# A randomised phase II trial to compare the toxicity, tolerability and activity of 2-drug combinations of the nucleoside analogue reverse transcriptase inhibitors (NRTIs) lamivudine ((-)2'-deoxy-3'thiacytidine, 3tc), zidovudine (ZDV) and 1592U89

<b>Submission date</b> 03/10/2000	<b>Recruitment status</b> No longer recruiting
<b>Registration date</b> 03/10/2000	<b>Overall study status</b> Completed
Last Edited 07/11/2022	<b>Condition category</b> Infections and Infestations

#### Plain English summary of protocol

Not provided at time of registration

#### Study website

http://www.pentatrials.org/trials.htm#penpact1

## **Contact information**

**Type(s)** Scientific

**Contact name** Prof Diana Gibb

#### **Contact details**

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## Additional identifiers

	Prospectiv	vely	regist	ered
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[] Protocol

- [\_] Statistical analysis plan
- [X] Results
- [] Individual participant data

#### EudraCT/CTIS number

**IRAS number** 

ClinicalTrials.gov number

Secondary identifying numbers G9627716

## Study information

#### Scientific Title

A randomised phase II trial to compare the toxicity, tolerability and activity of 2-drug combinations of the nucleoside analogue reverse transcriptase inhibitors (NRTIs) lamivudine ((-) 2'-deoxy-3'thiacytidine, 3tc), zidovudine (ZDV) and 1592U89

#### Acronym

PENTA 5

#### **Study objectives**

Primary:

1. To compare the toxicity, tolerability and activity of three different 2-drug NRTI combinations in children taking either NFV or NFV placebo in Part A, and in those taking NFV in Part B. Activity will be assessed by effect on viral load measured by plasma HIV-1 RNA

2. To assess the tolerability and toxicity of NFV and NFV placebo in children in Part A

Secondary:

1. To compare the activity of NFV and NFV placebo in children taking one of the three 2-drug combinations in Part A

2. To describe the effect on viral resistance, CD4 cell count and clinical progression separately for the three NRTI groups and the NFV and NFV placebo groups

3. To compare the plasma viral load as measured by HIV-1 RNA in the 1592-containing arms with that in the non-1592 arms in children taking NFV or NFV placebo

#### Ethics approval required

Old ethics approval format

**Ethics approval(s)** Not provided at time of registration

**Study design** Randomised controlled trial

**Primary study design** Interventional

**Secondary study design** Randomised controlled trial

Study setting(s)

Not specified

Study type(s)

Not Specified

#### Participant information sheet

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

Human Immunodeficiency Virus (HIV), Acquired Immunodeficiency Syndrome (AIDS)

#### Interventions

Three different 2-drug nucleoside analogue reverse transcriptase inhibitors (NRTI) combinations in children taking either nelfinavir (NFV) or nelfinavir (NFV) placebo

#### Intervention Type

Other

**Phase** Not Specified

#### Primary outcome measure

1. To compare the combination of two NRTIs plus a protease inhibitor (PI) versus two NRTIs plus a non-nucleoside reverse transcriptase inhibitor (NNRTI) as initial therapy, followed by secondline therapy if virologic failure occurs, in terms of their effects on a long-term virologic endpoint 2. To compare two different viral load criteria for switching from first-line to second-line therapy

#### Secondary outcome measures

1. To evaluate and compare the safety and tolerability of each drug combination (including firstand second-line therapies)

2. To compare the long-term clinical and immunologic outcomes (by the initial randomization)

3. To compare the proportions of children who have undergone one regimen switch or reached study end-point (by the initial randomization)

4. To compare time from randomization to virologic failure (RNA >400 copies/ml at or after week 24) of the first-line therapy analyzed by initial randomization to either protease inhibitor (PI) or NNRTI containing regimens

5. To compare time from randomization to virologic failure of the second line therapy (RNA >30, 000 copies/ml) analyzed by the initial randomization

6. To compare the proportion of children with plasma HIV-1 RNA <400 copies/ml at 4 years (by the initial randomization)

7. To describe resistance patterns at 4 years (by the initial randomization)

#### Overall study start date

23/01/1998

**Completion date** 31/07/1999

## Eligibility

Key inclusion criteria

1. 3 months to 16 years of age 2. Definitive HIV-1 infection

Participant type(s) Patient

Age group Not Specified

**Sex** Not Specified

**Target number of participants** 120

**Key exclusion criteria** Not provided at time of registration

Date of first enrolment 23/01/1998

Date of final enrolment 31/07/1999

### Locations

**Countries of recruitment** England

United Kingdom

**Study participating centre MRC Clinical Trials Unit** London United Kingdom NW1 2DA

## Sponsor information

**Organisation** Medical Research Council (MRC) (UK)

**Sponsor details** 20 Park Crescent London United Kingdom W1B 1AL +44 (0)20 7636 5422 clinical.trial@headoffice.mrc.ac.uk

**Sponsor type** Research council

Website http://www.mrc.ac.uk

## Funder(s)

**Funder type** Research council

Funder Name Medical Research Council (UK)

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**

**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?
<u>Other</u> publications		15/04/2000		Yes	No
<u>Other</u> publications		01/09/2001		Yes	No
<u>Results article</u>		02/03/2002		Yes	No
<u>Results article</u>		01/08/2002		Yes	No
<u>Other</u> publications		27/09/2002		Yes	No
<u>Other</u> publications	Adherence to prescribed antiretroviral therapy	01/01/2003		Yes	No
<u>Other</u> publications	5 year follow up	11/05/2007		Yes	No