Pharmacokinetics of the antiviral drug ribavirin in Lassa fever treatment

Submission date 02/02/2020	Recruitment status No longer recruiting	Prospectively registered		
		[X] Protocol		
Registration date 06/02/2020	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited 05/10/2022	Condition category Infections and Infestations	☐ Individual participant data		

Plain English summary of protocol

Background and study aims

Lassa fever (LF) is a severe and often fatal systemic disease in humans. It is caused by Lassa virus (LASV) which belongs to the segmented negative-strand RNA viruses of the family Arenaviridae. LF affects a large number of countries in West Africa. The currently used antiviral, which is also recommended by WHO, is ribavirin. However, evidence for ribavirin efficacy in LF patients is poor and pharmacokinetic (PK) data for currently used regimens are not available. This study will describe blood concentrations of ribavirin and will provide evidence for further dose optimization studies with the ultimate goal of improving patient care.

Who can participate?

Patients aged 18 years or older, suffering from Lassa fever.

What does the study involve?

Participants will receive ribavirin treatment using the Irrua hospital dosing regimen. Blood samples will be collected at 0.5, 1, 3, 5, 8, 12 and 24 hours after doses on day 1, day 4 and day 10.

What are the possible benefits and risks of participating?

Benefits: Participants will be provided with protein bars and long-lasting insecticide-treated bednets as compensation for taking part in this observational study.

Risks: Participants may experience side effects from taking the drug.

Where is the study run from? Irrua Specialist Teaching Hospital (Nigeria)

When is the study starting and how long is it expected to run for? February 2020 to September 2021

Who is funding the study? Federal German Ministry for Health (Germany)

Who is the main contact? Dr Mirjam Groger groger@bnitm.de

Contact information

Type(s)

Public

Contact name

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Additional identifiers

EudraCT/CTIS number

Nil known

IRAS number

ClinicalTrials.gov number

Nil known

Secondary identifying numbers

v03 06DEC2019, amended version of v02 25OCT2019

Study information

Scientific Title

Prospective observational study on the pharmacokinetic properties of the Irrua ribavirin regimen used in routine clinical practice in Lassa fever patients in Nigeria

Acronym

PAIRR

Study objectives

Evaluating the pharmacokinetic (PK) characteristics of ribavirin when administered as per local standard in a national reference centre for treatment of Lassa fever (LF). Descriptive analysis of

drug exposure and viral kinetics will be performed to elucidate the PK/PD (pharmacodynamic) profile of ribavirin in the treatment of LF.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 07/11/2019, Human Research Ethics Committee of ISTH (Irrua Specialist Teaching Hospital, km87 Benin Auchi Road, Irrua, P.M.B. 8 Edo State, Nigeria; +234 815 299 8878; isth.rec. 2015@gmail.com), ref: ISTH/HREC/20190104/009

Study design

Prospective observational clinical study

Primary study design

Observational

Secondary study design

Longitudinal study

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Part of the informed consent form

Health condition(s) or problem(s) studied

Lassa fever

Interventions

Pharmacokinetic analysis of ribavirin treatment

Blood samples will be collected at 0.5, 1, 3, 5, 8, 12 and 24 hours after doses on day 1, day 4 and day 10 of ribavirin treatment using the Irrua dosing regimen. Additionally, blood will be collected during screening before the first dose of ribavirin. Blood samples will be centrifuged and the plasma supernatant will be frozen at -80° C within 2 h after blood sampling. Plasma samples will be inactivated using a validated protocol. The samples will then be shipped frozen to the bioanalysis site (Dept. of Clinical Pharmacy, Institute of Pharmacy, University of Hamburg, Germany). Ribavirin plasma concentrations will be determined using liquid chromatography coupled to tandem mass spectrometry (LCMS/ MS).

PCR analyses

Blood for RT-PCR, LASV serology and metagenomic sequencing will be sampled at inclusion, 24 hours after first drug administration and then every second day until end of treatment. Two RT-PCR assays for the detection of LASV, Altona Diagnostics (Hamburg, Germany) and an inhouse assay will be used to determine the viral load. These analyses will be performed at site in Irrua.

Biochemistry and hematology

Blood for biochemical safety and tolerability will be collected every second day starting with

screening. Biochemistry and hematology analyses will be performed using automated systems at ISTH.

Intervention Type

Drug

Phase

Phase IV

Drug/device/biological/vaccine name(s)

Ribavirin

Primary outcome measure

Pharmacokinetic parameters (maximum concentration (Cmax), maximum time (Tmax), area under the curve (AUC), half-life time (T1/2), volume of distribution) using blood samples will be collected at 0.5, 1, 3, 5, 8, 12 and 24 hours after doses on day 1, day 4 and day 10 of ribavirin treatment using the Irrua dosing regimen

Secondary outcome measures

- 1. Safety and tolerability of the Irrua Ribavirin regimen measured using clinical, hematological, and biochemical parameters:
- 1.1. Clinical: every day from day 0 to day 10
- 1.2. Haematology: standarad full blood count (hb; wbc; pla; diff) every 48 hours
- 1.3. Biochemistry: creatinine; alt; ast; bun; ldh every 48 hours
- 2. Viral kinetics in patients measured using at day 0, 5, 10
- 3. LASV genome changes under the Irrua ribavirin regimen measured at day 0, 5, 10

Overall study start date

01/06/2019

Completion date

01/09/2021

Eligibility

Key inclusion criteria

- 1. Age ≥ 18 years
- 2. Lassa fever confirmed by RT-PCR
- 3. Written informed consent
- 4. Anticipated treatment with intravenous ribavirin

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

20

Total final enrolment

20

Key exclusion criteria

- 1. Inability to give consent (e.g. unconscious patients/ cognitively impaired patients)
- 2. Critical illness (based on investigator's clinical evaluation)
- 3. Severe malnutrition
- 4. Hemodialysis
- 5. History of hemophilia / bleeding disorder
- 6. Hematocrit <30 %
- 7. History of hemoglobinopathies (i.e., sickle-cell anaemia or thalassemia major)
- 8. Known intolerance to ribavirin
- 9. Known pregnancy
- 10. Women who plan to get pregnant within the upcoming 3 months
- 11. Patients who already received ribavirin within the last 7 days

Date of first enrolment

03/02/2020

Date of final enrolment

18/03/2021

Locations

Countries of recruitment

Nigeria

Study participating centre Irrua Specialist Teaching Hospital

km87 Benin Auchi Road Irrua Nigeria P.M.B. 8 Edo State

Sponsor information

Organisation

Bernhard Nocht Institute for Tropical Medicine

Sponsor details

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Sponsor type

Research organisation

Website

https://www.tropmed-hamburg.de

ROR

https://ror.org/01evwfd48

Funder(s)

Funder type

Government

Funder Name

Bundesministerium für Gesundheit

Alternative Name(s)

Federal Ministry of Health, Germany, Federal Ministry of Health, BMG

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Germany

Results and Publications

Publication and dissemination plan

All results will be published in agreement between the Sponsor and the PI in international peer-reviewed scientific journals with preference to open access journals.

Intention to publish date

01/06/2022

Individual participant data (IPD) sharing plan

Relevant data are within the manuscript and its supporting information files. The data underlying the results presented in the study are available from the corresponding author on reasonable request.

IPD sharing plan summary

Available on request, Published as a supplement to the results publication

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article	protocol	16/04/2020	21/04/2020	Yes	No
Results article	outcome measures	26/07/2022	05/10/2022	Yes	No