

Trial of accelerated adjuvant chemotherapy with capecitabine in early breast cancer

Submission date 19/07/2004	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 10/09/2004	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 06/11/2023	Condition category Cancer	<input type="checkbox"/> Individual participant data

Plain English Summary

<https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-trial-looking-at-chemotherapy-after-surgery-for-breast-cancer>

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

2004-000066-13

IRAS number

ClinicalTrials.gov number

NCT00301925

Secondary identifying numbers

N/A

Study information

Scientific Title

Trial of accelerated adjuvant chemotherapy with capecitabine in early breast cancer

Acronym

TACT2

Study hypothesis

A randomised, phase III clinical trial with a 2 x 2 factorial design addressing two hypotheses:

1. That accelerating Epirubicin will improve the efficacy of the sequential schedules (based originally on the NEAT epirubicin/CMF schedule).
2. That the substitution of CMF by Capecitabine will not be detrimental to patient outcome but will offer advantages in Quality of Life and/or toxicity.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Protocol TACT2: Version 1d approved on the 23/09/2005, UK Ethics Committee MREC ref: 04/MRE00/88

Version 3 approved on the 13/05/2008. Current protocol, version 5 approved July 2009

Study design

Randomized controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Not available in web format, please use the contact details to request a patient information sheet

Condition

Early breast cancer

Interventions

Epirubicin followed by cyclophosphamide, methotrexate and 5-fluorouracil (5-FU) (E-CMF)
Accelerated E-CMF
Epi-capecitabine
Accelerated epi-capecitabine

Intervention Type

Drug

Phase

Phase III

Drug/device/biological/vaccine name(s)

Capecitabine, cyclophosphamide, epirubicin hydrochloride, fluorouracil, methotrexate, pegfilgrastim

Primary outcome measure

Disease-free survival (DFS)

Secondary outcome measures

Overall survival (OS), distant disease-free survival (DDFS), tolerability (including Serious Adverse Events [SAE]), dose-intensity and toxicity, Detailed Toxicity and Quality of Life in the subset of patients studied.

Overall study start date

15/10/2005

Overall study end date

01/09/2024

Eligibility

Participant inclusion criteria

Patients with early breast cancer for whom treatment with anthracycline chemotherapy is indicated.

1. Histological diagnosis of invasive breast carcinoma
2. Completely resected disease with negative surgical margins (apart from deep margin if full thickness resection).
3. Early stage disease (T0-3 N0-2 M0) with no evidence of distant metastases on routine staging
4. Definite indication for adjuvant chemotherapy
5. ECOG status 0 or 1
6. Aged over 18 years (no upper age limit)
7. Fit to receive any of the trial chemotherapy regimens, with adequate bone marrow, hepatic, and renal function ie:
 - 7.1 Hb > 9g/dL; WBC > 3 × 10⁹/L; platelets > 100 × 10⁹/L
 - 7.2 Bilirubin within normal range (unless known Gilberts disease)
 - 7.3 AST/ALT = 1.5 x Upper limit of normal (ULN)
 - 7.4 Albumen within normal range
 - 7.5 Creatinine = 1.5 x ULN and calculated creatinine clearance using Cockcroft-Gault formula > 50

ml/min

7.6 No active, uncontrolled infection

8. Signed TACT2 trial consent form

9. Randomisation within 8 weeks of surgery, but ideally within 1 month

10. No previous chemotherapy, hormonal therapy or radiotherapy for the treatment of pre-invasive or invasive cancer except:

10.1 Previous radiotherapy for basal cell carcinoma

10.2 Previous pre-operative endocrine therapy provided that there was no evidence of progression during this therapy, that it was for less than 6 weeks in duration, and was stopped at least one month prior to trial entry

11. No previous malignancy except in the case of DCIS, or basal cell carcinoma or cervical carcinoma in situ, or where the patient has been disease-free for 10 years, and where treatment consisted solely of resection.

12. Non-pregnant and non-lactating, with no intention of pregnancy during chemotherapy, and prepared to adopt adequate contraceptive measures if pre-menopausal and sexually active

13. No concomitant medical, psychiatric or geographic problems that might prevent completion of treatment or follow-up

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

4400 patients (both male and female)

Total final enrolment

4391

Participant exclusion criteria

1. Only cytological proof of malignancy

2. No evidence of invasive breast cancer

3. Previous invasive breast cancer or bilateral breast cancer (surgically treated DCIS or LCIS is allowed)

4. Locally advanced breast cancer (T4 and/or N3 disease)

5. Patients who have had breast conserving surgery in whom there is a contra-indication for, or refusal of post-operative radiotherapy

6. Patients with positive surgical margins unless either:

6.1 Deep surgical margin involvement following full thickness resection

6.2 Non-invasive cancer at surgical margins and a decision to perform mastectomy on completion of chemotherapy has already been made

7. Patients not able or willing to give informed consent

8. Patients known not to be available for a minimum of 5 years' follow-up

9. Patients with known serious viral infection such as active Hepatitis B, Hepatitis C or HIV

10. Patients with significant cardiac disease, such as impaired left ventricular function or active angina (requiring regular anti-anginal medication and/or resulting in restricted physical activity)
11. Patients with a history of significant renal impairment or disease
12. Simultaneous participation in the active intervention phase of another treatment trial
13. Being approached and recruited into the active intervention phase of another treatment trial two months before or after recruitment into TACT2

Recruitment start date

01/12/2005

Recruitment end date

05/12/2008

Locations

Countries of recruitment

Scotland

United Kingdom

Study participating centre

Western General Hospital

Edinburgh

United Kingdom

EH4 2XR

Sponsor information

Organisation

The Institute of Cancer Research (UK)

Sponsor details

The Institute of Cancer Research

123 Brompton Road

London

United Kingdom

SW7 3RP

Sponsor type

Research organisation

ROR

<https://ror.org/043jzw605>

Funder(s)

Funder type

Industry

Funder Name

Cancer Research UK (CRUK) (UK) (ref: C1491/A4858)

Alternative Name(s)

CRUK

Funding Body Type

Private sector organisation

Funding Body Subtype

Other non-profit organizations

Location

United Kingdom

Funder Name

Hoffman La-Roche (UK)

Alternative Name(s)

Hoffman-La Roche, F. Hoffmann-La Roche Ltd.

Funding Body Type

Private sector organisation

Funding Body Subtype

For-profit companies (industry)

Location

Switzerland

Funder Name

Amgen Ltd (UK)

Funder Name

Pfizer UK

Alternative Name(s)

Pfizer Ltd

Funding Body Type

Private sector organisation

Funding Body Subtype

For-profit companies (industry)

Location

United Kingdom

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

Not provided at time of registration

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/07/2017		Yes	No
Plain English results			26/10/2022	No	Yes
Results article		02/11/2023	06/11/2023	Yes	No