

# Targeted therapy in patients with advanced pancreatic cancer

<b>Submission date</b> 11/03/2008	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 30/05/2008	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 30/05/2008	<b>Condition category</b> Cancer	<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**  
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## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
UKF000577

## Study information

**Scientific Title**

A prospective, non-randomised phase II study of trastuzumab and capecitabine in patients with HER2 expressing advanced pancreatic cancer

### **Study objectives**

Pancreatic cancer is the fourth most common cause of cancer related death in Western countries. Advantages in surgical techniques, radiation and chemotherapy had almost no impact on the long term survival of affected patients. Therefore, the need for better treatment strategies is urgent. HER2, a receptor tyrosin kinase of the epidermal growth factor receptor (EGFR) family, involved in signal transduction pathways leading to cell growth and differentiation is overexpressed in a number of cancers, including breast and pancreatic cancer. While in breast cancer HER2 has already been successfully used as a treatment target, there are no studies thus far evaluating the effects of inhibiting HER2 tyrosine kinases in patients with pancreatic cancer.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Ethics approval received from the Ethics Committee of the University of Freiburg, Germany on the 19th April 2004.

### **Study design**

Prospective, open, one-armed multicentric phase II trial

### **Primary study design**

Interventional

### **Secondary study design**

Randomised controlled trial

### **Study setting(s)**

Hospital

### **Study type(s)**

Treatment

### **Participant information sheet**

Not available in web format, please use the contact details below to request a patient information sheet

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

Advanced pancreatic cancer (stage IVb)

### **Interventions**

The trastuzumab loading dose of 4 mg/kg body weight will be given on day one over 90 minutes. For maintenance therapy a weekly dose of 2 mg/kg body weight over 30 minutes will be infused until tumour progression takes place. Patients will be monitored closely for six hours during the first dose of trastuzumab and for two hours after the following rastuzumab infusions to rule out adverse reactions.

Capecitabine will be applied orally twice daily at a dose of 1250 mg/m<sup>2</sup> on day 1 - 14 followed by a break of seven days. The three weeks cycles will be repeated until tumour progression or until a grade three to four toxicity occurs.

Planned duration of treatment 12 weeks or until disease progression. In the case of stable disease treatment is continued until progression. Follow up is performed until death.

### **Intervention Type**

Drug

### **Phase**

Not Specified

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

Trastuzumab, rastuzumab, capecitabine

### **Primary outcome measure**

Progression free survival after 12 weeks.

### **Secondary outcome measures**

1. Progression free survival time
2. Overall survival
3. Time until remission (partial or complete)
4. Duration of remission
5. Rate of 'clinical benefit response' after 12 weeks
6. Quality of life before treatment and after two cycles of chemotherapy

Additional secondary trial endpoints:

7. Toxicity analysis
8. The rate of adverse events
9. The relationship between progression free survival and CA19-9 plasma levels
10. The relation between HER2/neu overexpression and progression free survival

### **Overall study start date**

01/06/2004

### **Completion date**

31/12/2009

## **Eligibility**

### **Key inclusion criteria**

1. Written informed consent
2. Aged 18 years or older, either sex
3. Histological verified pancreatic cancer in stage IVb (T1-4N0M1)
4. Staging and CA19-9 serum level not older than four weeks
5. Histological verified over-expression of HER2/neu (immunological score 3+ or 2+ with verification by fluorescent in situ hybridisation [FISH])
6. At least one measurable lesion (greater than or equal to 2 cm in conventional computed tomography [CT] scan or greater than or equal to 1 cm in spiral CT scans)

7. No prior chemotherapy
8. No prior radiotherapy
9. Performance status 0 - 2 according to World Health Organization [WHO]/Eastern Cooperative Oncology Group [ECOG] or greater than or equal to 60 points on the Karnofsky scale
10. Life expectancy of at least three months
11. Left ventricular ejection fraction greater than 50%
12. Appropriate renal, liver and haematopoietic function defined by:
  - 12.1. Neutrophils greater than or equal to  $1.5 \times 10^9/l$
  - 12.2. Haemoglobin greater than or equal to 80 g/l
  - 12.3. Platelets greater than or equal to  $100 \times 10^9/l$
  - 12.4. Total bilirubin less than 3 x normal
  - 12.5. Creatinine clearance greater than or equal to 30 ml/min (Cockcroft Gault)
  - 12.6. Transaminases either less than 2.5 x normal, or less than 5 x normal in case of liver metastasis
13. Possibility of long-term follow up
14. Negative pregnancy testing

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Sex**

Both

**Target number of participants**

37

**Key exclusion criteria**

1. Possible surgical resection and/or radiotherapy with curative potential
2. Dihydropyrimidine-dehydrogenase deficiency
3. Gastrointestinal obstruction
4. A known secondary neoplasm except a curative treatable basaloma of the skin or carcinoma in situ of the cervix uteri
5. A known hypersensitivity against any of the applied substances
6. Clinically relevant disorder of the cardiovascular system or other organs or a severe systemic disease that compromises the study protocol or the interpretation of the data
7. Clinically manifest pulmonary disorder
8. Prior polyneuropathy
9. A concomitant treatment with the antiviral agents sorivudin or its analogues
10. Pregnancy, breast feeding or absence of appropriate contraceptive measures
11. Psychiatric disorders, drug abuse or other disorders, that compromise the informed consent
12. Concomitant participation in other clinical trials or participation within the last four weeks
13. Any other disorder or treatment that poses a risk to the patient or is incompatible with the aims of this study

**Date of first enrolment**

01/06/2004

**Date of final enrolment**

31/12/2009

## **Locations**

**Countries of recruitment**

Germany

**Study participating centre**

**Municipal Hospital Esslingen**

Esslingen

Germany

73730

## **Sponsor information**

**Organisation**

Roche Pharma AG (Germany)

**Sponsor details**

Emil-Barell-Str. 1

Grenzach-Wyhlen

Germany

79639

**Sponsor type**

Industry

**Website**

<http://www.roche.de>

**ROR**

<https://ror.org/00sh68184>

## **Funder(s)**

**Funder type**

Industry

**Funder Name**

Roche Pharma AG (Germany) - providing chemotherapeutic agents

## **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