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MUK eleven: Viral Immunotherapy in Relapsed /Refractory Multiple Myeloma

Submission date 09/01/2017	**Recruitment status** No longer recruiting	[X] Prospectively registered [_] Protocol [_] Statistical analysis plan [X] Results [_] Individual participant data
Registration date 11/01/2017	**Overall study status** Completed	
Last Edited 17/11/2022	**Condition category** Cancer	

Plain English summary of protocol
https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-study-of-reolysin-alongside-lenalidomide-or-pomalidomide-for-myeloma-muk-eleven

Contact information

Type(s)
Public

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Additional identifiers

EudraCT/CTIS number
2016-001564-11

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers
31775

Study information

Scientific Title
VIRel: Viral immunotherapy in Relapsed/Refractory Multiple Myeloma - A Phase I Study to Assess the Safety and Tolerability of REOLYSIN® (pelareorep) in Combination with Lenalidomide or Pomalidomide

Acronym
MUK eleven

Study objectives
To main aim of this study is to determine the Maximum Tolerated Doses (MTDs) of REOLYSIN® in combination with lenalidomide or pomalidomide in two separate groups of patients with multiple myeloma demonstrating evidence of serological disease progression.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Yorkshire & The Humber - Leeds West Research Ethics Committee, 09/11/2016, ref: 16/YH/0388

Study design
Non-randomised; Interventional; Design type: Treatment, Drug, Immunotherapy

Primary study design
Interventional

Secondary study design
Non randomised study

Study setting(s)
Hospital

Study type(s)
Treatment

Participant information sheet
Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied
Specialty: Cancer, Primary sub-specialty: Haematological Oncology; UKCRC code/ Disease: Cancer/ Malignant neoplasms, stated or presumed to be primary, of lymphoid, haematopoietic and related tissue

Interventions
Participants will be treated with REOLYSIN® along with lenalidomide or pomalidomide, depending on which of these drugs they were
previously taking immediately before starting on the trial. Treatment will be given in cycles lasting 28 days in the following schedule:
Lenalidomide or pomalidomide - oral, on days 1-21
REOLYSIN® - intravenous infusion over 1 hour on days 1, 8, 15 and 22

Treatment will last until the participant's multiple myeloma progresses, their doctor decides it is necessary to stop treatment or until the participant decides they do not want any more treatment within the study. The frequency of follow-up visits will be decided by the participant's doctor but we will continue to collect data for up to 3 years.

Intervention Type
Other

Phase
Phase I

Primary outcome measure
Dose-limiting toxicities are measured in real-time for each patient to inform dose escalation decisions after cycle 1 (28 days) of treatment.

Secondary outcome measures
1. Safety profile of REOLYSIN® and lenalidomide or pomalidomide is assessed based on the occurrence of SAEs, SARs and SUSARs until 28 days after the last dose of trial treatment for each patient
2. Toxicity profile of REOLYSIN® and lenalidomide or pomalidomide is assessed based on adverse events, as graded by CTCAE V4.0, and determined by routine clinical assessments at each centre until 28 days after the last dose of trial treatment for each patient
3. Response rate (stable disease or better) is measured using IMWG criteria after 6 cycles of therapy in patients treated at the maximum tolerated dose
4. Maximum response within 6 cycles of therapy is measured using IMWG criteria in patients treated at the maximum tolerated dose
5. Maximum response overall is measured using IMWG criteria in patients treated at the maximum tolerated dose when they have finished their treatment.
6. Time to maximum response in patients treated at the maximum tolerated dose is measured using IMWG criteria when they have finished their treatment
7. Progression-free survival is calculated for each patient from the date of registration up to first documented evidence of disease progression or death. Measured only in patients treated at the maximum tolerated dose
8. Overall survival is calculated for each patient from the date of registration to death. Measured only in patients treated at the maximum tolerated dose.

Exploratory outcome measure:
Immune response biomarker profile of REOLYSIN® and lenalidomide or pomalidomide administered in combination.

