SUMMARY OF CHANGES
Update Date: March 7, 2006

RTOG 0117, A Phase I/II Dose Intensification Study Using Three Dimensional Conformal Radiation Therapy And Concurrent Chemotherapy For Patients With Inoperable, Non-Small Cell Lung Cancer

Study Chair: Jeffrey Bradley, M.D., 314-362-8525, Fax 314-362-8521, bradley@radonc.wustl.edu

RTOG 0117 has been updated as follows:

Section 12.2: The phrase as defined in Appendix VII was deleted. This phrase appeared after Simulation and port films, Hard copy isodoses for total dose plan, and Simulation and port films for boost and/or field changes in the list of RT QA requirements. The phrase was deleted because there no longer is an Appendix VII.

NOTE: This is an editorial/administrative change to the protocol. NCI now requires that these changes be documented on the protocol title page with the date of the update noted as "Update Date", not as a revision.

An updated protocol is available on the RTOG website: http://www.rtog.org.
SUMMARY OF CHANGES
Amendment 6, Version Date: November 21, 2005

RTOG 0117, A Phase I/II Dose Intensification Study Using Three Dimensional Conformal Radiation Therapy And Concurrent Chemotherapy For Patients With Inoperable, Non-Small Cell Lung Cancer

Study Chair: Jeffrey Bradley, M.D., 314-362-8525, Fax 314-362-8521, bradley@radonc.wustl.edu

Schema page: Optional adjuvant chemotherapy was added to the schema.

Section 1.4.1: A new section describing the rationale for optional adjuvant chemotherapy was added.

Section 7.7: A new section detailing optional adjuvant chemotherapy was added.

Section 11.1: A column was added for patient assessments related to optional adjuvant chemotherapy.

Section 12.0: The address for RTOG Headquarters was updated.

Section 12.1: "…within 2 weeks of completion of optional adjuvant chemotherapy…” was added to the "Due" column for the Treatment Form (TF).

Section 12.2.3: The instructions for accessing the ITC web site were revised.

REFERENCES: New REFERENCES (66, 67, and 68) were added for sources cited in Section 1.4.1.

Appendix I, Sample Consent: Under "What Is Involved in the Study?" and "How Long Will I Be in the Study?" text explaining adjuvant chemotherapy was added.

An amended protocol is available (no password required) on the RTOG Web site, http://www.rtog.org
SUMMARY OF CHANGES
Update Date: November 17, 2005

RTOG 0117, A Phase I/II Dose Intensification Study Using Three Dimensional Conformal Radiation Therapy And Concurrent Chemotherapy For Patients With Inoperable, Non-Small Cell Lung Cancer

Study Chair: Jeffrey Bradley, M.D., 314-362-8525, Fax 314-362-8521, bradley@radonc.wustl.edu

RTOG 0117 has been updated as follows:

Title Page: Jim Purdy's contact information was updated.

NOTE: This is an editorial/administrative change to the protocol. NCI now requires that these changes be documented on the protocol title page with the date of the update noted as "Update Date", not as a revision.

An updated protocol is available on the RTOG website: http://www.rtog.org
RTOG 0117, A Phase I/II Dose Intensification Study Using Three Dimensional Conformal Radiation Therapy And Concurrent Chemotherapy For Patients With Inoperable, Non-Small Cell Lung Cancer

Study Chair: Jeffrey Bradley, M.D., 314-362-8525, Fax 314-362-8521, bradley@radonc.wustl.edu

The protocol has been re-designated RTOG 0117 (formerly RTOG L-0117). The letter, “L” (for Lung) that preceded the protocol number was deleted throughout the protocol to make the protocol designation consistent with current RTOG standards.

An amended protocol is available (no password required) on the RTOG Web site, http://www.rtog.org
SUMMARY OF CHANGES
Amendment 4, Version Date: October 28, 2004

RTOG L-0117, A Phase I/II Dose Intensification Study Using Three Dimensional Conformal Radiation Therapy And Concurrent Chemotherapy For Patients With Inoperable, Non-Small Cell Lung Cancer

Study Chair: Jeffrey Bradley, M.D., 314-362-8525, Fax 314-362-8521, bradley@radonc.wustl.edu

RTOG L-0117 was amended to document the completion of the Phase I component of the study, to specify the MTD, and to clarify the Phase II portion of the study. The following sections were amended:

- The Schema;
- The paragraph below the Schema;
- Section 6.1.3;
- Appendix I, the sample consent, under “Why Is This Study Being Done?” and “What Is Involved In The Study?”.

An amended protocol is available (no password required) on the RTOG Web site, http://www.rtog.org
RTOG L-0117, A Phase I/II Dose Intensification Study Using Three Dimensional Conformal Radiation Therapy And Concurrent Chemotherapy For Patients With Inoperable, Non-Small Cell Lung Cancer

Study Chair: Jeffrey Bradley, M.D., (314) 362-8525, Fax # (314) 362-8521, bradley@radonc.wustl.edu

RTOG L-0117 has been revised as follows:

Appendix I, Informed Consent — Under “How Long Will I Be In The Study”, the duration of radiation therapy was corrected from “five to eight weeks” to “seven to eight weeks” to correspond with the section, “What Is Involved In The Study?”.

