

Mepolizumab and exacerbation frequency in refractory eosinophilic asthma: a randomised, double blind, placebo controlled trial

Submission date 04/05/2005	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 10/08/2005	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 10/03/2009	Condition category Respiratory	<input type="checkbox"/> 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

Secondary identifying numbers
125770

Study information

Scientific Title

Study objectives

Mepolizumab which is a monoclonal antibody against interleukin 5, will effectively suppress eosinophilic airway inflammation and lower exacerbation frequency in severe asthmatics with evidence of persistent eosinophilic airway inflammation and a history of recurrent asthma exacerbations (greater than or equal to 2/year).

The hypothesis is based upon previous studies that have demonstrated a temporal relationship between a rise in sputum eosinophilia predicting onset of exacerbations. Steroid therapy targeted at lowering sputum eosinophil counts have been effective in lowering exacerbation frequency. Following on from this, mepolizumab has been shown in pilot studies to be effective in lowering both blood and sputum eosinophil counts and if the previous observations are robust in their hypothesis that sputum eosinophilia is causally related to asthma exacerbations, then we would expect mepolizumab to achieve control of exacerbations through its mechanism of action. The present study has been designed to test this hypothesis.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Obtained before recruitment of the first participant.

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

Health condition(s) or problem(s) studied

Asthma

Interventions

12 month randomised double blind placebo controlled parallel group trial to receive either placebo or monoclonal antibody therapy to interleukin 5 (mepolizumab) - 750 mg intravenously over 30 minutes, monthly.

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Mepolizumab

Primary outcome measure

Sputum eosinophil counts measured every 3 months and exacerbation frequency over the 12 month treatment period. We have 80% power to detect a 50% change in exacerbation frequency over 1 year for a total of 60 trial participants.

Secondary outcome measures

1. Asthma symptoms and quality of life
2. Computed tomography (CT) and bronchial biopsy evidence of airway remodelling (i.e. structural changes to the airway wall from long standing chronic airway inflammation)

Overall study start date

01/08/2005

Completion date

31/07/2007

Eligibility

Key inclusion criteria

1. 60 participants meeting American thoracic criteria for refractory asthma
2. On intensive corticosteroid therapy - either oral and/or inhaled
3. A history of two or more exacerbations of asthma requiring oral corticosteroid rescue therapy in one year
4. Evidence of persistent eosinophilic inflammation in sputum - sputum eosinophils greater than 3% of total cell count

Participant type(s)

Patient

Age group

Adult

Sex

Both

Target number of participants

60

Key exclusion criteria

1. Participants who do not meet American Thoracic Society criteria for severe asthma
2. Participants who have not demonstrated evidence of persistent eosinophilic airway

inflammation (sputum eosinophil counts of greater than or equal to 3% of total cell count
3. Participants who are current smokers or who have a cumulative smoking history of greater than 15 pack years
4. Participants with significant co morbidity - including other symptomatic respiratory diagnoses, evidence of recurrent bacterial respiratory tract infections (greater than or equal to 2 per year), symptomatic ischaemic heart disease and mental health or other conditions that interfere with participant compliance with the study
5. Pregnant females or women of child bearing age not practising effective contraception during the study

Date of first enrolment

01/08/2005

Date of final enrolment

31/07/2007

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Glenfield Hospital

Leicester

United Kingdom

LE3 9QP

Sponsor information

Organisation

University Hospitals of Leicester NHS Trust (UK)

Sponsor details

Glenfield Hospital

Grobby Road

Leicester

England

United Kingdom

LE3 9QP

Sponsor type

University/education

Website

<http://www.uhl-tr.nhs.uk/>

ROR

<https://ror.org/02fha3693>

Funder(s)

Funder type

Government

Funder Name

University Hospitals of Leicester NHS Trust (UK)

Funder Name

Added as of 02/01/2008:

Funder Name

GlaxoSmithKline (UK)

Alternative Name(s)

GlaxoSmithKline plc., GSK plc., GSK

Funding Body Type

Government organisation

Funding Body Subtype

For-profit companies (industry)

Location

United Kingdom

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	05/03/2009		Yes	No