

A phase I/II randomised control study of OGT 918 in patients with Niemann-Pick type C disease

Submission date 05/07/2007	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 26/07/2007	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 02/10/2014	Condition category Nervous System Diseases	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

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Additional identifiers

ClinicalTrials.gov (NCT)

NCT00517153

Protocol serial number

OGT 918-007

Study information

Scientific Title

Study objectives

Niemann-Pick type C disease is an inherited neurodegenerative disorder characterised by an intracellular lipid-trafficking defect with secondary accumulation of glycosphingolipids (GSLs).

The purpose of the study was to evaluate the effects of miglustat (OGT 918) as a treatment for Niemann-Pick type C disease in adult, juvenile and paediatric patients over a 24-month treatment period. We hypothesised that patients in the treatment group would show slower rates of decline or stabilisation in one or more markers of the disease compared to the standard care group.

The study was initially supported by Oxford GlycoSciences, the original manufacturer of miglustat (OGT 918). During the study the sponsor changed from Oxford GlycoSciences, a wholly-owned subsidiary of Celltech R&D Ltd, to Actelion Pharmaceuticals Ltd.

Ethics approval required

Old ethics approval format

Ethics approval(s)

1. Centre 1: Salford and Trafford LREC, 24/12/2001, ref: 01266
2. Centre 2: Institutional Review Board of Columbia Presbyterian Medical Centre, 05/04/2002, ref: 14413

Study design

Randomised controlled intervention study conducted at two centres

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Niemann-Pick type C disease

Interventions

Patients in the juvenile/adult group (12 years or older) were randomised in a 2:1 ratio to either miglustat 200 mg three times daily orally (p.o.) for 12 months or standard symptomatic care (no study drug) as a control group.

Both miglustat-treated and standard care groups received other concomitant medications for standard indications throughout the study. All children received miglustat in a dose adjusted according to Body Surface Area (BSA).

Patients were assessed one week after commencing miglustat therapy and monthly thereafter with dose modification as clinically indicated.

Intervention Type

Drug

Phase

Phase I/II

Drug/device/biological/vaccine name(s)

Miglustat (OGT 918)

Primary outcome(s)

Primary efficacy endpoint: change from baseline in Horizontal Saccadic Eye Movement (HSEM)-alpha (a measure of HSEM velocity) at 12 months or last available value

Key secondary outcome(s)

Secondary efficacy endpoints:

1. HSEM-beta
2. Assessments of swallowing (at screening and months 6 and 12; the assessor evaluated the patient's swallowing ability with prespecified substances, using a five-degree category scale from 'no problems of swallowing' to 'could not swallow the substance at all')
3. Auditory acuity (part of neurological examination at screening and months 3, 6, 9 and 12)
4. Ambulatory ability (standard ambulation index; part of neurological examination at screening and months 3, 6, 9 and 12)
5. Cognition (Mini Mental Status Examination [MMSE]; at screening and months 3, 6, 9, 12)

Completion date

30/04/2004

Eligibility**Key inclusion criteria**

1. Juveniles and adults (12 years and over) and paediatric patients aged 4 - 11 years
2. Patients with Niemann-Pick type C disease confirmed by reduced cholesterol esterification and abnormal filipin staining in cultured fibroblasts
3. Capable of cooperating with physical examination and other testing

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Other

Sex

All

Key exclusion criteria

1. Clinically significant diarrhoea (greater than three liquid stools per day for more than 7 days without definable cause) within 3 months before enrolment
2. Significant gastrointestinal disorders or other intercurrent illnesses

Date of first enrolment

01/03/2003

Date of final enrolment

30/04/2004

Locations

Countries of recruitment

United Kingdom

United States of America

Study participating centre**Division of Pediatric Neurology**

New York

United States of America

NY 10032

Sponsor information

Organisation

Actelion Pharmaceuticals Ltd (Switzerland)

ROR

<https://ror.org/001yedb91>

Funder(s)

Funder type

Industry

Funder Name

Actelion Pharmaceuticals Ltd (Switzerland)

Results and Publications

Individual participant data (IPD) sharing plan

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	01/09/2007		Yes	No