

# Immune response to Shingrix vaccination in patients with chronic lymphocytic leukemia or Waldenstrom macroglobulinemia while undergoing treatment with BTK inhibitors

<b>Submission date</b> 15/11/2023	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 16/11/2023	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 17/11/2023	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

The blood cell cancers chronic lymphocytic leukemia (CLL) and Waldenstrom macroglobulinemia (WM) are known risk factors for zoster reactivation, commonly called shingles. Shingles is a viral infection that causes a painful rash. Although a recently FDA-approved herpes zoster vaccine (Shingrix) is currently being offered to these populations, no study has specifically evaluated the vaccine response in patients while on treatment with single-agent BTK inhibitors, the current standard therapy for this group. The aim of this study is to evaluate the immune response, through a blood test, to the Shingrix vaccine in these patients.

### Who can participate?

Patients with CLL or WM who are at least 50 years old and undergoing first-line treatment with a BTK inhibitor.

### What does the study involve?

Participants will receive two doses of the Shingrix vaccine administered as an injection into the muscle in their upper arm. The second dose of vaccine will be administered about 2 months after the first dose. Blood samples will be collected before the first dose of vaccine, about 4 weeks and 24 months after the second dose of vaccine.

### What are the possible benefits and risks of participating?

Potential benefits are getting an FDA-approved zoster vaccine. Potential risks associated with blood draws include lightheadedness, bruising at the site of the needle stick and infection. Common side effects of the Shingrix vaccine include pain, redness and swelling at the injection site, muscle pain, tiredness, headache, shivering, fever and upset stomach.

### Where is the study run from?

University of Rochester (USA)

When is the study starting and how long is it expected to run for?  
June 2018 to August 2022

Who is funding the study?  
1. University of Rochester (USA)  
2. GlaxoSmithKline Biologicals (Belgium)

Who is the main contact?  
Dr Michael Brady, Michael\_Brady@urmc.rochester.edu

## Contact information

**Type(s)**  
Public, Scientific

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**Type(s)**  
Principal Investigator

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## Additional identifiers

**EudraCT/CTIS number**  
Nil known

**IRAS number**

**ClinicalTrials.gov number**

NCT03771157

## Secondary identifying numbers

RSRB00003228

# Study information

## Scientific Title

Serologic response to a new recombinant, adjuvanted herpes zoster vaccine in patients with chronic lymphocytic leukemia and Waldenstrom macroglobulinemia treated with first-line BTK inhibitors

## Study objectives

Patients with chronic lymphocytic leukemia (CLL) or Waldenstrom macroglobulinemia (WM) undergoing first-line treatment with BTK inhibitors will elicit short-term and long-term immune response to the Shingrix varicella zoster vaccine.

## Ethics approval required

Ethics approval required

## Ethics approval(s)

Approved 03/01/2019, Research Subjects Review Board (601 Elmwood Ave, Rochester, 14642, United States of America; +1 (0)585 273 4576; michelle\_giglio@urmc.rochester.edu), ref: RSRB00003228

## Study design

Single-center interventional one-arm pilot study

## Primary study design

Interventional

## Secondary study design

Non randomised study

## Study setting(s)

University/medical school/dental school

## Study type(s)

Other

## Participant information sheet

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

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

Chronic lymphocytic leukemia or Waldenstrom macroglobulinemia

## Interventions

Participants will receive two doses of the Shingrix vaccine administered as an injection into the muscle in their upper arm. The second dose of vaccine will be administered about 2 months after

the first dose. Blood samples will be collected before the first dose of vaccine, about 4 weeks and 24 months after the second dose of vaccine.

**Intervention Type**

Biological/Vaccine

**Pharmaceutical study type(s)**

Immunological Response

**Phase**

Phase I

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

Recombinant Varicella Zoster Glycoprotein E (Shingrix)

**Primary outcome measure**

Vaccine response at 4 weeks post-vaccination, as determined by serum antibody levels to the varicella virus glycoprotein E subunit (anti-gE) measured using ELISA

**Secondary outcome measures**

Vaccine response at 24 months post-vaccination, as determined by serum antibody levels to the varicella virus glycoprotein E subunit (anti-gE) measured using ELISA

**Overall study start date**

20/06/2018

**Completion date**

03/08/2022

**Eligibility****Key inclusion criteria**

1. Patients diagnosed with chronic lymphocytic leukemia (CLL) OR Waldenström macroglobulinemia (WM)
2. 50 years of age or older
3. Receiving first-line treatment with BTK inhibitor for at least 3 months; prior treatment with single-agent rituximab is permitted if the last dose was administered more than 1 year ago
4. Have at least a 1-year life expectancy
5. Have a history of varicella (chickenpox) OR lived in the US or any endemic country for >30 years

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

50 Years

**Sex**

Both

**Target number of participants**

33

**Total final enrolment**

32

**Key exclusion criteria**

1. Known hypersensitivity to a vaccine component
2. Herpes zoster reactivation within the past year
3. Received or were scheduled to receive a live virus vaccine in the period from 4 weeks prior to Dose 1 through 28 days post-second dose
4. Received or were scheduled to receive an inactivated vaccine in the period ranging from 7 days prior to Dose 1 through 7 days post-second dose
5. Are unable to give informed consent;
6. An absolute lymphocyte count greater than  $20,000 \times 10^9/L$
7. Receiving treatment for CLL or WM with an additional agent other than a BTK inhibitor
8. Rituximab treatment less than one year prior to study start
9. Prior chemotherapy

**Date of first enrolment**

01/02/2019

**Date of final enrolment**

18/06/2019

## **Locations**

**Countries of recruitment**

United States of America

**Study participating centre**

**University of Rochester Medical Center, Wilmot Cancer Institute**

601 Elmwood Ave

Rochester

United States of America

14642

## **Sponsor information**

**Organisation**

University of Rochester

**Sponsor details**

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**Sponsor type**

University/education

**Website**

<https://www.rochester.edu>

**ROR**

<https://ror.org/022kthw22>

**Funder(s)**

**Funder type**

University/education

**Funder Name**

University of Rochester

**Alternative Name(s)**

U of R, U of Rochester, Universitas Rocestriensis, UR

**Funding Body Type**

Private sector organisation

**Funding Body Subtype**

Universities (academic only)

**Location**

United States of America

**Funder Name**

GlaxoSmithKline Biologicals

**Alternative Name(s)**

GSK Belgium, GlaxoSmithKline Biologicals SA, GlaxoSmithKline Biologicals SAS, GlaxoSmithKline (GSK) Biologicals, GSK Biologicals, GSK

**Funding Body Type**

Private sector organisation

### Funding Body Subtype

For-profit companies (industry)

### Location

Belgium

## Results and Publications

### Publication and dissemination plan

Study results were published in 2023.

### Intention to publish date

### Individual participant data (IPD) sharing plan

Data generated from this study will be available upon reasonable request from Dr Michael Brady (michael\_brady@urmc.rochester.edu).

Summary-level participant demographic data will be shared upon request, individual participant demographic data will not be shared due to the limited number of participants. Raw ELISA data collected from samples at baseline, 4 weeks and 24 months post-vaccination with associated disease type will be shared. Data are available now. All participants were consented prior to study activities. All data is anonymous, patient identifiable information will not be shared.

### IPD sharing plan summary

Available on request

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>		23/07/2023	16/11/2023	Yes	No
<a href="#">Basic results</a>			17/11/2023	No	No