

Comparison of quality of life and satisfaction in primary immunodeficient patients treated with subcutaneous injections of Gammanorm administered using a pump or a syringe for rapid manual administration

Submission date 02/09/2015	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 15/12/2015	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 28/06/2019	Condition category Haematological Disorders	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Primary immunodeficiency disorders (PID) are caused by an inherited defect in the immune system, which makes a person more susceptible to infection. There are more than 200 of these disorders, the symptoms of which can vary greatly, ranging from very mild or non-existent (asymptomatic) to severe and debilitating. Gamma globulins are proteins found in the blood plasma. There are different types of gamma globulins, but the most important are immunoglobulins, also known as antibodies. The immune system uses antibodies to recognize and fight infections. In many of the PID's, people do not have enough of these gamma globulins in their blood, and so are given injections of immunoglobulins to help strengthen their immune systems. When a patient receives this treatment, the injections are often done by the patient themselves at home. The injections can be given using a syringe or an automatic pump (which delivers the dose automatically over a period of time). This study aims to find out whether patients are happier using a syringe or an automatic pump method for receiving their injections.

Who can participate?

Adults with primary immunodeficiency who have received injections of immunoglobulin at use using an automatic pump or syringe for at least one month.

What does the study involve?

Participants are randomly assigned into two groups, each of which receives the treatments in a different order. Each patient is treated for three months with the first treatment option, and then treated for 3 months with the second treatment option (i.e. syringe and then pump, or pump and then syringe). Patients complete a questionnaire about how satisfied they are with each of the treatment options at the end of each three month treatment period.

What are the possible benefits and risks of participating?

Participants will benefit from learning a new technique for administering their immunoglobulin treatment at home, which could be preferable than their current technique. Risks of participating involve the minor risks associated with repeated blood tests, such as pain, bruising or infection.

Where is the study run from?

1. University Medical Center Freiburg (Germany)
2. Klinikum St. Georg (Germany)
3. University Hospital of Wales (UK)
4. Derriford Hospital (UK)
5. The Royal London Hospital (UK)
6. University Hospitals Birmingham (UK)
7. Padova Hospital (Italy)
8. John Radcliffe Hospital, Oxford (UK)
9. Royal Free London Hospital (UK)
10. Campbell Town Hospital (Australia)
11. Canberra Hospital (Australia)
12. Università di Roma "Sapienza", Policlinic Umberto I, Rome (Italy)

When is the study starting and how long is it expected to run for?

November 2014 to December 2017

Who is funding the study?

Octapharma (Austria)

Who is the main contact?

Tatiana Lavrova

tatiana.lavrova@octapharma.com

Contact information

Type(s)

Scientific

Contact name

Dr Tatiana Lavrova

Contact details

Octapharma Pharmazeutika Prod.Ges.m.b.H.

Oberlaaer Strasse 235

A-1100 Vienna

Austria

1100

Additional identifiers

EudraCT/CTIS number

2014-003746-27

IRAS number

ClinicalTrials.gov number
NCT02503293

Secondary identifying numbers

GAN-06

Study information

Scientific Title

A randomised, cross-over study to compare quality of life and satisfaction in primary immunodeficient patients treated with subcutaneous injections of Gammanorm® 165 mg/mL administered with two different delivery devices: injections using pump or rapid push

Acronym

GAN-06

Study objectives

The administration of Gammanorm 165 mg/ml using a syringe is not inferior to the administration of Gammanorm 165 mg/ml using a pump regarding patient satisfaction.

Ethics approval required

Old ethics approval format

Ethics approval(s)

1. Central Ethics Committee, Albert Ludwig University(Germany), 09/02/2015, ref: 561/14(FF-MC)
2. Research Ethics Service, Wales (UK), 12/06/2015, ref: 15/WA/0047
3. Comitato Etico per la Sperimentazione Clinica della Provincia di Padova, 21/04/2016, ref: NRC AOP0707
4. ACT Health, Research Ethics and Governance Office, 21/06/2016, ref: ETH.6.16.113E
5. South Western Sydney Local Health District, 30/05/2016; ref: HREC/16/LPOOL/44
6. Ethics Committee University "Sapienza", 03/03/2017, ref: 4359

Study design

A non-inferiority comparative interventional multi-centre prospective longitudinal randomised open-label cross-over study

Primary study design

Interventional

Secondary study design

Randomised cross over trial

Study setting(s)

Hospital

Study type(s)

Quality of life

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

Primary immunodeficiency

Interventions

Participants are randomly allocated to one of two groups, who receive the two different treatments in a different order (pump then syringe or syringe then pump). Treatment will be administered subcutaneously at home by the patient.

Pump treatment: The usual dose is 0.6 mL (100 mg) of Gammanorm® 165 mg/mL per kg of body weight once a week, which can be administered at several infusion sites.

