Standard chemotherapy combination (Cyclophosphamide, Hydroxydaunorubicin, Vincristine, Prednisolone [CHOP]) with 1, 3 or 6 cycles of the monoclonal anti-CD20-antibody. Rituximab in first line therapy of follicular non-Hodgkins lymphoma.

Submission date	Recruitment status No longer recruiting	Prospectively registered		
12/09/2005		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
06/01/2006	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
24/07/2014	Cancer			

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N/A

Study information

Scientific Title

Acronym

HD2000

Study objectives

Six infusions of Rituximab, added to 6 cycles of standard chemotherapy (CHOP), are more effective than 1 or 3 infusions of Rituximab in the production of a molecular remission, as determined by t(14;18) real time Polymerase Chain Reaction (PCR) in peripheral blood and bone marrow.

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)

Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Follicular Lymphoma World Health Organisation (WHO) Grade I and II, Stage 3-4

Interventions

6 x CHOP + 1 x Rituximab versus

6 x CHOP + 3 x Rituximab versus

6 x CHOP + 6 x Rituximab

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

CHOP and Rituximab

Primary outcome measure

Molecular remission rate after the end of six cycles of CHOP with various cycles of Rituximab antibodies, determined by t(14;18) real time PCR in peripheral blood and bone marrow.

Secondary outcome measures

- 1. Clinical remission rate
- 2. Duration of molecular and clinical response
- 3. Toxicity

Overall study start date

01/09/2000

Completion date

31/03/2006

Eligibility

Key inclusion criteria

- 1. Patients with histologically proven CD20+ follicular lymphoma (follicular lymphoma grade I, II), stage III and IV
- 2. Age >18 years, no upper limit
- 3. No pre-treatment except irradiation and/or corticosteroids
- 4. Requirement of therapy: one or more of the following: B-symptoms, hematopoietic insufficiency (leukopenia <1.5/nl, anemia hb <10 g/dl, platelets <100/nl)
- 5. Objective tumor progression (>50% increase in sum of tumor diameters in six months); 'bulky disease' (mediastinal/abdominal tumor >7.5 cm and/or other lymphnodes >5 cm)

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

Key exclusion criteria

- 1. Age < 18 years
- 2. Stage I or II
- 3. CD20 negativity
- 4. Karnofsky Index <80% or Eastern Cooperative Oncology Group (ECOG) >2
- 5. Pre-treatment with murine antibodies, severe organ impairment (heart, lung, neck) according to common criteria
- 6. Pre-treatment with any chemotherapy

Date of first enrolment

01/09/2000

Date of final enrolment

31/03/2006

Locations

Countries of recruitment

Germany

Study participating centre Im Neuenheimer Feld 410

Heidelberg Germany 69120

Sponsor information

Organisation

University of Heidelberg (Germany)

Sponsor details

Im Neuenheimer Feld 410 Heidelberg Germany 69120 +49 (0)6221 568001 sekretariat ho@med.uni-heidelberg.de

Sponsor type

University/education

Website

http://www.klinikum.uni-heidelberg.de/index.php?id=725

ROR

https://ror.org/038t36y30

Funder(s)

Funder type

Industry

Funder Name

Sponsored and funded by Roche and University of Heidelberg

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

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	01/10/2012		Yes	No