# Safety and tolerability of the combination of veltuzumab and epratuzumab with intensive chemotherapy in patients with relapsed B-cell acute lymphoblastic leukaemia (ALL)

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
12/05/2010		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
12/05/2010	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
24/03/2022	Cancer			

# Plain English summary of protocol

http://cancerhelp.cancerresearchuk.org/trials/a-study-adding-biological-therapy-chemotherapy-acute-lymphoblastic-leukaemia-come-back-after-treatment-marall

# Contact information

# Type(s)

Scientific

### Contact name

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# Contact details

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# Additional identifiers

# EudraCT/CTIS number

2008-002286-32

### **IRAS** number

# ClinicalTrials.gov number

NCT01279707

# Secondary identifying numbers

7566

# Study information

### Scientific Title

Phase I/II study combining humanised anti-CD20 (veltuzumab), anti-CD22 (epratuzumab) or both monoclonal antibodies with intensive chemotherapy in adults with recurrent B-precursor acute lymphoblastic leukaemia (ALL)

# Acronym

**MARALL** 

# Study objectives

This is a phase I/II study to determine the safety and tolerability of the combination of veltuzumab and epratzumab with intensive chemotherapy in patients with relapsed B-cell acute lymphoblastic leukaemia (ALL). A maximum of 55 patients will be treated with a combination of UKALL XII induction chemotherapy and the monoclonal antibodies veltuzumab and epratuzumab. Veltuzumab and epratuzumab are humanised monoclonal antibodies that target CD20 and CD22 surface proteins, respectively. Both of these proteins are expressed on ALL tumour B cells.

One group of patients will receive UKALL XII + veltuzumab; a second, UKALL XII + epratuzumab and if limited toxicity is found in these first two groups, a third group will receive, UKALL XII + both veltuzumab and epratuzumab. Patients will be assessed for safety, tolerability and disease response. Safety and tolerability will be measured by the number of dose limiting toxicities (DLTs) in each group. Disease response will be measured by the microscopic appearance of patient bone marrow samples at day 29, and by molecular tests for tumour cells in bone marrow.

# Ethics approval required

Old ethics approval format

# Ethics approval(s)

North London REC 3 approved on the 10th August 2009 (ref: 09/H0709/42)

# Study design

Multicentre non-randomised interventional screening and treatment trial

# Primary study design

Interventional

# Secondary study design

Non randomised controlled trial

# Study setting(s)

GP practice

# Study type(s)

Treatment

# Participant information sheet

Not available in web format, please contact marall@qmcr.qmul.ac.uk to request a patient information sheet

# Health condition(s) or problem(s) studied

Topic: National Cancer Research Network; Subtopic: Haematological Oncology; Disease: Leukaemia (acute lymphoblastic)

### **Interventions**

Cohort A patients:

- 1. UKALL 12 chemotherapy
- 2. Veltuzumab at 200 mg/m $^2$  intravenously on days 8 (as a 2-hour infusion), 15, 22 and 29 (as a 1-hour infusion)

# Cohort B patients:

- 1. UKALL 12 chemotherapy
- 2. Epratuzumab at 360 mg/m $^2$  intravenously on days 8, 15, 22, 29 (as a 1-hour infusion)

# Cohort C patients:

- 1. UKALL 12 chemotherapy
- 2. Epratuzumab and veltuzumab at 360 mg/m<sup>2</sup> and 200 mg/m<sup>2</sup> respectively, intravenously on days 8, 15, 22, 29.

All patients will receive UKALL 12 chemotherapy as shown below:

- 1. Daunorubicin given at 60 mg/m^2 intravenously on days 1, 8, 15 and 22
- 2. Dexamethasone given at 10 mg/m<sup>2</sup> orally on days 1 5 and days 11 14
- 3. L-asparaginase given at  $5,000 \text{ iU/m}^2$  intravenously or intramuscularly on days 17, 19, 21, 23, 25, 27 and 29
- 4. Methotrexate 12.5 mg given intrathecally on day 24 only (unless central nervous system [CNS] leukaemia detected at relapse)
- 5. Vincristine given at 1.4 mg/m^2 intravenously on days 1, 8, 15 and 22

Follow-up length: 1 months Study entry: registration only

# Intervention Type

Drug

# **Phase**

Phase I/II

# Drug/device/biological/vaccine name(s)

Veltuzumab, epratzumab

# Primary outcome measure

Assess the safety and tolerability of the combination of veltuzumab and/or epratuzumab with intensive chemotherapy for recurrent adult B-precursor ALL by scoring dose limiting toxicity events in patients.