Overall study start date
30/06/2015

Completion date
01/05/2019

Eligibility

Key inclusion criteria

1. Diagnosed with symptomatic multiple myeloma (according to IMWG 2014 criteria)
2. Evaluable disease by modified IMWG criteria (i.e. by abnormal serum M protein, urinary M protein or serum free light chain assays)
3. Currently receiving either lenalidomide or pomalidomide therapy, alone or in combination with other myeloma therapy, with evidence of serological or clinical disease progression as defined by IMWG criteria (2011)
4. Life expectancy of ≥ 3 months
5. ECOG performance status of ≤2
6. Required laboratory values within 14 days prior to dose allocation:
7. Absolute neutrophil count ≥ 1.0 x109 /L. (growth factor support is not permitted)
8. Platelet count ≥ 70 x 109/L. (platelet support is not permitted; platelets < 70 but ≥ 25 acceptable if bone marrow is > 50% infiltrated by MM)
9. Haemoglobin ≥ 8 g/dL. Blood support is permitted
10. Serum bilirubin ≤ 2 x upper limit of normal (ULN)
11. ALT or AST ≤ 2.5 x ULN
12 Serum creatinine ≤ 2 x ULN
13. Corrected calcium ≤ 2.8 mmol/l
14. Negative HIV and viral (B and C) hepatitis test result within 14 days prior to dose allocation
15. Able to give informed consent and willing to follow trial protocol
16. Aged 18 years or over
17. All participants must agree to follow the Celgene Pregnancy Prevention Programme (PPP) and participate in the counselling associated with this:
18. Females of childbearing potential (FCBP) must agree to utilise two reliable forms of contraception simultaneously or practice complete abstinence for at least for 28 days prior to starting trial treatment, during the trial and for at least 28 days after trial treatment discontinuation, and even in case of dose interruption, and must agree to Celgene PPP pregnancy testing during this timeframe
19. Females must agree to abstain from breastfeeding during trial participation and 28 days after trial drug discontinuation
20. Males must agree to use a latex condom during any sexual contact with FCBP (or must practice complete abstinence) during the trial, including during dose interruptions and for 28 days following discontinuation from this trial even if he has undergone a successful vasectomy
21. Males must also agree to refrain from donating semen or sperm while on pomalidomide including during any dose interruptions and for 28 days after discontinuation from this trial
22. All participants must agree to refrain from donating blood while on trial drug including during dose interruptions and for 28 days after discontinuation from this trial

Participant type(s)
Patient

Age group
Adult

Lower age limit
18 Years

Sex
Both

Target number of participants

Planned Sample Size: 44; UK Sample Size: 44

Total final enrolment
4

Key exclusion criteria
1. Non-secretory multiple myeloma
2. Pregnant (positive pregnancy test) in line with the Celgene Pregnancy Prevention Programme or breast feeding
3. Previous anti-tumour therapies including experimental agents, other than lenalidomide or pomalidomide, within 28 days of the start of protocol treatment. Steroid therapy is permitted, but must be stopped 48 hours prior to cycle 1 day 1
4. Concurrent or previous malignancies (<12 months post end of treatment) at other sites, with the exception of appropriately treated localised epithelial skin or cervical cancer, or incidental histologic findings of prostate cancer (TNM stage T1a or 1b). Participants with histories (≥12 months) of other tumours, in remission and not currently on therapy, may be entered.
5. System corticosteroid therapy for comorbidities (i.e. medical conditions other than multiple myeloma) that cannot be stopped for the duration of the trial. Topical corticosteroid therapy is not an exclusion criterion.
6. Any history of known hypersensitivity to any of the trial medications or excipients
7. Active symptomatic fungal, bacterial, and/or viral infection
8. Poorly controlled or serious medical or psychiatric illness that, in the Investigator’s opinion, is likely to interfere with participation and/or compliance in this clinical trial
9. Patients with significant cardiovascular disease (e.g. history of congestive heart failure requiring therapy (≥ NYHA Class III), presence of severe valvular heart disease, presence of an atrial or ventricular arrhythmia requiring treatment, uncontrolled hypertension, or history of QTc abnormalities)
10. Radiotherapy or major surgery within 4 weeks prior to registration
11. Greater than or equal to grade 2 neuropathy, with or without pain

Date of first enrolment
01/02/2017

Date of final enrolment
01/11/2018

Locations

Countries of recruitment
England

United Kingdom

Study participating centre
St. James's University Hospital
Beckett Street
Leeds
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Sponsor information

Organisation
University of Leeds

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Sponsor type
University/education

ROR
https://ror.org/024mrxd33

Funder(s)

Funder type
Charity

Funder Name
Myeloma UK

Alternative Name(s)

Funding Body Type
Private sector organisation

Funding Body Subtype
Other non-profit organizations

Location
United Kingdom

Results and Publications

Publication and dissemination plan

Current publication and dissemination plan as of 17/11/2022:
The study will not be published unfortunately.

Previous publication and dissemination plan:
Plans to publish study results in a peer-reviewed journal around one year after the end of the trial.

Intention to publish date

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available on request from the CTRU CARP Programme (carp@leeds.ac.uk). Raw data will be provided and will be available from now for 25 years. The researchers will accept proposals from ethically approved academic and commercial projects, consent has been obtained from participants for future research, and the data will be anonymised before being transferred.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Basic results	version 1.0	17/11/2022	17/11/2022	No	No
HRA research summary			26/07/2023	No	No