# An evaluation of therapy for B-cell lymphoma with Bortezomib

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered		
30/03/2011		☐ Protocol		
Registration date 30/03/2011	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	[] Individual participant data		
05/06/2025	Cancer			

### Plain English summary of protocol

https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-trial-bortezomib-with-rchop-for-dlbcl-remodl-b

# **Contact information**

# Type(s)

Scientific

#### Contact name

Mrs Christine May

#### Contact details

University of Southampton Clinical Trials Unit MP131 Southampton General Hospital Tremona Road Southampton United Kingdom SO16 6YD

# Additional identifiers

## Clinical Trials Information System (CTIS)

2010-022422-32

#### ClinicalTrials.gov (NCT)

NCT01324596

#### Protocol serial number

**UKCRN ID: 9800** 

# Study information

#### Scientific Title

A Randomised Evaluation of Molecular guided therapy for Diffuse large B-cell Lymphoma with Bortezomib

#### Acronym

**REMoDLB** 

#### **Study objectives**

This study of treatment for diffuse large Bcell lymphoma aims to determine whether adding bortezomib to standard combination chemotherapy and rituximab (RCHOP) can improve progression free survival. Molecular studies have indicated the heterogenous biology of this disease identifying two subgroups (ABC and GCB) and this knowledge will be applied prospectively to determine whether a subgroup of patients might benefit more from the addition of bortezomib. Patients will be randomised to one of two groups (RBCHOP) on the basis of their molecular subgroup.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

10/H0405/79; First MREC approval date 24/01/2011

## Study design

Randomised trial

## Primary study design

Interventional

# Study type(s)

Treatment

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

Diffuse large B-cell lymphoma

#### Interventions

RB-CHOP, Rituximab, Cyclophsophamide, vincristine, Prednisolone, Doxorubicin, Bortezomib; R-CHOP, Rituximab, Cyclophosphamide, Doxorubicin, Prenisolone, Vincristine; Follow Up Length: 60 month(s); Study Entry: Single Randomisation only

#### Intervention Type

Drug

#### **Phase**

Phase III

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

Bortezomib

#### Primary outcome(s)

Progression-free survival; Timepoint(s): The primary endpoint is progression-free survival.

#### Key secondary outcome(s))

Disease-free survival; Timepoint(s): Disease-free survival will be measured from the time of documentation of disease-free state (CR or C; Event-free survival (time to treatment failure); Timepoint(s): Event-free survival (time to treatment failure) is measured from the day of registration to any trea; Overall survival; Timepoint(s): Overall survival will be measured from the day of registration to the date of death from any cause; Response duration; Timepoint(s): Response duration is defined as the time from documentation of response (ie,CR, CRu or PR) until the; Response Evaluation; Timepoint(s): Response will be assessed in accordance with the International Workshop Standardized Response Criter; Time to progression; Timepoint(s): Time to progression (TTP) is defined as the time from registration until documented lymphoma progres

#### Completion date

12/04/2020

# **Eligibility**

#### Key inclusion criteria

- 1. Histologically confirmed Diffuse large B-cell lymphoma (DLBCL), expressing CD20
- 2. Sufficient diagnostic material should be available to forward to Haematological Malignancy Diagnostic Service (HDMS) for gene expression profiling and central pathology review
- 3. Core biopsies are acceptable, however the molecular profiling success rate is inferior compared to larger surgically acquired tissue samples
- 4. Best diagnostic practice encourages investigators to seek the latter approach whenever clinically appropriate
- 5. Not previously treated for lymphoma and fit enough to receive combination chemoimmunotherapy with curative intent
- 6. Age >18 years
- 7. Stage IAX (bulk defined as lymph node diameter >10cm) to stage IV disease and deemed to require a full course of chemotherapy
- 8. Eastern Cooperative Oncology Group (ECOG) performance status 0-2
- 9. Adequate bone marrow function with platelets >100x109/L; neutrophils >1.0x109/L at study entry, unless lower figures are attributable to lymphoma
- 10. Serum creatinine <150µmol/L, measured or calculated creatinine clearance >30mls/min, serum bilirubin <35µmol/L and transaminases <2.5x upper limit of normal at the time of study entry, unless attributable to lymphoma
- 11. Cardiac function sufficient to tolerate 300mg/m2 of doxorubicin
- 12. A pre-treatment echocardiogram is not mandated, but recommended in patients considered at higher risk of anthracycline cardiotoxicity
- 13. No concurrent uncontrolled medical condition
- 14. Life expectancy > 3 months
- 15. Adequate contraceptive precautions for all patients of child bearing potential
- 16. A negative serum pregnancy test for females of child bearing potential or those <2 years after the onset of the menopause
- 17. Patients will have provided written informed consent
- 18. Target gender: male and female
- 19. Lower age limit 18 years

#### Participant type(s)

Patient

## Healthy volunteers allowed

No

#### Age group

Adult

#### Lower age limit

18 years

#### Sex

All

#### Total final enrolment

1128

#### Key exclusion criteria

- 1. Previous history of treated or untreated indolent lymphoma, however newly diagnosed patients with DLBCL who are found to also have small cell infiltration of the bone marrow or other diagnostic material (discordant lymphoma) will be eligible.
- 2. Uncontrolled systemic infection
- 3. History of cardiac failure of uncontrolled angina
- 4. Clinical CNS involvement
- 5. Serological positivity for Hepatitis C, B or known HIV infection. Viral serological testing is not mandated for study entry, but considered standard of care. Patients who are HepBsAg positive will not be eligible.
- 6. Serious medical or psychiatric illness likely to affect participation or that may compromise the ability to give informed consent
- 7. Active malignancy other than fully excised squamous or basal cell carcinoma of the skin or carcinoma in situ of the uterine cervix in the preceding 5 years
- 8. History of allergic reaction to substances containing boron or mannitol
- 9. Patient unwilling to abstain from green tea and preparations made from green tea as bortezomib may interact with these
- 10. Any co-existing medical or psychological condition that would compromise ability to give informed consent

#### Date of first enrolment

13/04/2011

#### Date of final enrolment

12/04/2020

# Locations

#### Countries of recruitment

United Kingdom

England

Study participating centre
University of Southampton Clinical Trials Unit
Southampton
United Kingdom
SO16 6YD

# Sponsor information

# Organisation

Southampton University Hospitals NHS Trust (UK)

#### **ROR**

https://ror.org/0485axj58

# Funder(s)

# Funder type

Industry

#### **Funder Name**

Janssen-Cilag Ltd

# **Results and Publications**

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	01/05/2019	24/04/2019	Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Study website	Study website	11/11/2025	11/11/2025	No	Yes