

TNT-1:OPTIMA (Tri-National Trial 1: Options in Management with Anti-retrovirals) - A tri-national (Canada, UK, USA) randomised controlled trial to determine the optimal management of patients with Human Immunodeficiency Virus (HIV) infection for whom first and second-line Highly Active Anti-Retroviral Therapy (HAART) has failed

Submission date 19/01/2001	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered
		<input checked="" type="checkbox"/> Protocol
Registration date 19/01/2001	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 21/03/2016	Condition category Infections and Infestations	<input type="checkbox"/> Individual participant data

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

Contact name
Dr D. William Cameron

Contact details
The Ottawa Hospital - General Campus
501 Smyth Road
Clinical Epidemiology Program, Rm. 1818
Box 228
Ottawa
Ontario
Canada
K1H 8L6

+1 (0)613 737 8880
bcameron@ohri.ca

Additional identifiers

ClinicalTrials.gov (NCT)
NCT00050089

Protocol serial number
JTN-43304; G9901441

Study information

Scientific Title

TNT-1:OPTIMA (Tri-National Trial 1: Options in Management with Anti-retrovirals) - A tri-national (Canada, UK, USA) randomised controlled trial to determine the optimal management of patients with Human Immunodeficiency Virus (HIV) infection for whom first and second-line Highly Active Anti-Retroviral Therapy (HAART) has failed

Acronym

OPTIMA

Study objectives

The OPTIMA trial is a large-scale, multicentre, randomised controlled trial to compare the relative efficacy of two different therapeutic strategies:

1. A drug free period
2. Increasing the number of HIV drugs in treating HIV infection after the most effective drug combinations have failed.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ottawa Hospital Research Ethics Board, 20/11/2001

Study design

Randomised controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

HIV, Acquired Immune Deficiency Syndrome (AIDS)

Interventions

1. Start a standard-ART regimen (up to four HIV drugs)
2. Start a mega-ART regimen (five or more HIV drugs)

3. Interrupt ART for 12 weeks then start a standard-ART regimen (up to four HIV drugs)
4. Interrupt ART for 12 weeks then start a mega-ART regimen (five or more HIV drugs)

Added as of 07/02/2007 for UK part of trial:

You can now join this study in the UK in one of three ways:

Option 1: As in the main OPTIMA study, you will be randomised (similar to tossing a coin or rolling a dice) to both parts of the study. You will have a drug-free period of three months, or no drug-free period and then receive either 'standard ART' or 'mega-ART' treatment.

Option 2: You can choose whether or not to have a drug free period, and then be randomised for how many drugs you will take.

Option 3: You can choose how many drugs you will take, and then be randomised to whether you will have a drug free period or not.

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Anti-retroviral therapy

Primary outcome(s)

The time to new or recurrent AIDS-defining event or death and time to a new non-HIV related serious adverse event are main clinical outcomes.

Key secondary outcome(s)

1. Time to development of a new non-HIV related serious adverse event
2. Quality of life
3. Incidence of grade 3 or 4 clinical or laboratory adverse events
4. Changes in CD4 counts, viral load and resistance
5. Process measures including hematologic profiles, electrolytes, renal function, liver function and pancreatic function

Completion date

01/12/2007

Eligibility

Key inclusion criteria

1. Signed informed consent
2. Age 18 years or more, either sex
3. HIV-1 infection confirmed by Enzyme-Linked Immuno-Sorbent Assay (ELISA) or Western Blot or detectable HIV viral load at any time
4. Failure of at least two different multi-drug regimens, which included drugs of all classes that the patient can tolerate
5. At least 3 months continuous HAART and still on treatment
6. Two most recent results (can include screening) on current Anti-Retroviral Therapy (ART) of either:
 - 6.1. CD4 less than 100 plus plasma Viral Load (pVL) greater than 5000 copies, or
 - 6.2. CD4 100 - 199 plus pVL greater than 10,000 copies

*If VL testing available defined as either: failure to suppress pVL after 24 weeks of therapy, or rebound of at least 0.5 log₁₀ in pVL from the nadir. In the era before pVL available defined as: a decline in the CD4 count over 50% from the peak, or progression of HIV disease.

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. Pregnancy, breast-feeding or planned pregnancy
2. Likelihood of poor protocol follow-up or if Mega-ART is not feasible (due to significant intolerance of many ART drugs)
3. Serious, uncontrolled major opportunistic infection (OI) within 14 days of screening
4. Likelihood of early death due to non HIV-disease
5. Any medical condition or current medication, in the opinion of the treating physician, which would contraindicate anti-HIV treatment as allocated in the trial

Exclusion criteria for UK arm of trial added as of 07/02/2007:

1. Pregnancy, breast-feeding or planned pregnancy
2. Likelihood of poor protocol follow-up or if Mega-ART is not feasible* (due to significant intolerance of many ARV rugs)
3. Serious, uncontrolled major opportunistic infection (OI) within 14 days of screening
4. Likelihood of early death due to non-HIV disease

*Patients exempt from second part of this question if entering option 3

Date of first enrolment

01/01/2002

Date of final enrolment

01/12/2007

Locations**Countries of recruitment**

United Kingdom

Canada

United States of America

Study participating centre
The Ottawa Hospital - General Campus
Ontario
Canada
K1H 8L6

Sponsor information

Organisation
University of British Columbia (Canada)

Organisation
Medical Research Council (MRC) Clinical Trials Unit (UK)

Organisation
University of British Columbia

ROR
<https://ror.org/03rmrcq20>

Funder(s)

Funder type
Research organisation

Funder Name
Canadian Institutes of Health Research (ref: JTN-43304)

Alternative Name(s)
Instituts de Recherche en Santé du Canada, Canadian Institutes of Health Research (CIHR), CIHR_IRSC, Canadian Institutes of Health Research | Ottawa ON, CIHR - Welcome to the Canadian Institutes of Health Research, CIHR, IRSC

Funding Body Type
Government organisation

Funding Body Subtype

National government

Location

Canada

Funder Name

Medical Research Council (UK) (ref: G9901441)

Alternative Name(s)

Medical Research Council (United Kingdom), UK Medical Research Council, MRC

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan**IPD sharing plan summary****Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	quality of life results	15/08/2009		Yes	No
Results article	mutation frequency results	01/06/2010		Yes	No
Results article	results	31/03/2011		Yes	No
Protocol article	protocol	01/08/2003		Yes	No
Basic results				No	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Study website	Study website	11/11/2025	11/11/2025	No	Yes