

# Single arm NCRI feasibility study of Cyclophosphamide, Hydroxydaunorubicin, Oncovin, Prednisone (CHOP) in combination with Ofatumumab in induction and maintenance for patients with newly diagnosed Richters syndrome

<b>Submission date</b> 30/03/2011	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
<b>Registration date</b> 30/03/2011	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 26/10/2022	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

<https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-study-ofatumumab-with-chop-for-richters-syndrome-chop-or>

## Study website

<http://www.octo-oxford.org.uk/alltrials/trials/CHOP-OR.html>

## Contact information

### Type(s)

Scientific

### Contact name

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### Contact details

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## Additional identifiers

**EudraCT/CTIS number**  
2009-016459-23

**IRAS number**

**ClinicalTrials.gov number**  
NCT01171378

**Secondary identifying numbers**  
9476

## Study information

### Scientific Title

Single arm NCRI feasibility study of Cyclophosphamide, Hydroxydaunorubicin, Oncovin, Prednisone (CHOP) in combination with Ofatumumab in induction and maintenance for patients with newly diagnosed Richters syndrome

### Acronym

CHOP-OR

### Study objectives

The primary objective of the study will be to evaluate overall response rate (ORR) to CHOP-O (CHOP chemotherapy plus Ofatumumab) according to the Revised Response Criteria for Malignant Lymphoma (Cheson).

Secondary objectives will be feasibility of recruitment, progression free survival and overall survival, the clinical benefit and changes in patient reported outcome measures, safety and tolerability.

This is a multi-centre non-randomised Phase II NCRI feasibility study in 35 patients with newly diagnosed RS in the UK. CHOP-O will be given for six cycles followed by six cycles of Ofatumumab maintenance treatment every eight weeks and a three months follow-up period. The total duration of recruitment will be 24 months starting from the opening of the first site. Richters Syndrome (RS) is a high-grade transformation that occurs in 5-15% of patients with B cell chronic lymphocytic leukaemia (B-CLL). RS is a complication of B-CLL in which the leukemia changes into a fast-growing diffuse large B cell lymphoma. The pathogenesis of RS is poorly understood and predictors of transformation and response to treatment are unknown. Management of RS remains unsatisfactory; the mean overall survival of patients treated with conventional chemo-immunotherapy such as CHOP-R is 8 months from the end of treatment. CHOP is the acronym for a chemotherapy regimen, cyclophosphamide, hydroxydaunorubicin (doxorubicin), Oncovin (vincristine), and prednisone/prednisolone) and the R stands for the monoclonal antibody, Rituximab. Ofatumumab, a next generation monoclonal anti CD20 antibody, has proven single agent activity in relapsed/refractory B-CLL and other non-Hodgkin lymphomas. In addition, it has shown a favourable safety profile in the maintenance setting. Therefore, the aim of this study is to evaluate Ofatumumab in combination with CHOP in induction and maintenance treatment of patients with RS.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

10/H0604/85; First MREC approval date 05/11/2010

**Study design**

Non-randomised; Interventional; Design type: Treatment

**Primary study design**

Interventional

**Secondary study design**

Non randomised study

**Study setting(s)**

Hospital

**Study type(s)**

Treatment

**Participant information sheet**

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

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

Topic: National Cancer Research Network; Subtopic: Haematological Oncology, Lymphoma;  
Disease: Leukaemia (chronic), Lymphoma (non-Hodgkin's)

**Interventions**

CHOP-O (CHOP with Ofatumumab), Subjects will be given CHOP in combination with ofatumumab (CHOP-O).

CHOP-O is CHOP (cyclophosphamide, hydroxydaunorubicin (doxorubicin), Oncovin (vincristine), and prednisone/prednisolone) in combination with the monoclonal antibody, ofatumumab.

The first 4 infusions of CHOP will be weekly. CHOP-O will be given every 3 weeks for six cycles during induction. Subjects will then receive ofatumumab maintenance treatment once every eight weeks for 6 cycles.; Follow Up Length: 3 month(s); Study Entry : Registration only

**Intervention Type**

Drug

**Phase**

Phase II

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

Cyclophosphamide, Hydroxydaunorubicin, Oncovin, Prednisone, Ofatumumab

**Primary outcome measure**

Objective response; Timepoint(s): Objective response as defined by the revised response criteria for malignant lymphoma

## **Secondary outcome measures**

1. To assess feasibility of recruitment
2. To further assess the efficacy of CHOP in combination with ofatumumab in induction and maintenance treatment of Richters Syndrome
3. To assess the safety and tolerability of CHOP in combination with ofatumumab in induction and maintenance treatment of Richters Syndrome

## **Overall study start date**

30/04/2011

## **Completion date**

31/05/2014

# **Eligibility**

## **Key inclusion criteria**

Current inclusion criteria as of 14/03/2014:

1. Signed written informed consent prior to performing any study-specific procedures
2. Patients with B-CLL and newly diagnosed not previously treated and biopsy proven Richters transformation - Diffuse large B-cell lymphoma (DLBCL)
3. Computerised tomography (CT) scan performed within 8 weeks prior to starting treatment
4. Eastern Cooperative Oncology Group (ECOG) performance status of 0, 1, 2 or 3
5. Age 18 years and over
6. Target gender: male and female
7. Lower age limit 18 years

Previous inclusion criteria:

1. Signed written informed consent prior to performing any study-specific procedures
2. Patients with B-CLL and newly diagnosed not previously treated and biopsy proven Richters transformation - Diffuse large B-cell lymphoma (DLBCL)
3. Computerised tomography (CT) scan performed within 6 weeks prior to starting treatment
4. Eastern Cooperative Oncology Group (ECOG) performance status of 0, 1, 2 or 3
5. Age 18 years and over
6. Target gender: male and female
7. Lower age limit 18 years

