# A randomised trial of BEAM plus peripheral blood stem cell transplantion (PBSCT) versus single agent high-dose therapy followed by BEAM plus PBSCT in patients with relapsed Hodgkin's disease

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
11/09/2003		[X] Protocol		
Registration date	Overall study status	Statistical analysis plan		
29/10/2003	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
28/01/2019	Cancer			

# **Plain English summary of protocol**Not provided at time of registration

# Contact information

# Type(s)

Scientific

### Contact name

**Prof Andreas Engert** 

### Contact details

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# Additional identifiers

EudraCT/CTIS number

**IRAS** number

# ClinicalTrials.gov number

NCT00025636

# Secondary identifying numbers

N/A

# Study information

### Scientific Title

A randomised trial of BEAM plus peripheral blood stem cell transplantion (PBSCT) versus single agent high-dose therapy followed by BEAM plus PBSCT in patients with relapsed Hodgkin's disease

# **Acronym**

HD-R2

# Study objectives

To compare efficacy and toxicity of a sequential HDCT and a standard HDCT in patients with histologically confirmed relapsed Hodgkins disease.

# 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

# Secondary study design

Randomised controlled trial

# Study setting(s)

Hospital

# Study type(s)

Treatment

# Participant information sheet

Patient information material can be seen at http://www.lymphome.de/Gruppen/GHSG/Protokolle/HD-R2/PatientInformation.pdf

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

Hodgkin's disease

### **Interventions**

All patients will receive 2 cycles of Dexamethasone, Cytarabine, Cisplatin (DHAP) and Granulocyte Colony-Stimulating Factor (G-CSF). After the first (and/or second) course of DHAP, PBSC will be collected by apheresis. Response evaluation will then be performed and patients with CR/PR/stable disease will proceed as intended via randomisation:

Arm A: Carmustin, etoposide, cytarabine, melphalan (BEAM) and G-CSF followed by PBSCT Arm B: High-dose cyclophosphamide, followed by high-dose methotrexate and vincristine, followed by high-dose etoposide, and BEAM and G-CSF followed by PBSCT

# Intervention Type

Drug

### Phase

Phase III

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

Carmustin, etoposide, cytarabine, melphalan (BEAM), cyclophosphamide (CTX), methotrexate (MTX), vincristin, etoposide

# Primary outcome measure

Freedom From Treatment Failure (FFTF)

# Secondary outcome measures

- 1. Complete Remission (CR), Complete Remission unconfirmed (CRu) rates 3 months after end of protocol
- 2. Relapse-Free Survival (RFS)
- 3. Overall Survival (OS)
- 4. Frequency of severe toxicities (World Health Organization [WHO] grade 3 or 4)
- 5. Secondary neoplasia

# Overall study start date

01/07/2001

### Completion date

01/07/2006

# Eligibility

### Key inclusion criteria

- 1. Histologically confirmed early or late first relapsed Hodgkin's disease or second relapsed Hodgkin's disease without prior high-dose chemotherapy
- 2. Age: 18 60 years
- 3. Eastern Cooperative Oncology Group (ECOG) less than or equal to 2, Karnofsky performance status equalling 70
- 4. Life expectancy greater than 3 months with treatment
- 5. Absolute Neutrophil Count (ANC) greater than 2.5 x  $10^9/l$  and platelets greater than  $100 \times 10^9/l$
- 6. Written informed consent

# Participant type(s)

### **Patient**

# Age group

Adult

# Lower age limit

18 Years

### Sex

Both

# Target number of participants

220

# Key exclusion criteria

- 1. Active infection
- 2. Concurrent other malignancy other than adequately treated basal-cell carcinoma of the skin or cervical intra-epithelial neoplasia
- 3. Significant non-malignant disease:
- 3.1. Human Immunodeficiency Virus (HIV)-infection
- 3.2. Uncontrolled hypertension
- 3.3. Unstable angina
- 3.4. Heart failure (New York Heart Association [NYHA] II)
- 3.5. Chronic Obstructive Pulmonary Disease (COPD)
- 3.6. Poorly controlled diabetes mellitus
- 3.7. Cerebral disorder
- 3.8. Coronary angioplasty or myocardial infarction within the last 6 months
- 3.9. Uncontrolled atrial or ventricular cardiac arrythmias
- 4. Creatinine clearance less than 60 ml/min
- 5. Pregnancy or lactating women, non adequate contraception
- 6. Patients currently receiving investigational drugs
- 7. Inability to give truly informed consent

### Date of first enrolment

01/07/2001

### Date of final enrolment

01/07/2006

# Locations

### Countries of recruitment

Germany

# Study participating centre Department I of Internal Medicine

Cologne Germany 50924

# **Sponsor information**

# Organisation

German Hodgkin's Lymphoma Study Group (Germany)

# Sponsor details

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# Sponsor type

Research organisation

### Website

http://www.lymphome.de/en/Groups/GHSG/

# Funder(s)

# Funder type

Research organisation

### **Funder Name**

European Group for Blood and Bone Marrow Transplantation (EORTC) Lymphoma Group

# **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?
Protocol article	Protocol	01/08/2002		Yes	No
Results article	results	01/12/2010	28/01/2019	Yes	No