

Carfilzomib in combination with doxorubicin and dexamethasone (CAD) therapy in transplant eligible relapsed myeloma patients

Submission date 02/12/2010	Recruitment status Stopped	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 12/05/2011	Overall study status Stopped	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 26/11/2012	Condition category 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

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers
HM10 9644

Study information

Scientific Title

An open label, multicentre, phase I/II dose escalation trial of carfilzomib in combination with doxorubicin and dexamethasone (CAD) therapy in transplant eligible relapsed myeloma patients

Acronym

MUK 02

Study objectives

During the dose finding phase, the primary objective of this trial is to determine the maximum tolerated dose (MTD) of carfilzomib in combination with doxorubicin and dexamethasone (CAD). In the dose expansion phase the primary objective will be to estimate the response rate to four cycles of CAD therapy at MTD identified in the dose finding stage in transplant eligible relapsed myeloma patients.

Within the extension phase there are also the following secondary objectives:

1. Assess the safety and toxicity of CAD therapy
2. Assess the feasibility to mobilise stem cells following CAD therapy
3. Estimate maximum response to therapy
4. Estimate time to maximum response to therapy
5. Estimate progression free survival following CAD therapy
6. Assess the feasibility of delivering CD maintenance

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Open label multicentre phase I/II dose escalation trial

Primary study design

Interventional

Secondary study design

Non 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

Multiple myeloma

Interventions

Dose escalation:

Dose level 1

Carfilzomib 20mg/m² on days 1 and 2 of cycle 1 only, 27mg/m² on days 8-9 and 15-16 of cycle 1 and all subsequent doses. Adriamycin® (doxorubicin) 9.0 mg/m² days 1, 2, 15 and 16.
dexamethasone 40mg days 1, 2, 8, 9, 15 and 16

Dose level 2

Carfilzomib 20mg/m² on days 1 and 2 of cycle 1 only, 36mg/m² on days 8-9 and 15-16 of cycle 1 and all subsequent doses. Adriamycin® (doxorubicin) 9.0 mg/m² days 1, 2, 15 and 16.
dexamethasone 40mg days 1, 2, 8, 9, 15 and 16

Dose level 3

Carfilzomib 20mg/m² on days 1 and 2 of cycle 1 only, 45mg/m² on days 8-9 and 15-16 of cycle 1 and all subsequent doses. Adriamycin® (doxorubicin) 9.0 mg/m² days 1, 2, 15 and 16.
dexamethasone 40mg days 1, 2, 8, 9, 15 and 16

Patients will receive four cycles of CAD and will be given the option of a further four cycles of consolidation therapy. Patients will then receive carfilzomib and dexamethasone maintenance therapy until disease progression and will be followed up every 2 months.

26/11/2012: Please note that this trial was never started.

Intervention Type

Drug

Phase

Phase I/II

Drug/device/biological/vaccine name(s)

Carfilzomib, doxorubicin, dexamethasone

Primary outcome measure

The primary endpoints for the dose escalation phase is dose limiting toxicities within the first cycle of treatment (28 days). In the dose expansion phase, the primary endpoint will be the proportion of patients achieving at least a partial response after four cycles of CAD.

Secondary outcome measures

1. The proportion of patients for whom stem cell cell mobilisation is possible following CAD therapy
2. Safety and toxicity
3. Maximum response rate within four cycles of CAD
4. Maximum response rate within four cycles of CAD, consolidation therapy and maintenance therapy (i.e. maximum response to therapy)
5. Time to maximum response to therapy (i.e. within four cycles of CAD, consolidation therapy and maintenance therapy)
6. Progression-free survival
7. Feasibility of CD-maintenance therapy

Overall study start date

01/04/2011

Completion date

01/04/2016

Reason abandoned (if study stopped)

Lack of funding/sponsorship

Eligibility

Key inclusion criteria

1. Able to give informed consent and willing to follow study protocol
2. Aged over 18 years, either sex
3. Patients with relapsed myeloma requiring therapy
4. Transplant eligible
5. Adequate renal function (creatinine clearance greater than or equal to 30 ml/min) within 14 days prior to study entry
6. Adequate liver function (alanine aminotransferase [ALT]/aspartate aminotransferase [AST] less than 3 x upper limit of normal [ULN]) within 14 days prior to study entry
7. Adequate bone marrow reserve (haemoglobin [Hb] greater than 8.0 g/dL, absolute neutrophil count [ANC] greater than $1.0 \times 10^9/L$, platelets [Plts] greater than $75 \times 10^9/L$) within 14 days prior to study entry
8. Female subjects of child-bearing potential must have a negative pregnancy test within 24 hours prior to starting therapy and agree to use dual methods of contraception for the duration of the study. Male subjects must agree to use a barrier method of contraception for the duration of the study if sexually active with a female of child-bearing potential.

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

48

Key exclusion criteria

1. Unable to tolerate an aggressive fluid hydration regimen (e.g. due to pre-existing pulmonary, cardiac or renal impairment)
2. Received an investigational medicinal product at any dose within 28 days of study entry (registration)
3. Concurrent or previous malignancies (less than 12 months post end of treatment) at other sites, with the exception of appropriately treated localised epithelial skin or cervical cancer.

- Patients with histories (greater than or equal to 12 months) of other tumours may be entered.
4. Seropositive for human immunodeficiency [HIV], or active hepatitis A, B or C infection
 5. Any history of hypersensitivity to any of the study medications or excipients
 6. Patients with active uncontrolled infections
 7. Patients with peripheral neuropathy Common Toxicity Criteria (CTC) grade 3 or higher within 14 days prior to study entry
 8. Poorly controlled or serious medical or psychiatric illness that, in the Investigator's opinion, is likely to interfere with participation and/or compliance in this clinical study
 9. Pregnant or breast feeding

Date of first enrolment

01/04/2011

Date of final enrolment

01/04/2016

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Haemato-Oncology Unit

Sutton

United Kingdom

SM2 5PT

Sponsor information

Organisation

University of Leeds (UK)

Sponsor details

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England

United Kingdom

LS2 9JT

Sponsor type

University/education

Website

<http://www.leeds.ac.uk/>

ROR

<https://ror.org/024mrxd33>

Funder(s)

Funder type

Charity

Funder Name

Myeloma UK (UK)

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