture is a complication which develops when internal scar tissue forms a tight or constricting capsule around a breast implant, contracting it until it becomes misshapen and hard. As a result, the breast may feel painful and stiff, and the capsule may affect the appearance or shape of the breast. On average one out of every six patients has developed a capsular contracture after 10 years. Much of the etiology is still unknown, but there are indications which suggest influence of the outer surface of the implant. Compared to smooth implants, textured implants show lower capsular contracture rates. Based on the current literature we hypothesize that polyurethane-covered implants reduce or delay the development of capsular contracture compared to textured implants.

### Study objective

Primary Objective: to determine whether polyurethane covered silicone implants (PCI) give a different capsular contracture rate than textured silicone implants (TI) in two-stage implant breast reconstruction after mastectomy in women.

Secondary Objectives: to compare revision surgery rate, complication rates, patient satisfaction, user friendliness and long-term patient safety between PCI\*s and TI\*s.

### Study design

Multicenter, prospective, open-label, randomized controlled trial

#### Intervention

Patients in both cohorts will receive a two-step implant-based breast reconstruction after mastectomy. In the second step of the breast reconstruction procedure a definite implant is placed. These will differ for the cohorts: our intervention cohort will receive a polyurethane covered implant and the control cohort will receive a standard textured implant.

### Study burden and risks

The is no definite proof in the current literature whether polyurethane covered implants reduce the risk of capsular contracture in our study population. We hypothesize that polyurethane covered implants have a lower capsular contracture rate. Patients in the intervention cohort might benefit with a lower risk of capsular contracture or delayed development of capsular contracture. However, this is no certainty.

There are no known additional risks with using polyurethane covered implants for breast reconstruction. The burden of this study for the participants comprises of the screening consultation and three extra outpatient clinic visits and the requirement to fill out three questionnaires at seven moments during the course of this study. These are health surveys. We believe this is proportional to the academic worth of the study results.

### **Contacts**

#### **Public**

Erasmus MC, Universitair Medisch Centrum Rotterdam

Wytemaweg 80 Rotterdam 3015CN NL

Scientific

Erasmus MC, Universitair Medisch Centrum Rotterdam

Wytemaweg 80 Rotterdam 3015CN NL

### **Trial sites**

### **Listed location countries**

**Netherlands** 

# **Eligibility criteria**

### Age

Adults (18-64 years) Elderly (65 years and older)

### Inclusion criteria

- Female
- Age of 18 years or older
- Mastectomy is performed
- Eligible for two-stage implant-based breast reconstruction in accordance with the Dutch national breast reconstruction guideline
- First step of two-stage implant-based breast reconstruction (placement of tissue expander) is successfully completed
- Able to understand the patient information sheet, to complete questionnaires and to provide written informed consent

### **Exclusion criteria**

- Additional use of autologous tissues for the breast reconstruction
- The use of acellular dermal matrix or synthetic mesh
- Prior irradiation of the breast or an indication for postoperative radiotherapy (If a patient receives radiotherapy unexpectedly at a later point in time, she will be excluded retroactively)
- Secondary reconstruction
- Revision surgery of a previous breast reconstruction
- Inflammatory carcinoma
- Evidence of distant metastases
- Active infection at the surgical field or distant locations

# 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: Recruiting

Start date (anticipated): 25-02-2019

Enrollment: 321

Type: Actual

### Medical products/devices used

Generic name: Breast implant: Polytech Sublime Line® with Microthane®

surface

Registration: Yes - CE intended use

## **Ethics review**

Approved WMO

Date: 25-09-2018

Application type: First submission

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 19-07-2019

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 11-10-2019

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 30-07-2020

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 10-09-2020

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 06-11-2020

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 18-12-2020

Application type: Amendment

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 NL63959.078.18