

TIGER Trial News

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Welcome to the third TIGER newsletter

This is an opportunity for us to keep you informed of the progress of the TIGER study and to say a BIG THANK YOU to the principal investigators, co-investigators, study coordinators and research team at all the participating sites for your ongoing commitment to the study.

Word from the ANZ Study Chair

Welcome to our third TIGER Newsletter. The international TIGER trial is arguably the most important clinical trial for relapsed metastatic testicular cancer and germ cell tumours globally at present, and I am delighted that four centres of excellence in Australia are participating. I encourage investigators to continue to seek cross referrals from colleagues, given the small number of eligible patients.

Recruitment update

Global recruitment is currently at 197/420 randomised. Please continue to use the randomisation checklist to screen potential patients at your site. If there are any questions regarding a patient's eligibility, please contact the TIGER trials team at tiger@ctc.usyd.edu.au.

Local recruitment table

Site	No. of patients
Chris O'Brien Lifehouse	2
Peter MacCallum Cancer Centre	1
Box Hill Hospital	1
Princess Alexandra Hospital	1

We are grateful to the Movember Foundation for their financial support to conduct this study



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TIGER is being led by ANZUP Cancer Trials Group in collaboration with the NHMRC CTC.



Alliance for Clinical Trials in Oncology is the Lead Group in the USA.



Translational research (TR) biospecimens

Please refer to the instructions in the TIGER Biospecimen Sampling Manual for collection of translational research bloods at baseline.

An excerpt from:

“Ongoing Clinical Trials in Testicular Cancer: The TIGER Trial”

(Oncol Res Treat 2016;39:553–556)

Why this trial is important to us?

Due to a lack of randomised trials, the optimal first salvage approach still remains unclear. It is a matter of debate whether sequential high-dose chemotherapy (HDCT) or conventional-dose chemotherapy (CDCT) represents the optimal strategy for patients who progress after first-line chemotherapy.

TIGER will now be able to answer this important and controversial question about optimal treatment for first salvage in relapsed and refractory GCT patients.

There are 3 possible outcomes to this trial, all of which would have important effects on the standard of care:

- 1) HDCT improves OS compared to CDCT in all patient groups.
- 2) HDCT does not improve OS compared to CDCT in any patient groups.
- 3) HDCT improves OS relative to CDCT only in a specific subset of patients.

What is TIGER?

A randomised phase 3 trial comparing conventional-dose chemotherapy using paclitaxel, ifosfamide, and cisplatin (TIP) with high-dose chemotherapy using mobilising paclitaxel plus ifosfamide followed by high-dose carboplatin and etoposide (TI-CE) as first salvage treatment in relapsed or refractory germ cell tumours.

TIGER key contacts

- Clinical trial operations E: tiger@ctc.usyd.edu.au
- Sponsor queries (e.g. site payments, contracts) E: jaclyn.verghis@anzup.org.au T: +61 2 8036 5271
- Coordinating PI: A/Prof Peter Grimison E: peter.grimison@lh.org.au
- Trial information: <https://anzup.org.au/content.asp?page=trials-tiger>
- ANZUP ClinTrial Refer app available for download from [iTunes](#) and [Google Play](#)