# Eradication of minimal residual disease (MRD) in chronic lymphocytic leukaemia (CLL) with alemtuzumab: a Phase II study

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered			
06/01/2006		<pre>Protocol</pre>			
Registration date 20/01/2006	Overall study status Completed	Statistical analysis plan			
		[X] Results			
Last Edited	Condition category	Individual participant data			
29/03/2022	Cancer				

## Plain English summary of protocol

http://cancerhelp.cancerresearchuk.org/trials/a-trial-looking-at-alemtuzumab-after-chemotherapy-for-chronic-lymphocytic-leukaemia-cll207-mrd-eradication-study

# Contact information

## Type(s)

Scientific

#### Contact name

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#### Contact details

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# Additional identifiers

Clinical Trials Information System (CTIS)

2006-000053-22

## ClinicalTrials.gov (NCT)

NCT00458523

## Protocol serial number

UKCLL07

# Study information

#### Scientific Title

Eradication of minimal residual disease (MRD) in chronic lymphocytic leukaemia (CLL) with alemtuzumab: a Phase II study

## Acronym

**UKCLL07** 

## **Study objectives**

- 1. Is alemtuzumab effective and safe at treating patients with CLL whose disease is present at a low level following conventional treatments?
- 2. There will also be an investigation where MRD negative patients are monitored and retreated when necessary.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Not provided at time of registration

## Study design

Multi-centre open-label single-arm study

## Primary study design

Interventional

# Study type(s)

Treatment

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

Chronic lymphocytic leukaemia (CLL)

#### **Interventions**

Patients who have previously achieved a minimal residual disease (MRD) negative remission and have relapsed at a molecular level, or who have a low level of MRD following conventional therapy will receive treatment for a minimum of 6 weeks (3 times per week) and a maximum of 12 weeks. Patients who have achieved an MRD negative state by conventional therapy may register for the study but will not be treated with alemtuzumab until CLL becomes detectable again.

## **Intervention Type**

Drug

## Phase

Phase II

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

Alemtuzumab

## Primary outcome(s)

- 1. Rate of achieving MRD negativity in patients with low levels of MRD following conventional therapy or who relapse at an MRD level after a previous MRD negative remission
- 2. Safety of alemtuzumab in the MRD positive setting

## Key secondary outcome(s))

- 1. Clinical response to alemtuzumab therapy by National Cancer Institute (NCI) Criteria
- 2. Overall survival
- 3. Pharmacokinetic profile of alemtuzumab in the MRD setting
- 4. Safety and efficacy of repeated dosing as required to achieve sustained MRD negativity

Outcome of additional Monitoring Investigation (patients who are MRD negative at registration):

- 1. Time to MRD relapse
- 2. Effect of alemtuzumab used in a consolidation/maintenance approach on the expression of CD52 on CLL cells

## Completion date

29/02/2008

# Eligibility

## Key inclusion criteria

- 1. At least 18 years old
- 2. Written informed consent
- 3. Previous confirmation of B-cell CLL with a characteristic immunophenotype on peripheral blood flow cytometry
- 4. Creatinine and bilirubin <2 x upper limit of normal unless secondary to direct infiltration of the liver by CLL or haemolysis
- 5. Must have achieved a complete remission or good partial remission after therapy for CLL
- 6. At least six months since completing last therapy for CLL
- 7. Have detectable MRD, as shown by peripheral blood or bone marrow involvement or have attained an MRD negative remission. The latter group is eligible for registration and three-monthly monitoring for MRD relapse

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Adult

#### Lower age limit

18 years

Sex

## Total final enrolment

47

## Key exclusion criteria

- 1. Lymph nodes of 2 cm or greater in maximum diameter
- 2. Known Human Immunodeficiency Virus (HIV) positive
- 3. Active infection
- 4. Past history of anaphylaxis following exposure to rat or mouse derived Commonly Deleted Region (CDR)-grafted humanised monoclonal antibodies
- 5. Use of prior investigational agents within six weeks
- 6. Pregnancy or lactation
- 7. Central Nervous System (CNS) involvement with CLL
- 8. Mantle cell lymphoma
- 9. Other severe, concurrent diseases or mental disorders
- 10. Active secondary malignancy
- 11. Persisting severe pancytopenia due to previous therapy rather than disease (neutrophils <0.5  $\times$  109/l or platelets <50  $\times$  109/l)
- 12. Patients previously treated with allogeneic Stem Cell Transplantation (SCT)
- 13. Patients who previously failed alemtuzumab therapy

## Date of first enrolment

01/03/2006

## Date of final enrolment

29/02/2008

# Locations

## Countries of recruitment

**United Kingdom** 

England

## Study participating centre Leeds General Infirmary

Leeds United Kingdom LS1 3EX

# Sponsor information

## Organisation

Leeds Teaching Hospitals NHS Trust (UK)

## **ROR**

https://ror.org/00v4dac24

# Funder(s)

## Funder type

Industry

## Funder Name

Schering Health Care Ltd (funding reference no. UKCLL07)

# **Results and Publications**

# 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?
Results article	results	01/02/2017		Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Plain English results		10/07/2017	29/03/2022	No	Yes