

Continuous selumetinib versus continuous or interrupted selumetinib in combination with weekly paclitaxel in metastatic uveal melanoma

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|--------------------------|-----------------------------|--|
| Submission date | Recruitment status | <input checked="" type="checkbox"/> Prospectively registered |
| 17/06/2015 | No longer recruiting | <input checked="" type="checkbox"/> Protocol |
| Registration date | Overall study status | <input type="checkbox"/> Statistical analysis plan |
| 17/06/2015 | Completed | <input checked="" type="checkbox"/> Results |
| Last Edited | Condition category | <input type="checkbox"/> Individual participant data |
| 30/01/2024 | Cancer | |

Plain English summary of protocol

<https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-trial-looking-at-selumetinib-and-paclitaxel-for-a-type-of-eye-cancer-called-uveal-melanoma-selpac>

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

Clinical Trials Information System (CTIS)

2014-004437-22

Protocol serial number

19090

Study information

Scientific Title

A randomised three arm, open label, phase II study of continuous selumetinib versus continuous or interrupted selumetinib in combination with weekly paclitaxel in metastatic uveal melanoma

Acronym

SelPac

Study objectives

This study aims to compare continuous single agent selumetinib to combination paclitaxel and selumetinib in either a continuous or intermittent schedule.

Ethics approval required

Old ethics approval format

Ethics approval(s)

London - City & East Research Ethics Committee, 08/04/2015, ref: 15/LO/0159

Study design

Randomised; Interventional; Design type: Treatment

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Topic: Cancer; Subtopic: Melanoma; Disease: Melanoma

Interventions

1. Paclitaxel, IMP
2. Selumetinib, IMP

Intervention Type

Other

Phase

Phase II

Primary outcome(s)

Progression Free Survival (PFS) time.; Timepoint(s): Progression

Key secondary outcome(s)

1. GNAQ/GNA11 mutation status
2. RECIST Response
3. Safety and toxicity

Completion date

Eligibility

Key inclusion criteria

Histologically or cytologically confirmed metastatic uveal melanoma

1. Patients must have measurable disease, defined by RECIST 1.1
2. Age at least 18 years
3. ECOG performance status 0-2
4. Life expectancy of greater than 3 months
5. Able to swallow and retain orally-administered medication and does not have any clinically significant gastrointestinal abnormalities that may alter absorption such as malabsorption syndrome or major resection of the stomach or bowels
6. All prior treatment-related toxicities must be CTCAE v4 grade = 1 (except alopecia) at the time of randomization
7. Laboratory values as listed below (SI units):
 - 7.1. Total bilirubin = 1.5 X institutional upper limit of normal (ULN)
 - 7.2. Aspartate aminotransferase or alanine aminotransferase >2.5 x ULN (or =5 ULN in presence of liver metastases)
 - 7.3. Haemoglobin =9.0 g/dL
 - 7.4. Platelets >100x10⁹/L (100,000 per mm³)
 - 7.5. Absolute neutrophil count >1.5x10⁹/L (1500 per mm³)
 - 7.6. Creatinine = 1.5 mg/dL OR calculated creatinine clearance (Cockcroft-Gault formula) =50 mL/min OR 24-hour urine creatinine clearance =50 mL/min
8. Female patients of child-bearing potential should have a negative pregnancy test

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. Patients may not have received prior chemotherapy for uveal melanoma. This includes patients who have received isolated hepatic perfusion of chemotherapy. Patients who have received prior immunotherapy or non-chemotherapy locoregional therapy for liver metastases, but who have documented evidence of progression of metastatic disease would however be eligible
2. Patients who have a known or suspected brain metastases or spinal cord compression, unless asymptomatic, has been treated with surgery and / or radiation, and has been stable without requiring corticosteroids nor anti-convulsant medications for at least 4 weeks prior to the first dose of study medication

3. Prior exposure to MEK, Ras, or Raf inhibitors or history of hypersensitivity to any excipient agents.
4. History of another malignancy unless disease-free for 3 years. Patients, who have had a completely resected nonmelanoma skin cancer, are eligible
5. Any permitted previous treatment must have been greater than 21 days prior to study treatment starting and all toxicities from previous treatments should have resolved
6. Symptomatic or untreated leptomeningeal or brain metastases or spinal cord compression. Treated brain metastases must have been stable for at least 1 month
7. Current use of a prohibited medication
8. Cardiac conditions as follows:
 - 8.1. Uncontrolled hypertension (BP =150/95 mmHg despite medical therapy)
 - 8.2. Acute coronary syndrome within 6 months prior to starting treatment
 - 8.3. Baseline Left ventricular ejection fraction (LVEF) below the LLN or <55% measured by echocardiography or institution's LLN for MUGA
 - 8.4. Atrial fibrillation with a ventricular rate >100 bpm on ECG at rest
 - 8.5. Symptomatic heart failure NYHA Class II-IV, prior or current cardiomyopathy, or severe valvular heart disease
 - 8.6. Prior or current cardiomyopathy including but not limited to the following:
 - 8.7. Known hypertrophic cardiomyopathy
 - 8.8. Known arrhythmogenic right ventricular cardiomyopathy
 - 8.9. Previous moderate or severe impairment of left ventricular systolic function (LVEF <45% on echocardiography or equivalent on MuGA) even if full recovery has occurred
 - 8.10. Uncontrolled angina (Canadian Cardiovascular Society grade II-IV despite medical therapy)
 - 8.11. Acute coronary syndrome within 6 months prior to starting treatment
 - 8.12. QTcF >450ms or other factors that increase the risk of QT prolongation
9. Ophthalmological conditions as follows (unless in the eye involved by uveal melanoma):
 - 9.1. Intra-ocular pressure >21 mmHg, or uncontrolled glaucoma (irrespective of intra-ocular pressure)
 - 9.2. Current or past history of retinal pigment epithelial detachment (RPED)/central serous retinopathy(CSR) or retinal vein occlusion
10. Uncontrolled intercurrent illness or uncontrolled systemic disease including, but not limited to, ongoing or active infection – including any patient known to have hepatitis B, hepatitis C or human immunodeficiency virus (HIV), symptomatic congestive heart failure, unstable/uncontrolled angina pectoris, uncontrolled cardiac arrhythmia, QTc prolongation, active bleeding diatheses, renal transplant or psychiatric illness/social situations that would limit compliance with study requirements
11. Female patients who are breast-feeding
12. Male or female patients of reproductive potential who are not employing an effective method of contraception

Date of first enrolment

01/08/2015

Date of final enrolment

28/11/2018

Locations

Countries of recruitment

United Kingdom

England

Germany

Study participating centre

Liverpool Clinical Trials Centre

University of Liverpool

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Sponsor information

Organisation

University of Liverpool

ROR

<https://ror.org/04xs57h96>

Funder(s)

Funder type

Government

Funder Name

AstraZeneca

Alternative Name(s)

AstraZeneca PLC, Pearl Therapeutics, AZ

Funding Body Type

Government organisation

Funding Body Subtype

For-profit companies (industry)

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

The data sharing plans for the current study are unknown and will be made available at a later date

IPD sharing plan summary

Data sharing statement to be made available at a later date

Study outputs

| Output type | Details | Date created | Date added | Peer reviewed? | Patient-facing? |
|---|-------------------------------|--------------|------------|----------------|-----------------|
| Basic results | | 19/09/2021 | 16/06/2022 | No | No |
| HRA research summary | | | 28/06/2023 | No | No |
| Participant information sheet | Participant information sheet | 11/11/2025 | 11/11/2025 | No | Yes |
| Protocol file | version 7 | 13/05/2020 | 30/01/2024 | No | No |