Syringe treatment: The usual dose is 0.6 mL (100 mg) of Gammanorm® 165 mg/mL per kg of body weight per week. The weekly dose could be divided into three injections administered every other day at a single infusion site.

Participants use the pump treatment and the syringe treatment for a total of three months, with no wash-out period in between.

Intervention Type

Drug

Phase

Phase III/IV

Drug/device/biological/vaccine name(s)

Gammanorm

Primary outcome measure

Patient satisfaction is measured using the life quality index (LQI) questionnaire at the end of each 3 month treatment period.

Secondary outcome measures

1. Therapy-related problems and therapy setting is measured using LQI sub-scores at baseline, 3 months and 6 months
2. Patient satisfaction is measured using the Treatment Satisfaction Questionnaire for Medication (TSQM-11) at baseline, 3 months and 6 months
3. Patient preference is measured by patient answer at 6 months
4. Efficacy (clinical efficacy and residual levels of IgG) of Gammanorm® 165 mg/mL is measured by evaluation of IgE level at baseline, 3 months and 6 months
5. Systemic and local tolerability of Gammanorm® 165 mg/mL is measured by evaluation of the diary and AE Reporting during ongoing study
6. Burden of illness is measured using the PRISM test at at baseline, 3 months and 6 months
7. Burden of subcutaneous immunoglobulin treatment delivery device is measured using the PRISM test at at baseline, 3 months and 6 months
8. Costs measured by analyses of the patient diary at 6 months

Overall study start date

26/11/2014

Completion date

11/12/2017

Eligibility

Key inclusion criteria

1. Adult patients (≥ 18 years).
2. Presenting with primary immunodeficiency.
3. Having received subcutaneous injections of immunoglobulin at home using an automatic pump or syringe for at least 1 month at the time of inclusion.
4. For whom the investigator decides to maintain immunoglobulin replacement therapy with subcutaneous injections of Gammanorm® 165 mg/mL at home.
5. Women of childbearing potential must have a negative result on a pregnancy test (human chorionic gonadotropine [HCG]-based assay) and need to practice contraception using a method of proven reliability for the duration of the study

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

A minimum of 30 patients, but not more than 40 patients will be enrolled in the study.

Total final enrolment

30

Key exclusion criteria

Participating in another interventional clinical study and receiving investigational medicinal product within three months before study entry.

Date of first enrolment

25/06/2015

Date of final enrolment

14/07/2017

Locations

Countries of recruitment

Australia

England

Germany

Italy

United Kingdom

Wales

Study participating centre

University Medical Center Freiburg

Centre of Chronic Immunodeficiency

Breisacher Straße 117

Freiburg

Germany

79106

Study participating centre

Klinikum St. Georg

Delitzscher Street 141

Leipzig

Germany

04129

Study participating centre

University Hospital of Wales

Dept. of Biochemistry & Immunology

Heath Park

Cardiff

United Kingdom

CF14 4XW

Study participating centre

Derriford Hospital

Department of Immunology and Allergy

Eden Unit, level 7

Derriford Road

Plymouth

United Kingdom

PL6 8DH

Study participating centre
The Royal London Hospital
Barts Health NHS Trust
4th Floor Pathology & Pharmacy Building
80 Newark Street
London
United Kingdom
E1 2ES

Study participating centre
University Hospitals Birmingham
Department of Immunology
Mindelsohn Way
Edgbaston
Birmingham
United Kingdom
B15 2GW

Study participating centre
Padova Hospital (Azienda Ospedaliera di Padova)
Dipartimento di Medicina (DIMED)
Via N. Giustiniani, 2
Padova
Italy
35128

Study participating centre
John Radcliff Hospital
Department of Clinical Immunology
Oxford
United Kingdom
OX3 9DU

Study participating centre
Royal Free London Hospital
Department of Immunology
London
United Kingdom
NW3 2QG

Study participating centre
Campell Town Hospital
Unit Immunology and Allergy
Therry Road
Campell Town
Australia
NSW 2560

Study participating centre
Canberra Hospital
Yamba Dr.
Garran
Australia
ACT 2605

Study participating centre
Università di Roma "Sapienza"
Policlinic Umberto I
Viale del Policlinico, 155
Rome
Italy
00161

Sponsor information

Organisation
Octapharma Pharmazeutika Prod.Ges.m.b.H.

Sponsor details
Oberlaaer Strasse 235
Vienna
Austria
1100
+43 1 61032-1796
tatiana.lavrova@Octapharma.com

Sponsor type
Industry

Website
www.octapharma.com

ROR

Funder(s)

Funder type

Industry

Funder Name

Octapharma

Results and Publications

Publication and dissemination plan

A clinical study report complying with relevant guidelines will be written following statistical analyses. This document will be reviewed and approved by the Sponsor and the principal investigator.

Intention to publish date

31/12/2018

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not expected to be made available

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Basic results		08/02/2019	08/02/2019	No	No
HRA research summary			28/06/2023	No	No