A revised protocol is available (no password required) on the RTOG Web site, http://www.rtog.org
RTOG L-0117, A PHASE I/II DOSE INTENSIFICATION STUDY USING THREE DIMENSIONAL CONFORMAL RADIATION THERAPY AND CONCURRENT CHEMOTHERAPY FOR PATIENTS WITH INOPERABLE, NON-SMALL CELL LUNG CANCER

Study Chair: Jeffrey Bradley, M.D., (314) 362-8525, Fax # (314) 362-8521, bradley@radonc.wustl.edu

IRB Review Requirements:
(X) Full board review required
( ) Expedited review is permissible; however, site IRB requirements take precedence
( ) No review required

RTOG L-0117 has been revised as follows:

The radiation dose has been de-escalated to 74 Gy in 37 fractions in Arm 2 (instead of 80.5 Gy in 35 fractions) and 70 Gy in 35 fractions in Arm 3, if necessary. Arm 1, 75.25 Gy in 35 fractions, was completed 9-26-02. The sample size has changed from 64 to a maximum of 73; 27 patients for the Phase I component; 46 patients for the Phase II component. These changes are reflected on the Schema Page, Sections 6.1.3, 13.2, 13.5, and Appendix I. Section 6.1.8 was deleted; previous Section 6.1.9 became Section 6.1.8.

Washington University Image Guided Therapy Quality Assurance Center (IGTQAC) and RTOG 3DQA Center has been updated to Image-guided Therapy Center (ITC) in Sections 5.1, 6.1.5, 6.2.2, 6.8.1, 6.9, 6.10, 11.3.2.5, 12.0, and Appendix VI.

Study Registration Question #19 — The “Y” response has been deleted.

Section 1.3 — Paragraphs 3-6 have been added with an additional reference (#65); previous Table 3 has been revised; several paragraphs have been removed from “As the doses have been increased ……” to “The biological equivalent dose…. ….” Figure 1 was removed.

Section 6.6.2 — Reference to the tables has been removed.

Section 6.6.4 — The maximum spinal cord (point) dose should not exceed 45 Gy; previously, it was 35 Gy.

Sections 12.2.1 – 12.2.3 — The ITC mail, e-mail, and web addresses have been updated.

Section 13.4.2 — The upper bound of the one-sided 90% confidence interval “of 47%”
has been changed to “on 62.33%”.

REFERENCES — Reference #65 has been added.

Appendix I — Under “What is Involved in the Study”, the Radiation Therapy section has been revised to reflect the new schema. Under “What Are My Rights as a Participant?” reference to the Data Safety and Monitoring Board has been removed; the last paragraph “A group of experts….“ has been added to describe the monitoring mechanism for the study.

A revised protocol is available (no password required) on the RTOG website: http://www.rtog.org/
SUMMARY OF CHANGES
Revision 1, August 15, 2002

RTOG L-0117, A PHASE I/II DOSE INTENSIFICATION STUDY USING THREE DIMENSIONAL CONFORMAL RADIATION THERAPY AND CONCURRENT CHEMOTHERAPY FOR PATIENTS WITH INOPERABLE, NON-SMALL CELL LUNG CANCER

Study Chair: Jeffrey Bradley, M.D., (314) 362-8525, Fax # (314) 362-8521, bradley@radonc.wustl.edu

IRB Review Requirements:
(X) Full board review required
(   ) Expedited review allowed
(   ) No review required

RTOG L-0117 has been revised as follows:

Jeffrey Bradley, M.D., replaces Mary Graham, M.D., as the study chair. Roger Byhardt, M.D., is the radiation therapy co-chair.

The protocol has been simplified by dropping the number of radiation dose escalations to two and dropping Schema B of the chemotherapy. The previous Arm 3 of dose escalation, 84.0 Gy/35 fx has been changed to 80.5 Gy/35 fx and is now Arm 2. The sample size has changed from 72 to 64. These changes are reflected on the Schema Page, Sections 6.1.3, 6.1.8, 7.1, 7.2, 13.2, 13.5, and Appendix I.

Eligibility criteria added: weight loss < 5% in previous six months and atelectasis, if present, must be less than one lung has been added to the Schema Page, Eligibility Questions #19 and 18, Sections 3.1.5 and 3.2.8. Eligibility criteria changed: FEV₁ ≥ 1 L, mean esophageal dose < 34 Gy and the esophageal V55 ≤ 30% has been changed on the Schema Page, Eligibility Questions #17 and 7 (previous questions #18-20 are now #20-22), Sections 3.1.6, 3.1.9, 6.1.7, and 6.6.3 (previous Sections 3.1.6-3.1.9 are now 3.1.7-3.1.10.)

Schema Page — “Following completion of the above Phase I portion of the study, we will proceed to a Phase II study testing the efficacy of the tolerated dose derived from Arm 1” has been added.

Section 1.3 — Discussion about the previous dose escalation schema has been deleted; rationale for the second dose level of radiation has been added.

Section 1.4 — “Weekly chemotherapy administration is a commonly practiced method in the United States as proposed in this trial” has been added.
**Sections 2.1, 13.1.1** — The primary objective for the Phase I and Phase II portions of the study has been defined.

**Section 6.6.3** — The table for “Acute Severe Esophageal Complications” has been removed.

**Sections 6.12.1, 7.5.9, and 13.2** — Dose-limiting toxicities have been further defined.

**Section 7.6.1** — “Complete” has been removed; abbreviated CDUS reporting is required for this study.

**Section 7.6.4** — Special AE reporting for this study has been added.

**Section 11.1** — Last column has been changed to “12 months” and footnote g has been added for consistency.

**Section 13.2** — This section was revised for Phase I and Phase II portions of the study.

**Section 13.4.1** — Any problems will be reported to the RTOG “Lung” Committee and ....

**Section 13.4.2** — Analysis for reporting the initial treatment results has been revised.

**References** — Reference #64 has been added.

**Appendix I** — Under “What is Involved in the Study”, the chemotherapy section has been revised to reflect the new schema.