# GOG263: RANDOMIZED CLINICAL TRIAL OF ADJUVANT RADIATION VERSUS CHEMORADIATION IN INTERMEDIATE RISK, STAGE I/IIA CERVICAL CANCER TREATED WITH INITIAL RADICAL HYSTERECTOMY AND PELVIC LYMPHADENECTOMY

Trial setting: Post radical hysterctomy cervical cancer, Intermediate risk, Stage I/IIA
Study Design: Adjuvant RT vs CRT

Sponsor(s): NCI-NRG

Planned No. of patients: 360

Current accrual: 280

Revision:

Update (11/2017): Based on the observed accrual rate through November 2017, power analysis and sample size calculations using the Gompertz model suggest that enrolling at least 342 eligible and evaluable patients will result in the required number of recurrences without any changes to the study operating characteristics.

Assuming uniform accrual with 5% ineligible proportion estimated from this study, the targeted accrual is 360 patients expected to be met in 2020.

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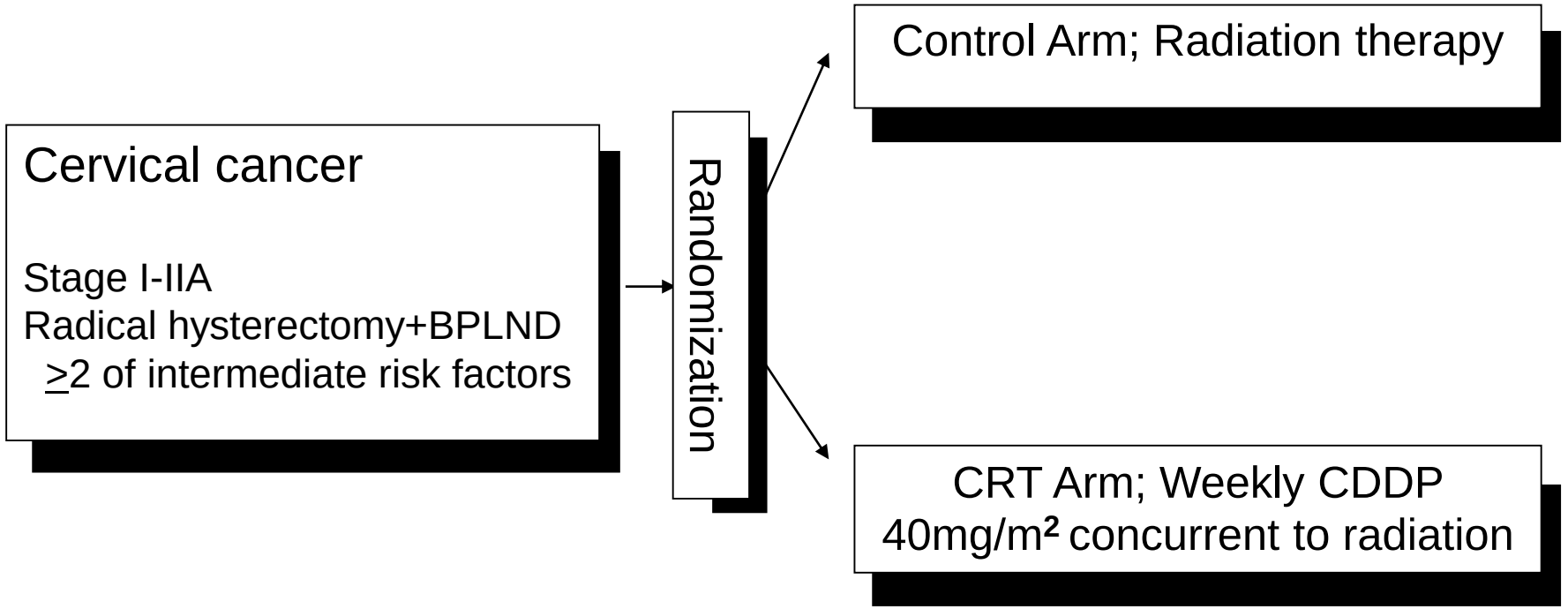

