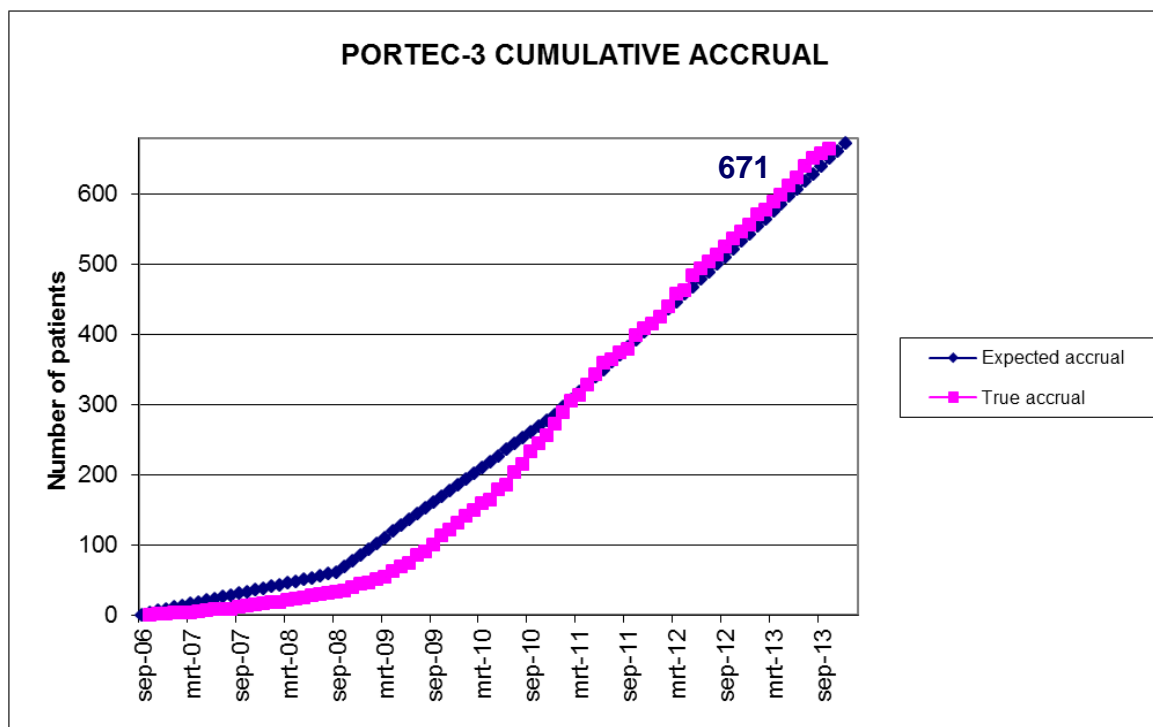


## PORTEC-3 has reached full accrual !

Accrual to PORTEC3 has reached the target number of 670 patients on November 18<sup>th</sup>, for a current total of 671.

See the graph below and the table on the next page.



## PORTEC-3 closure on Friday 20 December 2013

Now the trial has reached the recruitment target, we have set the date for closure just before the Christmas Holidays, on **Friday 20 December 2013, 16 pm (NL)**. We aim to include about 10-20 extra patients to compensate for some patients who were lost early (e.g., withdrawing consent after randomisation).

*The randomisation website will be closed down at the following local times:*

**Netherlands, France, Italy:** Friday 20 December 2013, at 16:00 pm

**UK:** Friday 20 December 2013, at 15:00 pm

**Canada:** Friday 20 December 2013, at 10:00 am

**Australia & New Zealand:** Saturday 21 December at 02:00 am

Group	Arm 1	Arm 2	Total	Past year
Netherlands	69	73	<b>142</b>	21
Italy	47	51	<b>98</b>	18
Australia/NZ	58	61	<b>119</b>	22
Canada	29	36	<b>65</b>	13
UK	97	84	<b>181</b>	47
France	36	30	<b>66</b>	10
<b>Total</b>	<b>336</b>	<b>335</b>	<b>671</b>	<b>131</b>

## DSMB

The Data and Safety Monitoring Board have had their annual teleconference on October 29, 2013. The 6-monthly Accrual and SAE report to all groups and the annual confidential report to the DSMB have been sent in October. The DSMB Annual Report to the TMG will be circulated later this year.

## Annual PORTEC-3 Investigator's meeting

This year's Annual PORTEC3 investigator's meeting has been held in London, just after the GCIG meetings on Sunday, 17 November 2013, at the UCL Education Centre. The minutes and slide presentation will be sent to the group coordinators.

## Radiotherapy QA

The radiotherapy QA done by ANZGOG/TROG is now well underway. However, there is still a substantial number of sites which have not uploaded their plan for QA. The overview of missing QA submissions is sent to the Group coordinating centres each month. *Please urgently remind all sites which have not yet uploaded their plan to do so as soon as possible.*

## Data management in 2014

2014 will be the year in which we hope to complete all trial data, update all follow-up and resolve all queries. There will be substantial database checks and queries sent. It is hoped that with a completed and up to date database we will be able to do the final analysis of the PORTEC-3 trial in 2015.

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## PORTEC-3 Nieuwsbrief 9 - NL appendix 20-11-2013

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### Beleid na sluiting PORTEC-3 studie

In de LPRGT vergadering van 14 november j.l. is gesproken over het beleid bij patiënten met hoog-risico endometriumcarcinoom na sluiting van de PORTEC-3 studie, totdat de uitkomsten bekend zijn.

Besloten is dat de LPRGT landelijk het volgende beleid zal adviseren, overeenkomstig met de richtlijn endometriumcarcinoom, postoperatieve FIGO 2009 stadiumindeling:

Stadium IA graad 3 met evidente LVSI: uitwendige RT (bovengrens aanpassen indien N0 na LKD)

Stadium IB graad 3: uitwendige RT (bovengrens aanpassen indien N0 na LKD)

Stadium II: uitwendige RT, brachyboost. Bij minimaal stadium II graad 1 overwegen alleen vaginale brachytherapie.

Bij macroscopisch stadium II waarbij radicale (Wertheim-type) OK is gedaan: zie richtlijn.

Stadium IIIA en IIIC en IIIB(parametrium): uitwendige RT, overweeg chemotherapie (dan voorkeur RT-CT schema zoals in PORTEC-3 waarin beide behandelingen vroeg starten).

Sereus carcinoom stadium IA na volledige stadiering: alleen vaginale brachytherapie

Sereus carcinoom stadium IB-II na volledige stadiering: uitwendige RT (bovengrens aanpassen bij N0 na LKD), overweeg chemotherapie.

Sereus carcinoom stadium III na volledige stadiering: overweeg chemotherapie met vaginale brachytherapie of uitwendige RT

Clear cell carcinoom stadium IA na volledige stadiering: alleen vaginale brachytherapie.

Clear cell carcinoom stadium IB en hoger: uitwendige RT (bovengrens aanpassen bij N0 na LKD), er zijn onvoldoende data om chemotherapie te overwegen (zie richtlijn)