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High dose simvastatin combined with standard chemotherapy in patients with refractory Multiple Myeloma: a phase II study

Submission date 27/06/2007	**Recruitment status** No longer recruiting	[_] Prospectively registered [X] Protocol [_] Statistical analysis plan [X] Results [_] Individual participant data
Registration date 27/06/2007	**Overall study status** Completed	
Last Edited 27/10/2021	**Condition category** Cancer	

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Clinical Trials Information System (CTIS)
Nil known

ClinicalTrials.gov (NCT)
Nil known

Protocol serial number

04/239, NL962 (NTR988)

Study information

Scientific Title
High dose simvastatin combined with standard chemotherapy in patients with refractory Multiple Myeloma: a phase II study

Study objectives
Simvastatin (an Hydroxymethylglutaryl-coenzyme A [HMG-CoA] reductase inhibitor) induces apoptosis in vitro and sensitises the myeloma cell to chemotherapy. This is the first clinical trial to test if in vivo there is the same sensitisation in relapse or refractory multiple myeloma.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Received from the METC Medisch Ethische Toetsingscommissie on the 3rd May 2005 (ref: 04 /239-E).

Study design
Prospective phase II feasibility study

Primary study design
Interventional

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Multiple myeloma

Interventions
Treatment of relapsed/refractory multiple myeloma patients with high dose statins, combined with chemotherapy. We treat multiple myeloma patients with 15 mg/kg simvastatin Day 0 - 7 followed by VAD day 7 - 11 (vincristin, adriamycin, dexamethasone) chemotherapy in a scheme as used in HOVON trials (e.g., HOVON 65; ISRCTN64455289). On day 29 a new cycle is started. Patients are treated with three cycles. An additional cycle can be given in case of response (MR, PR ,CR).

In case of progressive disease during treatment, the therapy is ended.

Intervention Type
Drug

Phase
Phase II

Drug/device/biological/vaccine name(s)
Simvastatin, chemotherapy (vincristin, adriamycin, dexamethasone)

Primary outcome(s)
The primary endpoint is response as defined by the European Group for Blood and Marrow Transplantation (EBMT) criteria. This group of extensively pre-treated patients are multi-resistant and we defined - based in literature - a response of 10 - 30% as reasonable.

The primary endpoint (response) is measured during and after the trial by measurement of the M-protein measured in serum (an excellent tumour marker in multiple myeloma). After every cycle of 29 days M-protein will be measured. The M-protein will then be measured monthly until disease progression.

Key secondary outcome(s))
We recently performed a phase I study to define the Maximum Tolerated Dose (MTD) and Dose-Limiting Toxicity (DLT) (published in Haematologica 2006; 91:542-545) of high dose simvastatin, combined with VAD. The secondary outcome of this trial is to confirm the feasibility as shown in the previous phase I trial.

Completion date
14/09/2006

Eligibility

Key inclusion criteria
1. Multiple myeloma patients
2. At least two cycles of chemotherapy with adriamycin and dexamethasone
3. Aged less than 75 years

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Adult

Sex
Not Specified

Total final enrolment
12

Key exclusion criteria
1. Inadequate hepatic and renal function

Date of first enrolment
03/05/2005

Date of final enrolment
14/09/2006

Locations

Countries of recruitment
Netherlands

Study participating centre
University Medical Centre Utrecht
Utrecht
Netherlands
3508 AB

Sponsor information

Organisation
University Medical Centre Utrecht (UMCU) (The Netherlands)

ROR
https://ror.org/04pp8hn57

Funder(s)

Funder type
Research organisation

Funder Name
Dutch Cancer Society (The Netherlands)

Funder Name
International Myeloma Foundation (USA)

Alternative Name(s)
Myeloma, Intl. Myeloma Foundation, IMF

Funding Body Type
Government organisation

Funding Body Subtype
Trusts, charities, foundations (both public and private)

Location

United States of America

Results and Publications

Individual participant data (IPD) sharing plan
Not provided at time of registration

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		01/12/2007	27/10/2021	Yes	No
Protocol article	Protocol	01/12/2006		Yes	No