

# Raman Spectroscopy in Head and Neck Oncology

Published: 15-03-2012

Last updated: 28-04-2024

Accurately identify the molecular/ biochemical 'fingerprints' of the tissue structures and cell types within normal and malignant mucosa from the oral cavity, in particular the edge of the tongue and the floor of the mouth, based on Raman...

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruiting
<b>Health condition type</b>	Miscellaneous and site unspecified neoplasms malignant and unspecified
<b>Study type</b>	Observational invasive

## Summary

### ID

NL-OMON38366

### Source

ToetsingOnline

### Brief title

Raman Spectroscopy in Head and Neck Oncology

### Condition

- Miscellaneous and site unspecified neoplasms malignant and unspecified

### Synonym

Head and Neck Squamous Cell Carcinoma (HNSCC), tumor

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Erasmus MC, Universitair Medisch Centrum Rotterdam

**Source(s) of monetary or material Support:** Ministerie van OC&W

## Intervention

**Keyword:** HNSCC, Oncology, Raman, Spectroscopy

## Outcome measures

### Primary outcome

The primary outcomes are the characteristic Raman spectra of the tissue structures and cell types within normal and malignant mucosa from the oral cavity (in particular the edge of the tongue and the floor of the mouth), as a reflection of the molecular/ biochemical composition of these tissues.

### Secondary outcome

- Determine what the difference is in the molecular/ biochemical \*fingerprints\* between the normal-looking mucosa adjacent to the tumor and the normal mucosa of the contralateral side of the oral cavity.
- Determine what the difference is in the molecular/ biochemical \*fingerprints\* between normal and malignant mucosa of the oral cavity.
- Determine what the difference is in the molecular/ biochemical \*fingerprints\* between different patients (interpatient variance).
- Determine what the sensitivity and specificity of Raman spectroscopy is, compared to the gold standard (histological assessment).
- Build a multivariate diagnostic model that can distinguish between normal and malignant mucosa from the oral cavity

## Study description

### Background summary

Head and Neck Squamous Cell Carcinomas (HNSCC) are associated with severe disease and high mortality, which is due mainly to the development of metastases and recurrences over time. It is known that there is a higher chance to develop metastases and recurrences when the surgical tumor resection is incomplete. The current gold standard to ensure tumor-free margins during surgery, histological assessment, is time-consuming and is dependent on the experience of the surgeon and on subjective assessment of the surgeon and the pathologist. A new technique is therefore needed that can provide objective real-time information about the composition of tissues during surgical tumor resections in the head and neck region.

During tumorigenesis the morphologically visible malignant transformation of an epithelial cell is preceded by changes in its biochemical composition. Raman spectroscopy is an optical technique based on inelastic scattering of light by molecules. The concentration of a specific molecule in a tissue defines its contribution to the Raman spectrum. Since a Raman spectrum of a single molecule is very specific for that molecule, a Raman spectrum of a tissue can be seen as a molecular or biochemical \*fingerprint\* of that tissue. Because different types of tissue will vary in their overall molecular composition, their Raman spectra will also differ. Raman spectroscopy can consequently provide detailed information on the biochemical composition of specific tissue structures and cell types.

Raman spectroscopy is a non-destructive and non-invasive technique that needs no tissue preparation. Moreover, with this technique it is possible to obtain real-time clinical information about the investigated tissues. Based on these characteristics Raman spectroscopy is a powerful candidate for in vivo and ex vivo real-time guidance of oncological surgical resections in head and neck region.

### **Study objective**

Accurately identify the molecular/ biochemical 'fingerprints' of the tissue structures and cell types within normal and malignant mucosa from the oral cavity, in particular the edge of the tongue and the floor of the mouth, based on Raman spectroscopy, in order to make a first step towards in vivo applications of this technique.

### **Study design**

- prospective collection of tissue samples
- observational research (Raman mapping experiments)

### **Study burden and risks**

To close the biopsy defects during surgery, none or one soluble suture will be

used. This suture can give some discomfort or pain while eating or speaking, however it is expected that this will not significantly contribute to the discomfort related to the clinically indicated resection of the malignant lesion. Patients are postoperative treated according to a protocol which will lead to accurate pain management and antiseptic care. Because of this and because the biopsies will be very small (6 mm cross-cut), the chance of infection and bleeding is very small.

For future purposes a blood sample will be collected additional to pre- or post-operation blood control, in order to correlate the results of Raman spectroscopy with molecular diagnostic methods.

There are no risks associated for the patient when the biopsies of the resection material are collected.

No additional treatments, consults or tests are necessary for the patient.

## Contacts

### **Public**

Erasmus MC, Universitair Medisch Centrum Rotterdam

's-Gravendijkwal 230  
Rotterdam 3015 CE  
NL

### **Scientific**

Erasmus MC, Universitair Medisch Centrum Rotterdam

's-Gravendijkwal 230  
Rotterdam 3015 CE  
NL

## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

## Age

Adults (18-64 years)

Elderly (65 years and older)

## Inclusion criteria

- Surgical oncologic procedure because of an untreated SCC of the oral cavity
- Signed informed consent
- Male and female
- Age > 18 years old
- No distant metastasis

## Exclusion criteria

- Another type of tumor in the head and neck region (non SCC)
- Pre-operative treatment (chemotherapy or radiotherapy)
- Presence of distant metastases (M1)
- Patients with HIV, CMV or Hepatitis C

## Study design

### Design

Study type:	Observational invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Diagnostic

### Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	02-05-2012
Enrollment:	80
Type:	Actual

## Ethics review

Approved WMO

Date: 15-03-2012

Application type: First submission

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

Approved WMO

Date: 03-09-2012

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

### Other (possibly less up-to-date) registrations in this register

No registrations found.

### In other registers

**Register**

CCMO

**ID**

NL37340.078.11