

# A double-blind, placebo-controlled, parallel-arms dose response study of two doses of HRM4396 versus placebo for anaemia in subjects treated with chemotherapy

<b>Submission date</b> 12/06/2007	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 19/07/2007	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 15/08/2008	<b>Condition category</b> Haematological Disorders	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

Dr Chris Freitag

### Contact details

Shire contact for trial - no PI was identified  
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Lime Tree Way  
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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

## Study information

### Scientific Title

### Study objectives

Advanced cancer is frequently associated with significant anaemia. The causes of this anaemia are multi-factorial and may include the cytotoxic effects of chemotherapeutic agents on bone marrow.

Primary objective was to determine in anaemic cancer subjects treated with chemotherapy, the efficacy of 150 and 300 U/kg of subcutaneously injected HMR4396 compared to placebo based on haemoglobin and the percent of these subjects requiring red blood cell transfusions.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

This was a multi-national, multi-centre trial with 49 centres in the United States. The independent ethics committee from each of the sites approved the study before subjects were enrolled.

### Study design

Phase III, randomised, multinational, double-blind, placebo-controlled, parallel arm 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

Anaemia

### Interventions

The intervention was administration of HMR4396 at a dose of 150 U/kg or 300 U/kg compared to placebo. All study treatments were given three times weekly subcutaneously for 12 weeks.

Quality of life was evaluated using the Functional Assessment of Cancer Therapy - Anaemia (FACT-An) questionnaire.

**Intervention Type**

Drug

**Phase**

Phase III

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

HMR4396

**Primary outcome measure**

The co-primary efficacy endpoints in this study were the determination of each subjects change in haemoglobin from baseline to week 12 and the occurrence of red blood cell transfusions during week 5 to 12 (yes/no). The primary analysis was based on the Intent-To Treat (ITT) population.

**Secondary outcome measures**

Secondary efficacy endpoints were:

1. Change in FACT-An fatigue subscale from baseline to week 12
2. Number of RBC transfusions received during weeks 5 - 12 (expressed as a rate per 28 days)
3. Number of RBC units transfused during weeks 5 - 12 (expressed as a rate per 28 days)
4. Change in Haematocrit (Hct) at week 12 when compared to baseline
5. Average Hgb during weeks 5 - 12
6. Rate of change of Hgb from baseline to first treatment interruption or to when a blood transfusion (red cell or whole blood) was first received
7. Average Hct during weeks 5 - 12
8. Rate of change of Hct from baseline to first treatment interruption or to when a blood transfusion (red cell or whole blood) was first received
9. Change in the total FACT-An score from baseline to week 12
10. Change in each non-fatigue subscale from baseline to week 12

**Overall study start date**

18/05/2000

**Completion date**

20/06/2002

**Eligibility****Key inclusion criteria**

1. Men or women, 18 years of age or older, with cancer except for acute leukaemias, malignancies of the myeloid cell line and myelodysplasia
2. Receiving cancer chemotherapy with at least two cycles remaining when randomised to study medication
3. Eastern Cooperative Oncology Group (ECOG) performance score of zero, one or two
4. Life expectancy of three months or greater
5. Haemoglobin (Hgb) less than or equal to 10.5 g/dL
6. Women were to be surgically sterile, post-menopausal (greater than one year) or using an effective method of birth control and were to have had a negative serum pregnancy test (quantitative human chorionic gonadotropin radioimmunoassay test) prior to study medication
7. Men had to agree to an effective method of contraception

8. Laboratory values within the following parameters:

8.1. Neutrophils greater than 500 cells/mm<sup>3</sup> (absolute value =  $0.5 \times 1000/\text{mm}^3$  [as per Amendment 1])

8.2. Platelets greater than 75,000 cells/mm<sup>3</sup>

8.3. Creatinine less than 2.0 mg/dL

8.4. Serum calcium less than 12 mg/dL

9. Serum ferritin at least 12 mg/mL and transferrin saturation at least 15% as determined by the prestudy evaluation

10. Stool occult blood (negative)

11. A desire and competence to self-administer the study drug or willing to come to the clinic three days each week for the duration of the study to receive study medication

12. Informed consent was obtained for subjects before enrolment in the study

### **Participant type(s)**

Patient

### **Age group**

Adult

### **Lower age limit**

18 Years

### **Sex**

Both

### **Target number of participants**

575 subjects were screened of which 313 were randomised

### **Key exclusion criteria**

Subjects meeting any of the following criteria were not to be included in the study:

1. History of any primary non-malignant hematologic disease

2. Clinically significant disease/dysfunction of the pulmonary, cardiovascular, endocrine, neurological, gastrointestinal, or genitourinary systems not attributable to underlying malignancy and making implementation of the protocol or interpretation of the study results difficult

3. Uncontrolled hypertension (i.e. diastolic Blood Pressure [BP] greater than 100 mmHg) at the prestudy evaluation

4. Evidence of folate or B12 deficiency defined as below the lower standard value for the central laboratory

5. Androgen therapy within two months of randomisation to study medication

6. Known hypersensitivity to erythropoietin

7. Known hypersensitivity to products derived from mammalian cell-culture systems

8. Experimental drug administered or experimental device used within 30 days prior to randomisation to study medication

9. Radiation therapy completed within four weeks before randomisation to study medication or extensive radiation therapy defined as more than 40% of marrow exposed in the radiation field completed within six weeks before randomisation to study medication

10. A malignancy requiring bone marrow transplant or stem cell transplant in the forthcoming 24 weeks (six months)

11. Bone marrow transplant or stem cell transplant recipients

12. Loss of blood requiring Red Blood Cell (RBC) transfusion within the last 30 days

- 13. Subjects known to be Human Immunodeficiency Virus (HIV) positive
- 14. Blood (500 ml) or equivalent serum donation during the last three months (as per Amendment 1)
- 15. Pregnant
- 16. Breast feeding
- 17. Treatment with other erythropoietins within the last 12 weeks before randomisation to study medication
- 18. Likelihood of requiring treatment during the study period with drugs not permitted by the study protocol
- 19. Clinically relevant cardiovascular disease requiring treatment, including but not limited to:
  - 19.1. Myocardial infarction in the preceding six months
  - 19.2. Cardiac arrhythmia
  - 19.3. Unstable angina
- 20. Current drug abuse
- 21. Impaired hepatic function, defined as prestudy value for Aspartate Transaminase (AST [SGOT]) or Alanine Transaminase (ALT [SGPT]) exceeding twice the upper limit of normal of the central laboratory values
- 22. A mental condition rendering the subject unable to understand the nature, scope and possible consequences of the study
- 23. Subjects unlikely to comply with protocol, e.g. uncooperative attitude, inability to return for follow-up visits, and unlikely to complete the study

**Date of first enrolment**

18/05/2000

**Date of final enrolment**

20/06/2002

## **Locations**

**Countries of recruitment**

England

United Kingdom

United States of America

**Study participating centre**

**Shire contact for trial - no PI was identified**

Basingstoke

United Kingdom

RG24 8EP

## **Sponsor information**

**Organisation**

Hoechst Marion Roussel (Shire Pharmaceuticals) (France)

**Sponsor details**

102 Route de Noisy  
Romainville, Cedex  
France  
93235

**Sponsor type**

Industry

**Website**

<http://www.shire.com/shire/>

**ROR**

<https://ror.org/02n6c9837>

## **Funder(s)**

**Funder type**

Industry

**Funder Name**

Hoechst Marion Roussel (Shire Pharmaceuticals) (France)

## **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