

# A Phase III randomised, double-blind, multicentre study to evaluate the safety and efficacy of 1592U89 (abacavir) in human immunodeficiency virus 1-infected patients with aquired immune deficiency syndrome dementia complex

<b>Submission date</b> 21/03/2006	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 19/06/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 27/09/2012	<b>Condition category</b> Infections and Infestations	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Study website

[http://ctr.gsk.co.uk/summary/abacavir/III\\_CNAB3001.pdf](http://ctr.gsk.co.uk/summary/abacavir/III_CNAB3001.pdf)

## Contact information

### Type(s)

Scientific

### Contact name

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# Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

NCT00002163

Secondary identifying numbers

CNAB 3001

## Study information

Scientific Title

### Study objectives

The addition of abacavir to an antiretroviral regimen in patients with acquired immune deficiency syndrome (AIDS) dementia will lead to improved neuropsychological performance

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

This study was reviewed and approved by Riverside Ethics Committee, Chelsea and Westminster Hospital on 05/12/1996, reference number: 1163

### Study design

Randomised, double-blind, placebo-controlled study

### 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

HIV-1 infection with AIDS dementia

### Interventions

Subjects were pre-stratified into group A or B depending on whether their respective existing therapy contained zidovudine (ZDV) or not.

Subjects receiving stavudine (d4T) were stratified into group B. Study participants were randomized within each stratum to receive either 600 mg of abacavir (ABC) or matched placebo every twelve hours in addition to their current antiretroviral therapy for the first 12 weeks of the study.

At the end of the randomized phase or at the time of AIDS dementia complex (ADC) progression, or severe antiretroviral drug toxicity not related to ABC, there was the option of continuing the study further for 40 weeks receiving open label ABC.

## **Intervention Type**

Drug

## **Phase**

Phase III

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

1592U89 (Abacavir)

## **Primary outcome measure**

Improvement in neuropsychological performance.

## **Secondary outcome measures**

Reduction in cerebrospinal fluid HIV viral load.

## **Overall study start date**

03/09/1996

## **Completion date**

08/01/1998

# **Eligibility**

## **Key inclusion criteria**

Confirmed human immunodeficiency virus-1 (HIV-1) seropositive male or female subjects, aged 18 to 65 years, diagnosed with stage 1 or 2 (mild to moderate) AIDS dementia complex and stable on current antiretroviral therapy for a minimum of eight weeks prior to study entry were enrolled. Subjects were impaired by at least 1.5 standard deviations (SDs) below normal in at least two neuropsychological domains from the neuropsychological test battery

## **Participant type(s)**

Patient

## **Age group**

Adult

## **Lower age limit**

18 Years

**Sex**

Both

**Target number of participants**

90

**Key exclusion criteria**

Subjects with evidence of confounding neurological disease or presenting with other central nervous system (CNS) opportunistic infections or neoplasms were excluded

**Date of first enrolment**

03/09/1996

**Date of final enrolment**

08/01/1998

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

Australia

Canada

United Kingdom

United States of America

**Study participating centre****Department of Neurology**

Sydney

Australia

2010

**Sponsor information****Organisation**

GlaxoSmithKline (UK)

**Sponsor details**

Stockley Park West

Uxbridge

Middlesex

United Kingdom

UB11 1BT  
+44 (0)208 9909000  
carolyn.2.goodwin@gsk.com

**Sponsor type**  
Industry

**Website**  
<http://www.gsk.com>

**ROR**  
<https://ror.org/01xsqw823>

## **Funder(s)**

**Funder type**  
Industry

**Funder Name**  
GlaxoSmithKline

**Alternative Name(s)**  
GlaxoSmithKline plc., GSK plc., GSK

**Funding Body Type**  
Government organisation

**Funding Body Subtype**  
For-profit companies (industry)

**Location**  
United Kingdom

**Funder Name**  
NIH grants: NS44807 (McArthur JC) and NS094659 (McArthur JC)

## **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?
<a href="#">Results article</a>	results	13/04/2001		Yes	No