# Secondary outcome measures

Achievement of morphological and molecular complete remission on Day 29 bone marrow

# Overall study start date

06/01/2010

# Completion date

09/10/2011

# **Eligibility**

# Key inclusion criteria

- 1. Aged between 16 and 65 years, either sex
- 2. Confirmed diagnosis of first recurrence of B-precursor ALL (according to the World Health Organization [WHO] classification)
- 3. First complete remission (CR1) greater than 6 months
- 4. WHO/Eastern Cooperative Oncology Group (ECOG) performance status of 0 2 and well enough to receive intensive combination chemotherapy
- 5. Negative pregnancy test in women of childbearing potential. Women will not be considered of child bearing potential if they have undergone surgical removal of the uterus or are post menopausal and have been amenorrhoic for at least 24 months.
- 6. Patients must have a cardiac ejection fraction of greater than 50%
- 7. Patients must have adequate organ function:
- 7.1. Renal function serum creatinine less than 2.5 x upper limit of normal (ULN) or estimated glomerular filtration rate (eGFR) greater than 50 ml/min (measured EDTA or estimated creatinine clearance, e.g., Cockcroft & Gault)
- 7.2. Liver function bilirubin/alanine aminotransferase (ALT) less than 2.5 x ULN
- 8. Patients must be able to comply with the study schedule

# Participant type(s)

Patient

# Age group

Adult

### Sex

Both

# Target number of participants

Planned sample size: 55; UK sample size: 55

### Total final enrolment

27

# Key exclusion criteria

- 1. Patients with Philadelphia positive (Ph +ve) ALL
- 2. Patients at 2nd or greater relapse of their ALL
- 3. Patients should not have received chemotherapy for relapsed ALL (except corticosteroids for a maximum of 5 days, before joining the study)
- 4. Patients who have already received greater than 340 mg/m<sup>2</sup> daunorubicin (or equivalent

total anthracycline dose) therapy

- 5. Patients who have received prior mediastinal radiotherapy
- 6. Patients with co-morbidities: e.g. uncontrolled hypertension and or poorly controlled diabetes which in the PI's opinion makes them unsuitable for the study
- 7. Patients with severe psychiatric disorders which in the PI's opinion makes them unsuitable for trial participation
- 8. Females of childbearing potential and all males must be willing to use an effective method of contraception (hormonal or barrier method of birth control; abstinence) for the duration of the study and for up to 3 months after the last dose of study medication. Note: Subjects are not considered of child bearing potential if they are surgically sterile (they have undergone a hysterectomy, bilateral tubal ligation, or bilateral oophorectomy) or they are post-menopausal (that is amenorrheic for 24 months).
- 9. Females of childbearing potential must have a negative pregnancy test within 7 days prior to starting the study
- 10. Females must not be breastfeeding
- 11. Patients may not receive any other investigational agent during the study
- 12. Patients should not have received any antibody therapy within 9 months of joining this study

**Date of first enrolment** 06/01/2010

Date of final enrolment 09/10/2011

# Locations

Countries of recruitment

England

**United Kingdom** 

Study participating centre Centre for Experimental Cancer Medicine London United Kingdom EC1M 6BQ

# Sponsor information

# Organisation

Queen Mary University of London

# Sponsor details

Mile End Road London England United Kingdom E1 4NS

# Sponsor type

University/education

### Website

http://www.qmul.ac.uk/

### **ROR**

https://ror.org/026zzn846

# Funder(s)

# Funder type

Charity

### **Funder Name**

Cancer Research UK (CRUK) (UK) (ref: C1574/A9768)

# Alternative Name(s)

CR\_UK, Cancer Research UK - London, CRUK

# Funding Body Type

Private sector organisation

# **Funding Body Subtype**

Other non-profit organizations

### Location

United Kingdom

### **Funder Name**

Immunomedics Inc (USA)

# **Results and Publications**

# Publication and dissemination plan

Not provided at time of registration

# Intention to publish date

Individual participant data (IPD) sharing plan

# Not provided at time of registration

**IPD sharing plan summary**Not provided at time of registration

# Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Basic results				No	No
Plain English results			24/03/2022	No	Yes
HRA research summary			28/06/2023	No	No