

# Adjunctive use of azacitidine in patients with acute myeloid leukaemia (AML) or myelodysplasia (MDS) undergoing a reduced intensity conditioned allogeneic transplant

<b>Submission date</b> 13/02/2008	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 20/03/2008	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 04/04/2022	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

<http://www.cancerhelp.org.uk/trials/a-study-looking-new-chemotherapy-after-transplant-for-acute-myeloid-leukaemia-ricaza>

## Contact information

### Type(s)

Scientific

### Contact name

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## Additional identifiers

EudraCT/CTIS number

IRAS number

**ClinicalTrials.gov number**

**Secondary identifying numbers**

RG 07-187

## Study information

### Scientific Title

Phase II study of the adjunctive use of azacitidine in patients undergoing reduced intensity allogeneic transplantation in acute myeloid leukaemia and myelodysplasia

### Acronym

RICAZA

### Study objectives

Disease relapse is the major cause of treatment failure after allogeneic transplantation using reduced intensity conditioning (RIC) regimens in patients with acute myeloid leukaemia (AML) or myelodysplasia (MDS) and therefore strategies which reduce the risk of disease relapse are required. Although there has been interest in the use of prophylactic donor lymphocyte infusions (DLI) to reduce the risk of relapse, their use is associated with a significant risk of severe graft-versus-host disease (GVHD) when administered early post-transplant. Azacitidine has potent activity against malignant myeloid progenitors and this study aims to examine whether its administration post-transplant can modify the kinetics of disease relapse after a RIC allograft for AML or MDS thereby postponing or eliminating the requirement for DLI.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

West Midlands Research Ethics Committee on 24/04/2008 (ref: 08/H1208/4)

### Study design

Phase II, multicentre, single arm, open-label, non-randomised study

### Primary study design

Interventional

### Secondary study design

Non randomised controlled trial

### Study setting(s)

Hospital

### Study type(s)

Treatment

### Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

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

Acute myeloid leukaemia (AML) or myelodysplasia (MDS)

**Interventions**

All participants will receive azacitidine administered six weeks after undergoing reduced intensity conditioned allogeneic transplantation. Azacitidine will be administered subcutaneously for 5 days for 10 cycles (each cycle being 28 days) at a dose of 36 mg/m<sup>2</sup>.

Total duration of trial treatment: 11 months; follow up period: 24 months.

**Intervention Type**

Drug

**Phase**

Phase II

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

Azacitidine

**Primary outcome measure**

Safety of azacitidine treatment. Adverse events and therapy-related side effects will be monitored continuously during azacitidine treatment and until 28 days after the last dose.

**Secondary outcome measures**

1. Relapse rate, assessed at 12 months post-transplant
2. Survival, assessed annually until 3 years post-transplant

**Overall study start date**

01/06/2008

**Completion date**

31/05/2011

**Eligibility****Key inclusion criteria**

1. Patients (male and female) between the age of 18 - 65 years in whom allogeneic transplantation using a myeloablative conditioning regimen is contra-indicated
2. Patients who fulfill the World Health Organization (WHO) criteria for AML or MDS
3. Patients with a human leukocyte antigen (HLA) identical sibling or suitable matched unrelated donor
4. Must give written informed consent and be able to comply with the protocol for the duration of the study

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Sex**

Both

**Target number of participants**

40 patients

**Total final enrolment**

37

**Key exclusion criteria**

1. Patients with contra-indications to receiving fludarabine or azacitidine
2. Pregnant or lactating women or adults of reproductive potential not willing to use appropriate medically approved contraception during the trial and for 12 months post-azacitidine
3. Any co-morbidity that in the investigators opinion will affect the patients participation in this study

**Date of first enrolment**

01/06/2008

**Date of final enrolment**

31/05/2011

**Locations****Countries of recruitment**

England

United Kingdom

**Study participating centre**

**Centre for Clinical Haematology**

Birmingham

United Kingdom

B15 2TH

**Sponsor information****Organisation**

University of Birmingham (UK)

**Sponsor details**

Research and Commercial Services  
Edgbaston  
Birmingham  
England  
United Kingdom  
B15 2TT

**Sponsor type**

University/education

**Website**

<http://www.rcs.bham.ac.uk>

**ROR**

<https://ror.org/03angcq70>

## **Funder(s)**

**Funder type**

Industry

**Funder Name**

Pharmion (UK)

**Funder Name**

University of Birmingham (UK)

**Alternative Name(s)**

**Funding Body Type**

Private sector organisation

**Funding Body Subtype**

Universities (academic only)

**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?
<a href="#">Results article</a>	results	05/04/2012		Yes	No
<a href="#">Plain English results</a>			04/04/2022	No	Yes