Combretastin A-4 phosphate in combination with carboplatin and paclitaxel chemotherapy in patients with advanced cancer

Submission date	Recruitment status	Prospectively registered	
31/03/2010	No longer recruiting	☐ Protocol	
Registration date	Overall study status Completed Condition category Cancer	Statistical analysis plan	
31/03/2010		Results	
Last Edited		Individual participant data	
13/07/2021		[] Record updated in last year	

Plain English summary of protocol

https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-trial-looking-at-combretastatin-and-chemotherapy-for-people-with-advanced-solid-tumours

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

Clinical Trials Information System (CTIS)

2006-005417-35

Protocol serial number

2291

Study information

Scientific Title

A phase Ib/II trial of CA4P (combretastin A-4 phosphate) in combination with carboplatin and paclitaxel chemotherapy in patients with advanced cancer and advanced ovarian carcinoma

Acronym

UKCTC-207

Study objectives

- 1. To assess safety and tolerability of the CA4P-carboplatin-paclitaxel combination in relapsed platinum-resistant ovarian/primary peritoneal cancer
- 2. To gather preliminary data on the anti-tumour efficacy of the CA4P-carboplatin-paclitaxel combination in relapsed platinum-resistant ovarian/primary peritoneal cancer

Ethics approval required

Old ethics approval format

Ethics approval(s)

West Hertfordshire Hospitals NHS Trust Local Research Ethics Committee, 21/05/2003, ref: EC2003-31

Study design

Non-randomised multicentre interventional treatment trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Topic: National Cancer Research Network; Subtopic: Gynaecological Cancer; Disease: Ovary

Interventions

6 cycles (3-weekly) of:

Day 1: combretastatin A-4 phosphate 63 mg/m² intravenously (i.v.)

Day 2: paclitaxel 175 mg/m^2 i.v. then carboplatin AUC 5 i.v.

Follow-up every 2 months until progression or death.

Intervention Type

Other

Phase

Phase II

Primary outcome(s)

- 1. Computed tomography (CT) scans, measured at screening, after cycle 2, after cycle 4 and after cycle 6
- 2. CA-125 tumour marker, measured at screening and before every cycle

Key secondary outcome(s))

- 1. Duration of response
- 2. Progression-free survival
- 3. Toxicity

Clinical examination for signs of progression is assessed at every follow-up.

Completion date

31/12/2008

Eligibility

Key inclusion criteria

- 1. A minimum four-week interval must have passed from the time a patient last received chemotherapy, immunotherapy or radiotherapy prior to the first dose of study drugs (six weeks for therapy known to be associated with delayed toxicity such as nitrosoureas or mitomycin-C)
- 2. For entry into the phase II study: patients with Ovarian, Primary Peritoneal or Fallopian Tube Cancer who have relapsed following treatment with a platinum containing regime in the adjuvant or metastatic setting, with a progression-free interval (FPI) of less than 6 months.
- 3. Radiologically measurable disease and/or evaluable by Ca 125. To be evaluable for response by CA-125 requires 2 pre-treatment samples greater than twice the upper limit of normal.
- 4. Age 18 years or older
- 5. Eastern Cooperative Oncology Group (ECOG) performance status (PS) = 2
- 6. Life expectancy greater than 12 weeks
- 7. Adequate bone marrow function:
- 7.1. Absolute granulocyte count (neutrophils and bands) greater than 1500 cells/mm^3
- 7.2. Platelet count greater than 100,000 cells/mm^3
- 8. Adequate hepatic function:
- 8.1. Total bilirubin less than 1.5 mg/dl
- 8.2. Alanine aminotransferase (ALT) and aspartate aminotransferase (AST) less than 2.5 x upper limit of normal
- 9. Adequate renal function: Glomerular Filtration Rate measured by EDTA clearance greater than 50 ml/min
- 10. Patients must provide written and voluntary informed consent and be available for periodic follow-up
- 11. Fertile patients must abstain from sexual intercourse or use effective birth control
- 12. All women of childbearing potential (WOCBP) must have a negative serum or urine pregnancy test documented within 72 hours prior to receiving cycle 1

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

Female

Key exclusion criteria

- 1. Serious intercurrent infection(s) or other nonmalignant medical illnesses that are uncontrolled or whose control may be jeopardised by the complications of this therapy
- 2. Grade 2 (CTC v 3.0) or greater pre-existing peripheral neuropathy (motor or sensory)
- 3. Active brain metastasis, including symptomatic involvement, evidence of cerebral oedema by CT or MRI, radiographic evidence of progression since definitive therapy, or continued requirement for corticosteroids
- 4. Major surgery within four weeks prior to receiving cycle 1
- 5. Symptomatic peripheral vascular disease or cerebrovascular disease
- 6. Prior radiation involving > 30% of the bone marrow
- 7. Patients who have had any clinically apparent ischaemic or vascular damage from previous radiotherapy. Patients who have had radical radiotherapy to the thorax or abdomen at any time or post-operative radical radiotherapy to the pelvis. Palliative radiotherapy treatments are acceptable. Patients with rectal primaries who have received pre-operative pelvic radiotherapy or chemoradiation are eligible if the small bowel was mobile and not stuck to the tumour.
- 8. Psychiatric disorders or other conditions rendering patients incapable of complying with the requirements of the protocol
- 9. Pregnant or breast-feeding women
- 10. History of angina (stable or more severe, even if controlled with medications), myocardial infarction, CHF, non-controlled atrial arrhythmias or clinically significant arrhythmias including conduction abnormality, nodal junctional arrhythmias and dysrhythmias, sinus bradycardia or tachycardia, supraventricular arrhythmias, atrial fibrillation or flutter, syncope or vasovagal episodes
- 11. MUGA scan revealing significant heart wall abnormality or heart muscle damage
- 12. Uncontrolled hypertension (defined as blood pressure consistently greater than 150/100 irrespective of medication)
- 13. Uncontrolled hypokalemia and/or hypomagnesemia
- 14. ECG with evidence of prior myocardial infarction (e.g., significant Q waves), QTc > 450 msec or other clinically significant abnormalities
- 15. Patients taking any drug(s) known to prolong the QTc interval, which cannot be interrupted for at least four days during each 21-day treatment cycle. Patients with conditions associated with QTc prolongation
- 16. Concurrent investigational therapy
- 17. Concurrent antineoplastic therapy (radiation therapy, cytotoxic or biologic therapy)
- 18. Concurrent hormonal therapy with the exception of GnRH agonists in patients with hormone refractory prostate cancer, HRT, oral contraceptives, and megestrol acetate used for anorexia /cachexia
- 19. Receiving anticoagulation with warfarin, heparin or low molecular weight heparin other than low dose (1 mg) warfarin for maintenance of Hickman line patency
- 20. No previous high-dose chemotherapy with autologous bone marrow transplant (HDC-ABMT) or similar high-dose therapies

Date of first enrolment

15/11/2005

Date of final enrolment

31/12/2008

Locations

Countries of recruitment

United Kingdom

England

Study participating centre
Department of Medical Oncology
Northwood
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Sponsor information

Organisation

East and North Hertfordshire Hospitals NHS Trust (UK)

ROR

https://ror.org/02ryc4y44

Funder(s)

Funder type

Industry

Funder Name

OXIGENE, Inc. (USA)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output typeDetailsDate createdDate addedPeer reviewed?Patient-facing?Participant information sheet11/11/202511/11/2025NoYesPlain English resultsNoYes