A phase III randomised, open label clinical trial evaluating the immunogenicity of a 10-valent pneumococcal conjugate vaccine booster compared to the standard 13-valent pneumococcal conjugate vaccine booster given at 12 months of age to healthy children who have received the 13-valent pneumococcal conjugate vaccine at 2 and 4 months of age

Submission date 29/06/2012	<b>Recruitment status</b> No longer recruiting	Prospectively registered		
Registration date	Overall study status	<ul><li>Protocol</li><li>Statistical analysis plan</li></ul>		
29/06/2012	Completed	[X] Results		
<b>Last Edited</b> 13/03/2018	Condition category Infections and Infestations	[] Individual participant data		

# Plain English summary of protocol

Not provided at time of registration

## Contact information

# Type(s)

Scientific

#### Contact name

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### Contact details

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# Additional identifiers

Clinical Trials Information System (CTIS)

2011-005102-30

ClinicalTrials.gov (NCT)

NCT01443416

Protocol serial number

12221

# Study information

#### Scientific Title

A phase III randomised, open label clinical trial evaluating the immunogenicity of a 10-valent pneumococcal conjugate vaccine booster compared to the standard 13-valent pneumococcal conjugate vaccine booster given at 12 months of age to healthy children who have received the 13-valent pneumococcal conjugate vaccine at 2 and 4 months of age

## **Study objectives**

This is a study to evaluate an alternative booster for pneumococcal conjugate vaccination (PCV) for children at 12 months of age. Currently in the UK, a vaccine called Prevenar 13 (PCV-13), which contains 13 pneumococcal types attached to a molecule (carrier protein) called CRM197, is given to children at 2, 4 and 12 months of age. There is some evidence that a vaccine called Synflorix (PHiD-CV) may be at least as good as the currently used vaccine when given at 12 months of age. Although PHiDCV contains only 10 pneumococcal types, there is evidence that it generates crossreactive antibodies against two of the three additional types included in PCV-13 which might be enough to protect children against these disease types. Furthermore, previous studies have shown that PHiD-CV confers protection against a common otitis media pathogen in children called nontypeable H. influenzae (NTHi) by attachment to a carrier protein called Protein D, which is derived from NTHi. In addition, the use of a carrier protein, which is not closely related to an antigen included in any coadministered or previously administered routine vaccine minimises the risk of interference related to it.

More details can be found at http://public.ukcrn.org.uk/Search/StudyDetail.aspx?StudyID=12221

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

11/SC/0473; First MREC approval date 22/12/2011

## Study design

Randomised; Interventional; Design type: Treatment

## Primary study design

Interventional

# Study type(s)

Treatment

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

Streptococcus pneumoniae vaccination

#### Interventions

Blood sampling: Study nurse/doctor at the participants' home.

Diary cards: Participants will be asked to record any local/general reactions to vaccine for 4 days after vaccination. In addition any medically significant adverse events occuring between the study visits are to be recorded. All concomitant medication used during this period will also be recorded.

Health assessment: Study nurse/doctor at the participants' home.

Routine vaccines: MMR-Hib-MenC

Study vaccine and comparator, Study nurse/doctor at the participants' home

Taking oral temperature, Prior to receive the vaccine, oral temperature will be recorded at the CCVTM clinic rooms

Study Entry: Single Randomisation only

### Intervention Type

Biological/Vaccine

#### Phase

Phase III

### Primary outcome(s)

Not provided at time of registration

### Key secondary outcome(s))

Not provided at time of registration

### Completion date

31/10/2012

# Eligibility

### Key inclusion criteria

- 1. Aged 12 months (2 weeks to +6 weeks) at time of enrolment
- 2. Have received two doses of PCV13 at less than 6 months of age with a gap of at least 6 weeks between the two vaccinations
- 3. Have received all primary vaccines according to the UK routine immunisation schedule
- 4. Available for entire study period and whose parent/legal guardian can be reached by telephone
- 5. Healthy children as determined by medical history and physical examination, done by a study nurse (and/or study doctor if required, depending on the medical history of the participant and

physical assessment), and judgment of the investigator

6. Parent/legal guardian must be able to complete all relevant study procedures during study participation

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Child

## Lower age limit

12 months

## Upper age limit

12 months

#### Sex

All

### Kev exclusion criteria

- 1. Previous receipt of pneumococcal vaccine other than the 13 valent pneumococcal conjugate vaccine (Prevenar 13®, Pfizer)
- 2. Receipt of the routine 12month immunisations (PCV13 (3rd dose), combined Haemophilus influenzae type b and serogroup C meningococcal glycoconjugate vaccine (HibMenC) or measles, mumps and rubella vaccine (MMR)
- 3. A previous anaphylactic reaction to any vaccine or vaccinerelated component
- 4. Contraindication to vaccination with pneumococcal conjugate vaccine
- 5. Bleeding diathesis or condition associated with prolonged bleeding time that would contraindicate intramuscular injection
- 6. Known or suspected immune deficiency or suppression
- 7. History of culture proven invasive disease caused by S. pneumoniae
- 8. Major known congenital malformation or serious chronic disorder
- 9. Significant neurologic disorder or history of seizures including febrile seizure, or significant stable or evolving disorders such as cerebral palsy, encephalopathy, hydrocephalus, or other significant disorder
- 10. Receipt of blood products or gammaglobulin (including hepatitis B immunoglobulin and monoclonal antibodies; e.g., Synagis B)
- 11. Parents who plan to move out of the geographical area where the study would be conducted

## Date of first enrolment

05/04/2012

#### Date of final enrolment

31/10/2012

# Locations

### Countries of recruitment

**United Kingdom** 

England

Study participating centre

Department of Paediatrics, Headley Way , Headington
Oxford
United Kingdom
OX3 9DU

# Sponsor information

## Organisation

University of Oxford (UK)

#### **ROR**

https://ror.org/052gg0110

# Funder(s)

## Funder type

Industry

### **Funder Name**

GlaxoSmithKline

### Alternative Name(s)

GlaxoSmithKline plc., GSK plc., GlaxoSmithKline plc, GSK

## **Funding Body Type**

Government organisation

## **Funding Body Subtype**

For-profit companies (industry)

#### Location

**United Kingdom** 

# **Results and Publications**

# Individual participant data (IPD) sharing plan

# IPD sharing plan summary

# Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/07/2016		Yes	No
HRA research summary			28/06/2023	No	No