Rituximab adjunctive therapy for Burkitt's lymphoma

Submission date	Recruitment status	[X] Prospectively registered		
25/05/2016	No longer recruiting	Protocol		
Registration date 17/06/2016	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	[] Individual participant data		
15/11/2024	Cancer			

Plain English summary of protocol

Background and study aims

Burkitt's lymphoma is an uncommon form of non-Hodgkin lymphoma. It is a cancer that affects a type of white blood cells called lymphocytes. The aim of this study is to find out whether the addition of a single dose of the drug rituximab to standard anti-lymphoma treatment will improve outcomes in Burkitt's lymphoma, relapsed and resistant.

Who can participate?

Children aged under 14 with Burkitt's lymphoma

What does the study involve?

All patients receive the standard treatment for Burkitt's lymphoma and are randomly allocated into three groups. Group One receives one additional dose of 375mg/m2 of rituximab on Day 15. Group Two receives one additional dose of 50mg/m2 of rituximab on Day 15. Group Three receives no additional rituximab. The three groups are compared for the number of children in clinical complete remission at the end of chemotherapy and 1 year later.

What are the possible benefits and risks of participating? Not provided at time of registration

Where is the study run from? Queen Elizabeth Central Hospital (Malawi)

When is the study starting and how long is it expected to run for? June 2016 to March 2024

Who is funding the study?

- 1. Alumni of University of Birmingham (UK)
- 2. The Scott Hampton Foundation for Burkitt's Research (UK)

Who is the main contact? Prof. Mark Drayson m.t.drayson@bham.ac.uk

Contact information

Type(s)

Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

National Health Sciences Research NHSRC #15/5ll28l

Study information

Scientific Title

An open-label, randomised, phase 2 study of rituximab as adjunctive therapy in the treatment of Burkitt's lymphoma at QECH, Blantyre, Malawi

Acronym

RIBULY

Study objectives

Addition of rituximab to standard anti-lymphoma therapy will improve outcome in newly diagnosed, relapsed and resistant Burkitt's Lymphoma.

Ethics approval required

Old ethics approval format

Ethics approval(s)

National Health Sciences Research Committee, Ministry Of Health, Lilongwe 3, Malawi, 12/06 /2015, ref: NHSRC #15/5ll28l

Study design

Open-label randomised phase II study

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

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

Health condition(s) or problem(s) studied

Burkitt's lymphoma

Interventions

This study tests whether the addition of a single dose of rituximab to standard anti-lymphoma therapy will improve outcome in newly diagnosed, relapsed and resistant eBL. All patients will receive the standard therapy for Burkitt's lymphoma and will be randomised into 3 groups:

Group One will receive 1 additional dose of 375mg/m2 of rituximab on Day 15 Group Two will receive 1 additional dose of 50mg/m2 of rituximab on Day 15 Group Three will receive no additional rituximab

The study will compare between these three groups for the number of children in Clinical Complete Remission at the end of chemotherapy and a year later.

Intervention Type

Drug

Phase

Phase II

Drug/device/biological/vaccine name(s)

Not provided at time of registration

Primary outcome measure

Clinical Complete Remission rate at end of chemotherapy

Secondary outcome measures

- 1. Clinical Complete Remission rate at one year post chemotherapy
- 2. Severe adverse effects of rituximab

Overall study start date

20/06/2016

Completion date

01/03/2024

Eligibility

Key inclusion criteria

- 1. Child <14 yrs of age with proven Burkitt's lymphoma (BL) or relapse or resistant BL
- 2. After full information, the guardians have given written informed consent, and the child if appropriate will be asked for assent
- 3. The guardian and patient will be willing and able to complete treatment and follow-up

Participant type(s)

Patient

Age group

Child

Upper age limit

14 Years

Sex

Both

Target number of participants

A total of 180 cases are expected to be enrolled in 3 yrs

Total final enrolment

293

Key exclusion criteria

- 1. Patients known to be allergic to trial medications
- 2. Patients or their guardians who do not consent
- 3. Pregnant and/or breastfeeding patients

Date of first enrolment

20/06/2016

Date of final enrolment

01/03/2023

Locations

Countries of recruitment

Malawi

Study participating centre Queen Elizabeth Central Hospital

Paediatric Department Blantyre Malawi PO Box 95

Sponsor information

Organisation

University of Malawi College of Medicine

Sponsor details

Private Bag 360 Chichiri Blantyre Malawi Box 3 +265 (0)1 871 911 registrar@medcol.mw

Sponsor type

University/education

Website

http://www.medcol.mw/contact-us/

ROR

https://ror.org/04vtx5s55

Funder(s)

Funder type

University/education

Funder Name

Alumni of University of Birmingham, UK

Funder Name

The Scott Hampton Foundation for Burkitt's Research

Results and Publications

Publication and dissemination plan

Intention to publish date

30/06/2025

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from the TMG. Summary data including baseline characteristics and outcome data will be available after the primary publication for up to 5 years from the end of the study. Data will be shared with any researchers for whom the scope and purpose of the data sharing are agreed by the TMG, all participants have agreed to use of data for research, no identifiable data will be released and patients will have a unique trial number assigned. The researchers encourage data sharing and all reasonable requests will be reviewed favourably.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Abstract results		20/10/2024	15/11/2024	No	No