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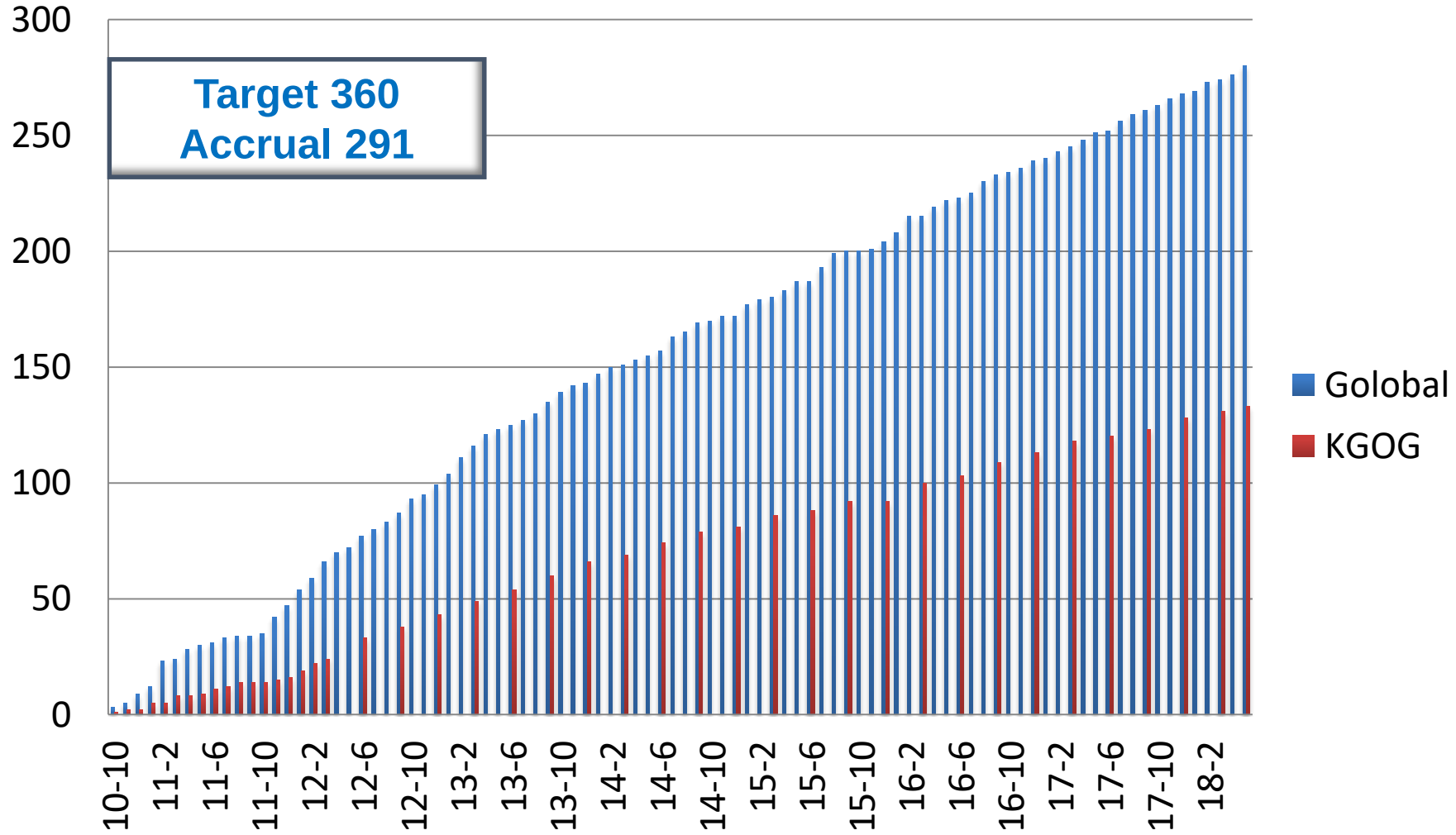