## **Participant type(s)**

Patient

## **Age group**

Adult

## **Lower age limit**

18 Years

## **Sex**

Both

## **Target number of participants**

Planned Sample Size: 35; UK Sample Size: 35

## Total final enrolment

37

### Key exclusion criteria

Current exclusion criteria as of 14/03/2014:

1. CHOP or CHOP-like antracycline-containing treatment for DLBCL within 6 months prior to registration
2. Known CNS involvement
1. Treatment for Diffuse large B-cell lymphoma (DLBCL) within 6 months prior to registration
2. Known CNS involvement of B-cell chronic lymphocytic leukemia (B-CLL)
3. Any other malignancy that requires active treatment with the exception of basal cell carcinoma and non-invasive squamous cell carcinoma
4. Chronic or ongoing active infectious disease requiring systemic treatment such as, but not limited to:
  - 4.1. Chronic renal infection
  - 4.2. Chronic chest infection with bronchiectasis
  - 4.3. Tuberculosis
  - 4.4. Active hepatitis
5. Subjects meeting any of the following criteria must not be enrolled in the study:
  - 5.1. Positive serology for Hepatitis B (HB) defined as a positive test for HBsAg. (In addition, if negative for HBsAg but HBcAb positive (regardless of HBsAb status), a HB DNA test will be performed and if positive the subject will be excluded). Consent will be sought prior to any test being performed.
  - 5.2. Clinically significant cardiac disease including:
    - 5.2.1. Unstable angina
    - 5.2.2. Uncontrolled congestive heart failure
    - 5.2.3. Arrhythmia requiring therapy, with the exception of extra systoles or minor conduction abnormalities
  - 5.3. Significant concurrent, uncontrolled medical condition including, but not limited to:
    - 5.3.1. Renal
    - 5.3.2. Hepatic
    - 5.3.3. Haematological
    - 5.3.4. Gastrointestinal
    - 5.3.5. Endocrine
    - 5.3.6. Pulmonary
    - 5.3.7. Neurological
    - 5.3.8. Cerebral or psychiatric disease
  - 5.4. History of significant cerebrovascular disease in last 6 months
  - 5.5. Known HIV positive
6. Known or suspected hypersensitivity to components of investigational product
7. Patients who have received treatment with any non-marketed drug substance or experimental therapy within 4 weeks prior to Visit 2 (start of treatment, cycle 1 day 1)
8. Current participation in any other interventional clinical study
9. Patients known or suspected of not being able to comply with a study protocol (e.g. due to alcoholism, drug dependency or psychological disorder)
10. Breast feeding women or women with a positive pregnancy test at screening.
11. Women of childbearing potential not willing to use adequate contraception during study and for 12 months after last dose of ofatumumab. Adequate contraception is defined as abstinence, hormonal birth control or intrauterine devices

Previous exclusion criteria:

1. Treatment for DLBCL within 6 months prior to registration
2. Known CNS involvement
1. Treatment for Diffuse large B-cell lymphoma (DLBCL) within 6 months prior to registration
2. Known CNS involvement of B-cell chronic lymphocytic leukemia (B-CLL)
3. Any other malignancy that requires active treatment with the exception of basal cell carcinoma and non-invasive squamous cell carcinoma
4. Chronic or ongoing active infectious disease requiring systemic treatment such as, but not limited to:
  - 4.1. Chronic renal infection
  - 4.2. Chronic chest infection with bronchiectasis
  - 4.3. Tuberculosis
  - 4.4. Active hepatitis
5. Subjects meeting any of the following criteria must not be enrolled in the study:
  - 5.1. Positive serology for Hepatitis B (HB) defined as a positive test for HBsAg. (In addition, if negative for HBsAg but HBcAb positive (regardless of HBsAb status), a HB DNA test will be performed and if positive the subject will be excluded). Consent will be sought prior to any test being performed.
  - 5.2. Clinically significant cardiac disease including:
    - 5.2.1. Unstable angina
    - 5.2.2. Congestive heart failure
    - 5.2.3. Arrhythmia requiring therapy, with the exception of extra systoles or minor conduction abnormalities
  - 5.3. Significant concurrent, uncontrolled medical condition including, but not limited to:
    - 5.3.1. Renal
    - 5.3.2. Hepatic
    - 5.3.3. Haematological
    - 5.3.4. Gastrointestinal
    - 5.3.5. Endocrine
    - 5.3.6. Pulmonary
    - 5.3.7. Neurological
    - 5.3.8. Cerebral or psychiatric disease
  - 5.4. History of significant cerebrovascular disease in last 6 months
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**Date of first enrolment**

30/04/2011

**Date of final enrolment**

31/05/2014

# Locations

## Countries of recruitment

England

United Kingdom

## Study participating centre

University of Oxford

Oxford

United Kingdom

OX3 7DQ

# Sponsor information

## Organisation

University of Oxford

## Sponsor details

Clinical Trial & Research Governance Team

Joint Research Office

Block 60

Churchill Hospital

Old Road

Oxford

England

United Kingdom

OX3 7LE

## Sponsor type

University/education

## ROR

<https://ror.org/052gg0110>

# Funder(s)

## Funder type

Industry

## 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**

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?
<a href="#">Basic results</a>				No	No
<a href="#">Protocol article</a>	protocol	13/02/2015		Yes	No
<a href="#">Results article</a>	results	01/10/2016	25/04/2019	Yes	No
<a href="#">Plain English results</a>			26/10/2022	No	Yes
<a href="#">HRA research summary</a>			28/06/2023	No	No