

Physical activity in patients with metastatic colorectal cancer who receive palliative first-line chemotherapy. A randomized controlled phase III trial.

Protocol Number: AGMT_SAKK 41/14 ACTIVE-2

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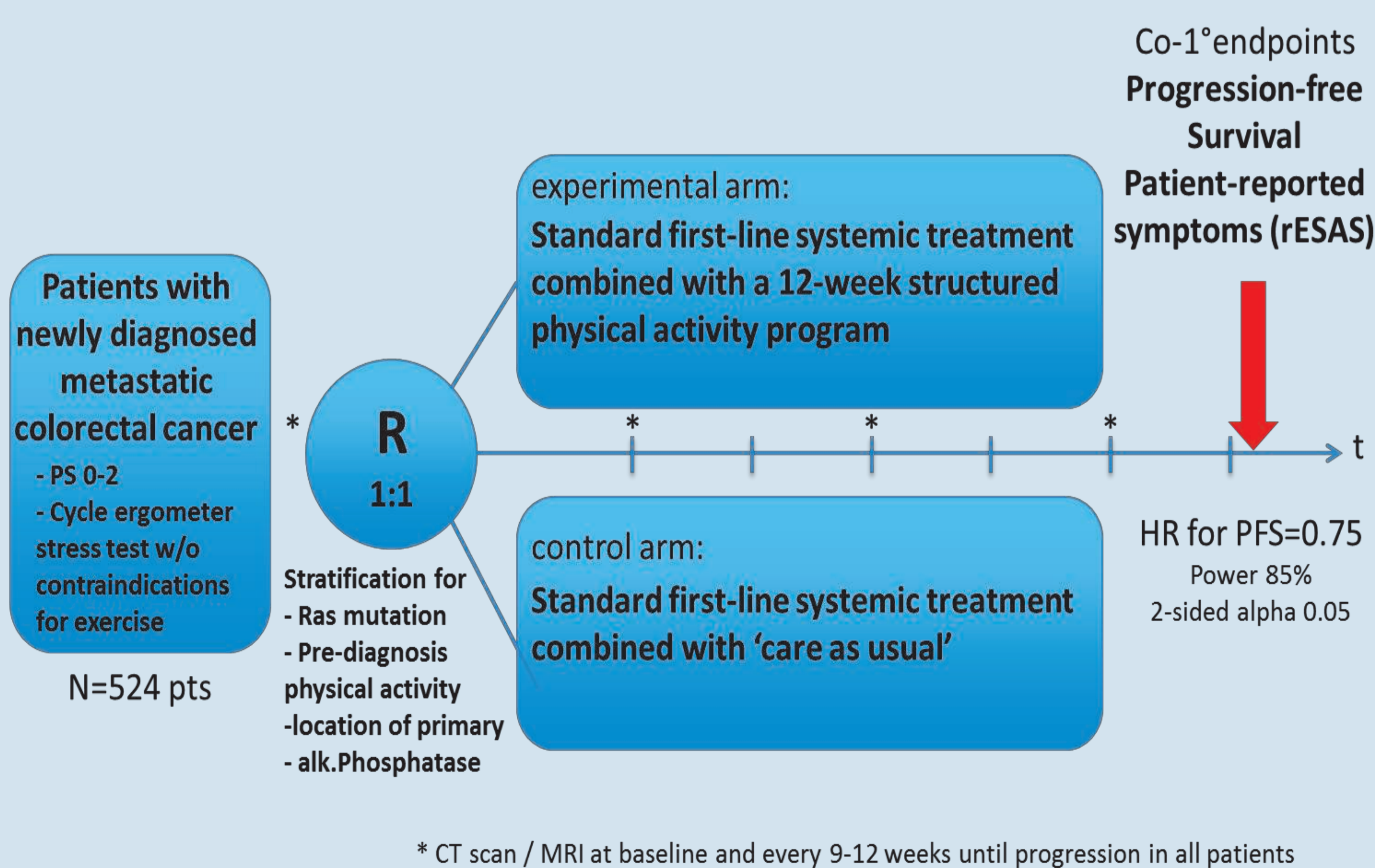
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Protocol Synopsis:

Indication:	Patients with metastatic colorectal cancer	Recruitment:	will stop after the inclusion of approximately 524 evaluable patients (Q2 2021)
Study design:	This is a multicenter randomized open label trial. Patients with first diagnosis of metastatic colorectal cancer will be randomized in a 1:1 ratio to standard palliative chemotherapy or standard palliative chemotherapy plus a structured PA (physical activity) program and a daily step goal measured with pedometers.	Duration:	First patient in (FPI): Q2 2016 Last patient in (LPI): Q2 2021 (expected) Last patient out (LPO): Q3 2026 (expected)
Planned sample size:	524 patients international (interim feasibility analysis is planned after the inclusion of 40 patients)	Study medication:	Standard palliative chemotherapy + structured PA and pedometer
Status (March 2017):	4 patients (3 Kli. Wels, 1 PMU Salzburg) 20 patients (international)	Primary objective:	To assess whether a structured physical activity program (PA) during palliative chemotherapy improves progression-free survival (PFS) and/or patient-reported outcomes (ESAS-r - Edmonton Symptom Assessment System) in patients with metastatic colorectal cancer.

Study Design:



All patients will undergo standard systemic therapy for metastatic colorectal cancer. Patients in the care-as-usual group are not actively encouraged to change their physical activity level e.g. to start a fitness program during chemotherapy. The physical exercise ACTIVE-program describes a 12-week exercise program consisting of a combination of a bi-weekly aerobic exercise (cycle ergometer) supervised by a physical therapist and a self-paced increase in physical activity during daily life using a pedometer with a daily step goal as a motivational tool. The program will be individually tailored to each patient based on the training protocol and is aimed at increasing physical activity levels and cardiorespiratory fitness.

Inclusion Criteria (selected):

- Written informed consent according to ICH/GCP regulations
- Patient with histologically or cytologically confirmed colorectal carcinoma (CRC) required to start palliative first-line systemic therapy for inoperable or metastatic disease
- Patient has measurable disease on CT scan or MRI to be performed within 4 weeks before randomization, non-nodal lesions ≥ 10 mm, lymph nodes ≥ 15 mm) OR evaluable disease i.e. patient with non-measurable metastases but elevated serum tumor-marker
- Baseline patient-reported outcomes (PROs) have been completed
- WHO performance status 0-2
- Age 18-75 (80) years (if WHO is 0-1 upper age limit is 80 years)

Exclusion Criteria (selected):

- Cycle ergometer stress test (completed within 28 days before trial start) shows significant signs of ischemic heart disease or high-grade arrhythmias, which preclude an exercise program
- Pre-existing severe medical conditions precluding participation in a physical activity program as determined by the local investigator. Such conditions include: chronic heart failure, recent myocardial infarction, unstable angina pectoris, clinically significant arrhythmias, uncontrolled hypertension with repeated systolic blood pressure above 160mmHg, and COPD
- Inability to ride a cycle ergometer e.g. for musculoskeletal reasons
- Inability to perform 50 Watt on a cycle ergometer for any reason