# TACO

## Tri-weekly Administration of Cisplatin in LOcally Advanced Cervical Cancer

## KGOG

Trial setting: Locally advanced cervical cancer Stage IB2, IIB-IVA

Study Design: Weekly versus Tri-weekly Cisplatin based CRT

Sponsor(s): KGOG

Planned No. of patients: 374

Current accrual: 276

Collaboration

1. KGOG 14-> 5 sites
2. Ramathibodi Hospital (Thailand)
3. Ho Chi Minh Cancer Center (Vietnam)
4. Zheijiang Cancer Center (China)

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Current accrual: 276

Revision of accrual; 590-> 374 (2017.11)

Collaboration

1. KGOG 14-> 5 sites
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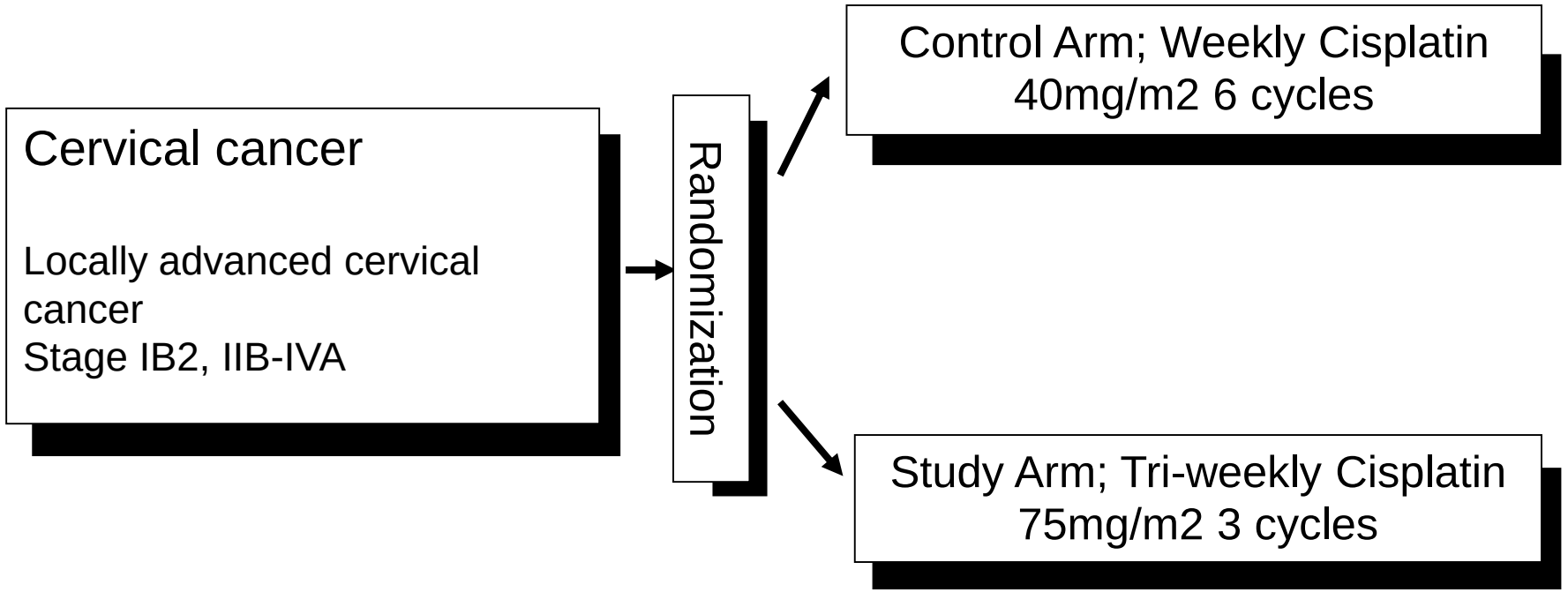
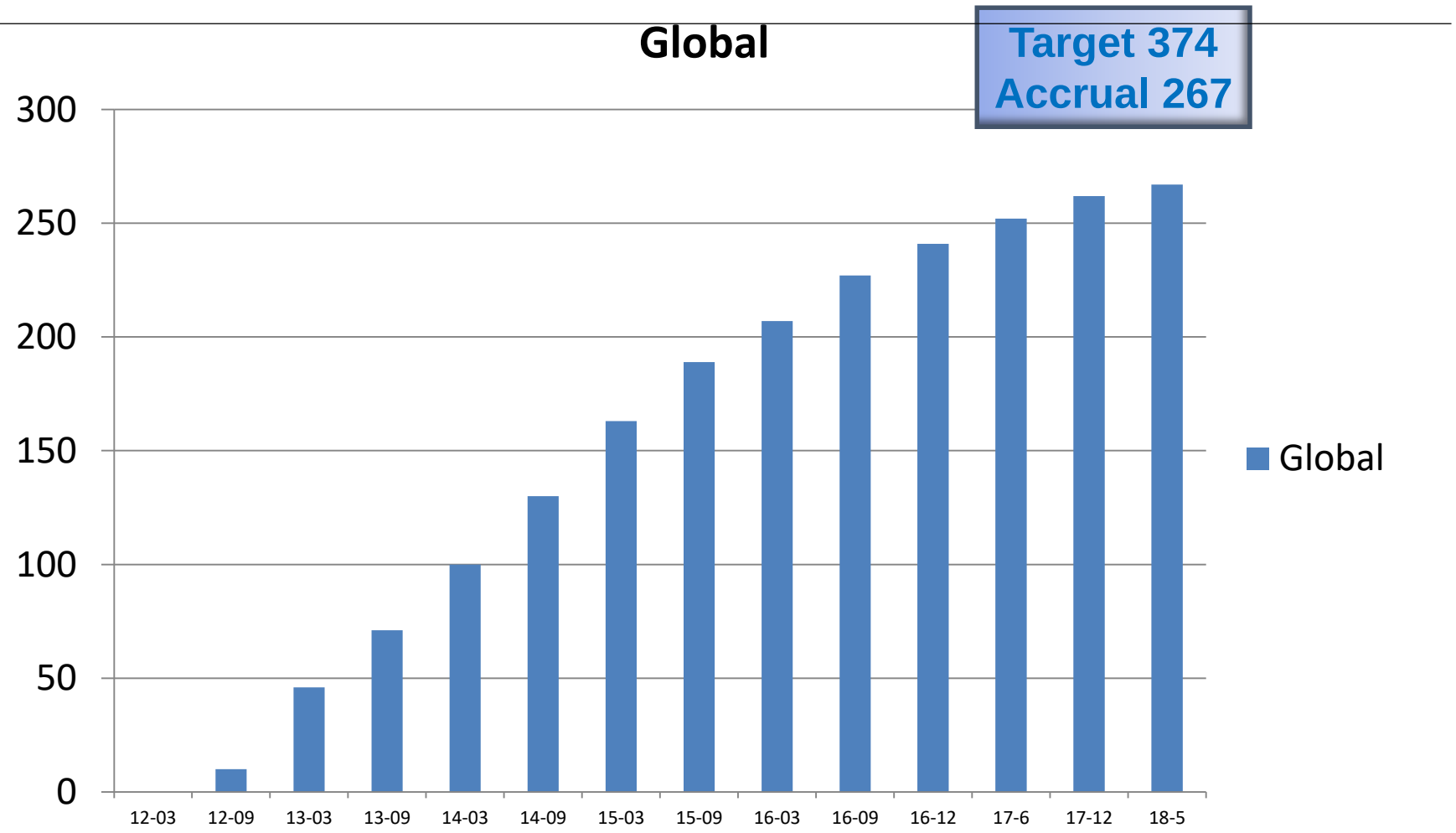
# TACO

Tri-weekly Administration of Cisplatin in LOcally Advanced Cervical Cancer

KGOG




Global
Target 374
Accrual 267
300
250
200
150
100
50
0
12-03
12-09
13-03
13-09
14-03
14-09
15-03
15-09
16-03
16-09
16-12
17-6
17-12
18-5
Global