

A phase II, randomised, open-label, three-arm study comparing low-and high-dose Campath® (MabCampath®) and high-dose Rebif® in patients with early, active relapsing-remitting Multiple Sclerosis (MS)

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		<input type="checkbox"/> Protocol
Registration date 27/05/2003	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 22/03/2016	Condition category Musculoskeletal Diseases	<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

ClinicalTrials.gov (NCT)
NCT00050778

Protocol serial number

CAMMS 223-A1

Study information

Scientific Title

A phase II, randomised, open-label, three-arm study comparing low-and high-dose Campath® (MabCampath®) and high-dose Rebif® in patients with early, active relapsing-remitting Multiple Sclerosis (MS)

Study objectives

To compare low-and high-dose Campath® and high-dose Rebif® in patients with early, active relapsing-remitting Multiple Sclerosis (MS) who have not been previously treated with immunotherapies other than steroids.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised open-label three-arm study

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Relapsing-remitting multiple sclerosis

Interventions

Patients will be randomised to receive lower- or higher-dose Campath® or Rebif® as controlled by the Interactive Voice Response System (IVRS) for all study sites. Randomisation will be accomplished by utilising the minimisation (adaptive randomisation) method described by Pocock and Simon, using a randomisation probability parameter of 0.80.

Patients will be allocated to treatment arm according to a set of pre-defined variables that will ensure a balanced population among the three treatment arms. The process of minimisation is superior to conventional randomisation in that optimal balance can be achieved over a larger number of variables than can otherwise occur through conventional stratified randomisation. The system will be tested and validated according to standard life cycle development process guidelines.

This randomisation methodology will ensure balance among treatment arms with respect to the following baseline factors:

1. Study centre
2. Sex

3. Age:

3.1. Less than 30

3.2. Greater than 30

4. Baseline EDSS score:

4.1. Less than 2.0

4.2. Greater than or equal to 2

Intervention Type

Drug

Phase

Phase II

Drug/device/biological/vaccine name(s)

Campath®, Rebif®

Primary outcome(s)

1. Time to sustained accumulation of disability (SAD)

2. Relapse rate

Key secondary outcome(s)

1. Proportion of patients who are relapse free at 3 years after initial treatment

2. MRI T1 to determine rate of cerebral atrophy (decrease in cerebral volume) as seen on MRI brain scan as measured by the Losseff technique at 3 years after initial treatment

3. Change in MRI T2 lesion volume at 3 years after initial treatment

Completion date

01/12/2009

Eligibility

Key inclusion criteria

1. Signed, written informed consent

2. Male or non-pregnant, non-lactating female patients, 18 to 50 years of age (inclusive)

3. Diagnosis of MS per McDonald's update of the Poser criteria, including cranial Magnetic Resonance Imaging (MRI) consistent with those criteria

4. Onset of first symptoms within 3 years prior to screening

5. Expanded Disability Status Scale (EDSS) score 0.0 - 3.0 (inclusive) at the screening and baseline visits

6. At least two clinical episodes of MS in the 2 years prior to study entry (i.e., the initial event if within 2 years of study entry plus greater than or equal to one relapse, or greater than or equal to two relapses if the initial event was between 2 and 3 years prior to study entry)

7. In addition to the clinical criteria (3 to 6 above), greater than or equal to one enhancing lesion on any one of the up to four screening gadolinium-enhanced MRI brain scans during a maximum 3-month run-in period (inclusive of the Month 0 baseline scan)

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. Previous immunotherapy for MS other than steroids, including treatment with interferons, intravenous immunoglobulin, glatiramer acetate, and mitoxantrone
2. Personal history of thyroid autoimmune disease
3. Personal history of clinically significant autoimmune disease (e.g., inflammatory bowel disease, diabetes, lupus, severe asthma)
4. History of thyroid carcinoma (previous thyroid adenoma is acceptable and is not to be considered an exclusion criterion)
5. History of malignancy (except for basal cell skin carcinoma in which situation the patient is eligible only if disease-free for more or equal to 5 years)
6. Any disability acquired from trauma or another illness that, in the opinion of the investigator, could interfere with evaluation of disability due to MS
7. Previous treatment with Campath®
8. History of anaphylaxis following exposure to humanized monoclonal antibodies
9. Inability to undergo MRI with gadolinium administration
10. Female patients with childbearing potential with a positive serum pregnancy test at screening or baseline. (NB: Serum pregnancy testing will be performed on each occasion)
11. Male and female patients who do not agree to use effective contraceptive method(s) during the study
12. Impaired renal function (i.e., serum creatinine larger or equal to 2 times the institutional Upper Limit of Normal [ULN])
13. Untreated Major Depressive Disorder (MDD)
14. Epileptic seizures that are not adequately controlled by treatment
15. Suicidal ideation
16. Major systemic disease or other illness that would, in the opinion of the investigator, compromise patient safety or interfere with the interpretation of study results
17. Abnormal CD4 count or significantly abnormal thyroid function; presence of anti-Thyroid Stimulating Hormone (TSH) receptor antibodies; known seropositivity for Human Immunodeficiency Virus (HIV)
18. Intolerance of pulsed corticosteroids, especially a history of steroid psychosis
19. Presence of a monoclonal paraprotein
20. Patients who, in the opinion of the investigator, have any form of MS other than relapsing-remitting
21. Patients currently participating in a clinical trial of an experimental or unapproved /unlicensed therapy

Date of first enrolment

01/12/2002

Date of final enrolment

01/12/2009

Locations

Countries of recruitment

United Kingdom

England

Croatia

Poland

Russian Federation

United States of America

Study participating centre

Addenbrookes Hospital

Cambridge

United Kingdom

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Sponsor information

Organisation

ILEX Oncology, Inc. (USA)

ROR

<https://ror.org/027vj4x92>

Funder(s)

Funder type

Industry

Funder Name

ILEX Oncology Inc. (USA) - funding study at all participating centres

Results and Publications

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	23/10/2008		Yes	No
Results article	results	01/04/2011		Yes	No
Results article	results	08/12/2011		Yes	No
Results article	results	01/01/2014		Yes	No
Basic results				No	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes