Département d'oncologie
Plateformes du DO
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Indication	**Prostate**, récidivant hormonosensible ou métastatique d'emblée
Title	Systemic Therapy in Advancing or Metastatic Prostate Cancer: Evaluation of Drug Efficacy A multi-arm multi-stage randomised controlled trial.
Protocol ID	**STAMPEDE**
Phase	Phase III
Sponsor	Medical Research Council / SAKK (Swiss Group for Clinical Cancer Research)
Local Principal Investigator	Dr Dominik Berthold
Primary Objective	The overall, definitive primary outcome measure for the trial for each comparison is overall survival (all cause mortality). The design of the trial is such that it is important to have additional intermediate outcome measures to assess each research arm as the trial progresses. The intermediate primary outcome measure is failure-free survival.
Inclusion/exclusion criteria	**Inclusion Criteria include the following :** HIGH-RISK NEWLY DIAGNOSED NON-METASTATIC NODE-NEGATIVE DISEASE • At least two of: Stage T3/4, PSA≥40ng/ml or Gleason sum score 8-10 • Intention to treat with radical radiotherapy (unless there is a contra-indication; exemption can sought in advance of consent, after discussion with MRC CTU) OR NEWLY DIAGNOSED METASTATIC OR NODE-POSITIVE DISEASE • Stage Tany N+ M0 or Tany Nany M+1 OR PREVIOUSLY TREATED WITH RADICAL SURGERY OR RADIOTHERAPY, NOW RELAPSING • At least one of: o PSA ≥4ng/ml and rising with doubling time less than 6 months o PSA ≥20ng/ml o N+ o M+ FOR ALL PATIENTS • Histologically confirmed prostate adenocarcinoma • Intention to treat with long-term hormone therapy • Fit for all protocol treatment and follow-up, WHO performance status 0-2 • Have completed the appropriate investigations prior to

	randomisation • Adequate haematological function: neutrophil count >1.5x10^9/l and platelets >100x109/l • Estimated creatinine clearance >30ml/min • Serum potassium ≥3.5mmol/L • Written informed consent • Willing and expected to comply with follow-up schedule • Using effective contraceptive method if applicable **Exclusion Criteria include the following:** • Prior systemic therapy for locally advanced or metastatic prostate cancer except as listed in Section 4.1.3. • Metastatic brain disease or leptomeningeal disease • Abnormal liver functions consisting of any of the following:: Serum bilirubin ≥1.5 x ULN (except for patients with Gilbert's disease, for whom the upper limit of serum bilirubin is 51.3Rmol/l or 3mg/dl), Aspartate aminotransferase (AST) or alanine aminotransferase (ALT) ≥2.5 x ULN • Any other previous or current malignant disease which, in the judgement of the responsible physician, is likely to interfere with STAMPEDE treatment or assessment • Patients with active peptic ulceration, gastrointestinal bleeding, inflammatory bowel disease • Symptomatic peripheral neuropathy grade 2 (NCI CTC) • Any surgery (e.g. TURP) performed within the past 4 weeks • Patients with confirmed severe cardiovascular history e.g.: o a. Severe/unstable angina o b. Myocardial infarction • Severe cardiac failure (NYHA II-IV5) • Cerebrovascular disease (e.g. stroke or transient ischaemic episode) • Patients with uncontrolled hypertension defined as systolic BP ≥160 mmHg or diastolic BP ≥95 mmHg). • Patients who have been scheduled to have major dental extractions within the next 2 years • Patients receiving treatment with drugs known to induce CYP3A4 (including phenytoin, carbamazepine, Phenobarbital). • Prior exposure to abiraterone • Prior chemotherapy for prostate cancer • Prior therapy with zoledronic acid other than short-term treatment for hypercalcaemia.