# Dendritic cell-based immunotherapy in mesothelioma

<b>Submission date</b> 08/03/2006	<b>Recruitment status</b> No longer recruiting	<ul> <li>Prospectively registered</li> <li>Protocol</li> </ul>
<b>Registration date</b> 08/03/2006	<b>Overall study status</b> Completed	<ul> <li>[] Statistical analysis plan</li> <li>[X] Results</li> </ul>
Last Edited 11/04/2019	<b>Condition category</b> Cancer	Individual participant data

# Plain English summary of protocol

Not provided at time of registration

# **Contact information**

**Type(s)** Scientific

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# Additional identifiers

EudraCT/CTIS number

## **IRAS number**

ClinicalTrials.gov number NCT00280982

Secondary identifying numbers NTR600; MEC-2005-269

# Study information

## Scientific Title

Acronym

DC-immunotherapy

# **Study objectives**

Based on studies in other types of cancer in humans where beneficial effects were obtained, and based on our pre-clinical data in a mouse model for malignant mesothelioma (MM), it now seems feasible and warranted to introduce dendritic cell (DC)-immunotherapy for human mesothelioma. It can be expected that using the proper procedure in mesothelioma patients, a beneficial effect of immunotherapy can be obtained without major side effects. The objectives of this phase I study are:

1. To define the safety and toxicity of tumor lysate-pulsed DCs injected in patients with mesothelioma

2. To determine if vaccination with tumor lysate-pulsed DCs results in a detectable immune response by skin delayed type hypersensitivity (DTH) reactions on mesothelioma crude antigen and KLH and by in vitro laboratory analysis

3. To observe and document anti-cancer activity by clinical evaluation

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Received from local medical ethics committee

#### **Study design** Non-randomised open label uncontrolled single group assignment phase I efficacy study

**Primary study design** Interventional

**Secondary study design** Other

**Study setting(s)** Hospital

**Study type(s)** Treatment

## Participant information sheet

Health condition(s) or problem(s) studied Malignant mesothelioma

## Interventions

Formulation: autologous monocyte-derived dendritic cells (DCs) pulsed with autologous tumor lysate Dose: >5 x 10^6 DCs Route of administration: 1/3 intravenously and 2/3 intradermally Number of doses: 3 Schedule of doses: every 2 weeks

#### Intervention Type

Other

## Phase

Phase I

## Primary outcome measure

Safety
 Tolerability

## Secondary outcome measures

1. Anti-tumor responses in vitro and in vivo 2. Clinical response evaluation

# Overall study start date

01/01/2006

Completion date

31/12/2008

# Eligibility

# Key inclusion criteria

 Patients with clinically and histologically or cytologically confirmed newly diagnosed mesothelioma, that can be measured in two dimensions by a radiologic imaging study
 Patients must be at least 18 years old and must be able to give written informed consent
 Patients must be ambulatory (Karnofsky scale ≥70, or World Health Organisation-Eastern Cooperative Oncology Group [WHO-ECOG] performance status 0,1, or 2) and in stable medical condition. The expected survival must be at least 4 months.

4. Patients must have normal organ function and adequate bone marrow reserve: absolute neutrophil count >1.5 x 10^9/l, platelet count >100 x 10^9/l, and Hb >6.0 mmol/l

5. Positive DTH skin test (induration >2 mm after 48 hours) against at least one positive control antigen of MULTITEST CMI (Pasteur merieux)

6. Stable disease or response after chemotherapy

7. Availability of sufficient tumor material of the patient

8. Ability to return to the Erasmus MC for adequate follow-up as required by this protocol

Participant type(s) Patient

**Age group** Adult Lower age limit

18 Years

**Sex** Both

Target number of participants

10

# Key exclusion criteria

1. Conditions that make the patient unfit for chemotherapy or progressive disease after 4 cycles of chemotherapy

2. Pleurodesis at the affected side before the pleural fluid is obtained

3. Medical or psychological impediment to probable compliance with the protocol

4. Patients on steroid (or other immunosuppressive agents) are excluded on the basis of potential immune suppression. Patients must have had 6 weeks of discontinuation and must stop any such treatment during the time of the study

5. No prior malignancy is allowed except for adequately treated basal cell or squamous cell skin cancer, superficial or in-situ cancer of the bladder or other cancer for which the patient has been disease-free for five years

6. Serious concomitant disease, active infections. Patients with a history of autoimmune disease or organ allografts, or with active acute or chronic infection, including human immunodeficiency virus (HIV) (as determined by enzyme-linked immunosorbent assay [ELISA] and confirmed by Western Blot) and viral hepatitis (as determined by HBsAg and Hepatitis C serology).

7. Patients with serious intercurrent chronic or acute illness such as pulmonary (asthma or chronic obstructive pulmonary disease [COPD]) or cardiac (New York Heart Association [NYHA] class III or IV) or hepatic disease or other illness considered by the study coordinators to constitute an unwarranted high risk for investigational DC treatment

8. Patients with a known allergy to shell fish (contains keyhole limpet hemocyanin [KLH]) 9. Pregnant or lactating women

10. Patients with inadequate peripheral vein access to perform leukapheresis

11. Concomitant participation in another clinical trial

12. An organic brain syndrome or other significant psychiatric abnormality which would comprise the ability to give informed consent, and preclude participation in the full protocol and follow-up 13. Absence of assurance of compliance with the protocol. Lack of availability for follow-up assessment.

# Date of first enrolment 01/01/2006

Date of final enrolment 31/12/2008

# Locations

**Countries of recruitment** Netherlands

Study participating centre

**Erasmus Medical Center** Rotterdam Netherlands 3015 GE

# Sponsor information

**Organisation** Erasmus Medical Center, Department of Pulmonary Medicine (The Netherlands)

**Sponsor details** Dr Molewaterplein 50 Rotterdam Netherlands 3015 GE

**Sponsor type** Not defined

ROR https://ror.org/018906e22

# Funder(s)

Funder type Charity

**Funder Name** Mesothelioma Applied Research Foundation (MARF) (USA)

## Alternative Name(s)

Meso Foundation, Mesothelioma Applied Research Foundation, Inc., The Mesothelioma Applied Research Foundation, Inc., THE MESO FOUNDATION, The Mesothelioma Applied Research Foundation, MARF

**Funding Body Type** Government organisation

**Funding Body Subtype** Trusts, charities, foundations (both public and private)

**Location** United States of America

# **Funder Name** Asbestos Cancer Foundation (Stichting Asbestkanker) (Netherlands)

# **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?
Results article	results	15/05/2005	14/02/2019	Yes	No
Results article	results	15/06/2010	14/02/2019	Yes	No