An open-label, multicenter, randomized Phase II Study to compare the effects of Paclitaxel /Carboplatin and Lonafarnib to those of Paclitaxel/Carboplatin for 1st line Treatment of patients with epithelial ovarian cancer International Federation of Gynecology and Obstetrics (FIGO) Stages IIB-IV

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered		
12/07/2005		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
23/08/2005	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
02/07/2012	Cancer			

# Plain English summary of protocol

Not provided at time of registration

# Study website

http://www.ago-ovar.de

# Contact information

# Type(s)

Scientific

#### Contact name

Mrs Gabriele Elser

### Contact details

Ludwig-Erhard-Str. 100 Wiesbaden Germany 65199

# Additional identifiers

### **EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

**Secondary identifying numbers** AGO-OVAR 15

# Study information

Scientific Title

### **Acronym**

AGO-OVAR 15

### **Study objectives**

Standard chemotherapy for ovarian cancer patients after primary cytoreductive surgery is paclitaxel in combination with carboplatin. Several phase III studies are evaluating the efficacy of a third drug within this standard trial either as a combined or as a consolidation therapy. The final results of these studies have not yet been published. The addition of farnesyltransferase (FT) inhibitors or epidermal growth factor inhibitors to primary chemotherapy are very promising approaches to optimize primary therapy. Lonafarnib is a FT inhibitor that is active against a broad spectrum of tumor cell lines in vitro and tumor xenografts in nude mice. Lonafarnib has single agent antitumor activity as well as enhanced activity in combination with taxanes in a number of tumor cell lines and mice models. Based upon positive results from clinical studies demonstrating enhanced activity when combining taxanes with lonafarnib, combination therapy of paclitaxel and carboplatin with lonafarnib is expected to have greater efficacy than standard therapy or FTI therapy alone in primary ovarian cancer patients.

# 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

Multi-centre

# Study setting(s)

Not specified

Study type(s)

### Treatment

### Participant information sheet

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

Epithelial Ovarian Cancer, First-Line Treatment

#### Interventions

Paclitaxel/Carboplatin +/- Lonafarnib

The previous sponsor for this trial (until November 2009) was: MedServ. GmbH (Germany) Ludwig-Erhard-Str. 100, 65199 Wiesbaden Germany

### Intervention Type

Drug

#### Phase

Phase II

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

Paclitaxel/Carboplatin and Lonafarnib

### Primary outcome measure

Comparison of the effect (progression-free survival [PFS]) of paclitaxel/carboplatin and lonafarnib to that of paclitaxel/carboplatin in patients with previously untreated epithelial cancer of the ovary FIGO stages IIBIV. The primary purpose of this study is to determine whether the additional effect of lonafarnib is sufficient to conduct a phase III study.

### Secondary outcome measures

The secondary objectives are to evaluate response to treatment and overall survival, and to assess the safety in both treatment arms and to assess exposure (PK) and PD of lonafarnib.

# Overall study start date

01/09/2005

# Completion date

30/09/2006

# Eligibility

### Key inclusion criteria

- 1. Previously untreated patients with a histologically confirmed diagnosis of cancer of the ovary or the fallopian tube or extra-ovarian papillary serous tumors
- FIGO stage IIBIV regardless of measurable or non-measurable disease
- 2. Age ≥18 years
- 3. Eastern Cooperative Oncology Group (ECOG) performance status ≤2
- 4. Life-expectancy of at least 6 months

- 5. Adequate bone marrow, renal and hepatic function defined as white blood cell count (WBC) >3.0/nl, Neutrophils (ANC)  $\geq$ 1.5/nl, Platelets  $\geq$ 100/nl, Hemoglobin >6 mmol/l (>10.0 g/dl), Bilirubin  $\leq$ 1 x upper limit of normal range
- 6. Aspartate aminotransferase (AST) and alanine aminotransferase (ALT) < 1.5 x upper limit of normal range
- 7. Alkaline phosphatase <2.5 x upper limit of normal range
- 8. Estimated glomerular filtration rate GFR ≥50 ml/min according to Jelliffe or Cockroft-Gault formula
- 9. Patients who have given their signed and written informed consent to participate in the trial after fully understanding the implication and constraints of the protocol
- 10. Patients must be geographically accessible for treatment and follow-up
- 11. Time between definitive surgery and randomization ≥6 weeks

### Participant type(s)

**Patient** 

### Age group

Adult

### Lower age limit

18 Years

#### Sex

Both

### Target number of participants

100

### Key exclusion criteria

- 1. Ovarian tumors of low malignant potential (borderline tumors
- 2. Non-epithelial ovarian or mixed epithelial/non epithelial tumors (e.g. mixed Mullerian tumors)
- 3. Patients who have received previous chemotherapy or radiotherapy
- 4. Prior treatment with FT inhibitors
- 5. Patients with a prior diagnosis of any malignancy not cured by surgery alone less than 5 years before study entry (except in situ carcinoma of the cervix or adequately treated basal cell carcinoma of the skin)
- 6. Complete bowel obstruction or the presence of symptomatic brain metastases
- 7. Concurrent severe medical problems unrelated to malignancy which would significantly limit full compliance with the study or expose the patient to extreme risk or decreased life expectancy
- 8. Patients with a history of seizure disorder or central nervous system disorders
- 9. Pre-existing motor or sensory neurologic pathology or symptoms >National Cancer Institute Common Toxicity Criteria (NCI-CTC) grade 1
- 10. History of congestive heart failure (New York Heart Association [NYHA] Classification >2), even if medically controlled
- 11. History of clinical and electrocardiographically documented myocardial infarction within the last 6 months
- 12. History of atrial or ventricular arrhythmias (≥LOWN II)
- 13. Patients with significant Fridericia QTc (QTcF) prolongation at Baseline (i.e. QTcF >470 msec)
- 14. Patients with severe active infection
- 15. Patients with a history of severe hypersensitivity reactions to products containing Cremophor EL (cyclosporin or vitamin K) and/or patients with known hypersensitivity to

compounds chemically related to Carboplatin and Paclitaxel

- 16. Fertile women not using adequate contraceptive methods
- 17. Women who are pregnant or breast feeding
- 18. Administration of other anticancer therapy or simultaneous chemotherapeutic and/or hormonal drugs, or radiotherapy during the study treatment period (except: hormonal replacement therapy and/or steroid antiemetics)
- 19. Patients who have used any investigational drugs within 30 days of study entry
- 20. Patients who are participating in any other clinical study
- 21. Dementia or significantly altered mental status that would prohibit the understanding and giving of informed consent

# Date of first enrolment 01/09/2005

Date of final enrolment 30/09/2006

# Locations

### **Countries of recruitment** Germany

Study participating centre Ludwig-Erhard-Str. 100 Wiesbaden Germany 65199

# Sponsor information

### Organisation

AGO Research GmbH (Germany)

### Sponsor details

Kaiser-Friedrich-Ring 71 Wiesbaden Germany 65185

### Sponsor type

Industry

#### Website

http://www.ago-ovar.de

### **ROR**

https://ror.org/01jdhsq12

# Funder(s)

### Funder type

Charity

### Funder Name

AGO Ovarian Cancer Study Group (AGO-OVAR)

# **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	01/08/2012		Yes	No