# The value of autografting younger patients with high risk chronic lymphocytic leukaemia (CLL). A randomised phase III intergroup trial

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered		
02/05/2001		Protocol		
Registration date	Overall study status	Statistical analysis plan		
02/05/2001	Completed	[X] Results		
Last Edited	Condition category	Individual participant data		
26/10/2022	Cancer			

#### Plain English summary of protocol

https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-trial-looking-at-the-timing-of-transplants-using-a-patients-own-stem-cells-for-chronic-lymphocytic-leukaemia

#### Contact information

#### Type(s)

Scientific

#### Contact name

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#### Additional identifiers

Protocol serial number G0001160

# Study information

#### Scientific Title

The value of autografting younger patients with high risk chronic lymphocytic leukaemia (CLL). A randomised phase III intergroup trial

#### Acronym

MRC CLL5

#### **Study objectives**

This is a prospective randomised phase III trial designed to determine the outcome of autologous SCT compared to no further treatment at present in patients with high risk CLL who have reached a complete remission (CR), a very good partial remission (VGPR) or a nodular partial remission (NPR) after first or second line therapy.

The MRC CLL5 protocol is avaiable on http://www.ebmt.org/5WorkingParties/CLWP/CLL5/MRC\_CLL5\_protocol.pdf

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Not provided at time of registration

#### Study design

Randomised controlled trial

#### Primary study design

Interventional

#### Study type(s)

**Not Specified** 

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

Leukaemia

#### **Interventions**

In this trial, younger patients with chronic lymphocytic leukaemia who are thought to be medically fit for autologous transplantation will be treated to maximal response with standard chemotherapy. Patients will then be randomised to undergo stem cell mobilisation followed by a cyclophosphamide/total body irradiation conditioned autograft. Purging of the stem cell product is optional.

Those patients not randomised to have an autograft will have the option of stem cell storage to be used at a later date.

#### **Intervention Type**

Other

#### **Phase**

Phase III

#### Primary outcome(s)

#### Primary endpoints:

- 1. Progression free survival from randomisation
- 2. Overall survival from randomisation

#### Key secondary outcome(s))

Secondary endpoints:

- 1. Time to disease requiring therapy from time of remission
- 2. Quality of life
- 3. Feasibility of first line versus late stem cell transplant
- 4. Feasibility of peripheral blood mobilisation

#### Completion date

16/01/2008

### **Eligibility**

#### Key inclusion criteria

- 1. B CLL CD5+/CD23+
- 2. There is no upper age limit but patients must be judged physically able to withstand high-dose chemotherapy and the suitability of this treatment may be discussed with the Transplant Centre
- 3. Binet stage (at initiation of first line treatment) B, C, or progressive A
- 4. Complete Remission (CR) or Very Good Partial Remission (VGPR) or Nodular Partial Remission (NPR) assessed by bone marrow biopsy after first or second line treatment
- 5. Written informed consent

#### Participant type(s)

Patient

#### Healthy volunteers allowed

No

#### Age group

Adult

#### Sex

**Not Specified** 

#### Total final enrolment

223

#### Key exclusion criteria

- 1. Age less than 18
- 2. WHO Performance status less than 2
- 3. Any T-cell leukaemia, NHL, Richter syndrome, mantle cell lymphoma, PLL
- 4. HIV seropositivity.
- 5. Inadequate renal or liver function, i.e. creatinine and bilirubin less than 1.5 times the upper limit of normal
- 6. Severe heart failure, requiring diuretics or ejection fraction of less than 50%
- 7. Severe concomitant neurological or psychiatric disease
- 8. Pregnancy/lactation

9. Presence of any psychological, familial, sociological or geographical condition potentially hampering compliance with the study protocol and follow-up schedule; these conditions should be discussed with the patient before registration in the trial.

10. Patients will be excluded if an allograft is planned

# Date of first enrolment 17/01/2002

Date of final enrolment 16/01/2008

#### Locations

#### Countries of recruitment

**United Kingdom** 

England

France

Germany

Switzerland

Study participating centre
Department of Haematology
Birmingham
United Kingdom
B9 5SS

# Sponsor information

#### Organisation

Heart of England NHS Foundation Trust (UK)

# Funder(s)

#### Funder type

Research council

#### **Funder Name**

Medical Research Council (MRC) (UK)

#### Alternative Name(s)

Medical Research Council (United Kingdom), UK Medical Research Council, MRC

#### **Funding Body Type**

Government organisation

#### Funding Body Subtype

National government

#### Location

United Kingdom

## **Results and Publications**

#### Individual participant data (IPD) sharing plan

Not provided at time of registration

#### 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	03/02/2011		Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Plain English results			26/10/2022	No	Yes