# A randomised phase III study on the effect of the chimeric anti-CD20 monoclonal antibody (MabThera®) during sequential chemotherapy followed by autologous stem cell transplantation in patients with relapsed or progressive B-cell non-Hodgkins lymphoma

Submission date	Recruitment status	<ul><li>Prospectively registered</li></ul>		
20/12/2005	No longer recruiting	☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
20/12/2005	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
28/01/2019	Cancer			

# Plain English summary of protocol

Not provided at time of registration

# **Contact information**

# Type(s)

Scientific

#### Contact name

Prof E. Vellenga

#### Contact details

University Medical Center Groningen Department of Hematology P.O. Box 30001 Groningen Netherlands 9700 RB +31 (0)50 361 2354 e.vellenga@int.umcg.nl

# Additional identifiers

ClinicalTrials.gov (NCT)

### Protocol serial number

NTR188; Ho44

# Study information

### Scientific Title

Rituximab improves the treatment results of DHAP-VIM-DHAP and ASCT in relapsed/progressive aggressive CD20+ NHL: a prospective randomized HOVON trial.

### Acronym

**HOVON 44 NHL** 

### Study objectives

Evaluation of the effect of MabThera® with respect to response to reinduction treatment before autologous stem cell transplantation and overall survival and event free survival after autologous stem cell transplantation.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Received from the local medical ethics committee

### Study design

Multicentre randomised active controlled parallel group trial

### Primary study design

Interventional

### Study type(s)

Treatment

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

Non-Hodgkin's lymphoma (NHL)

#### **Interventions**

Patients will be randomised to:

Arm A:

Cvcle I: DHAP

Cycle II: VIM, in case of partial remission (PR) or complete remission (CR)

Cycle III: DHAP or VIM, BEAM + autologous SCT

Arm B:

Cycle I: DHAP + rituximab

Cycle II: VIM + rituximab, in case of PR or CR

Cycle III: DHAP or VIM + rituximab, BEAM + autologous SCT

### Intervention Type

Drug

#### **Phase**

Not Applicable

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

MabThera®, rituximab; dexamethasone, cytarabine, cisplatin (DHAP); carmustine, etoposide, cytarabine, melphalan (BEAM); etoposide, ifosfamide, mitoxantrone, prednisone (VIM)

### Primary outcome(s)

Overall survival measured from the date of registration. Patients still alive or lost to follow up are censored at the last day they were known to be alive.

### Key secondary outcome(s))

- 1. Response to DHAP-VIM with or without rituximab (MabThera®)
- 2. Event-free survival (i.e. time from registration to the date of stable disease after both the first and second reinduction cycle, documented progression, relapse or death, whichever comes first)

### Completion date

01/01/2007

# Eligibility

### Key inclusion criteria

- 1. Malignant lymphoma based upon a representative histology specimen according to the REAL classification at relapse or progression:
- 1.1. Follicular center lymphoma, follicular (grade III)
- 1.2. Diffuse large B-cell lymphoma
- 1.3. Primary mediastinal B-cell lymphoma
- 2. CD20 positive
- 3. First progression or relapse during/after adriamycin containing regimen. 'Progressive' includes patients who have progressive disease (PD, without prior response) and patients who have progression after first PR
- 4. Aged 18 65 years inclusive
- 5. World Health Organization (WHO) performance status 0 1
- 6. Witnessed written informed consent according to the center requirements

### Participant type(s)

Patient

### Healthy volunteers allowed

No

### Age group

Adult

### Lower age limit

18 years

#### Sex

Αll

### Key exclusion criteria

- 1. Patients with history of intolerance of exogenous protein administration
- 2. Patients with severe cardiac dysfunction (New York Heart Association [NYHA] classification II IV)
- 3. Patients with severe pulmonary dysfunction (vital capacity or diffusion capacity less than 70% of predicted value) unless clearly related to non-Hodgkins Lymphoma (NHL) involvement
- 4. Patients with hepatic dysfunction, bilirubin or transaminase greater than or equal to 25 x upper normal limit
- 5. Patients with renal dysfunction (serum creatinine greater than or equal to 180 mmol/l or clearance less than or equal to 40 ml/min)
- 6. Prior treatment with immunotherapy or radiation therapy within the last month before entering the study
- 7. Patients with active uncontrolled infections
- 8. Patients known to be human immunodeficiency virus (HIV)-positive
- 9. Patients with NHL localisation in the central nervous system
- 10. Patients with (EBV) post-transplant lymphoproliferative disorder

### Date of first enrolment

20/11/2000

#### Date of final enrolment

01/01/2007

# Locations

### Countries of recruitment

Netherlands

Study participating centre
University Medical Center Groningen
Groningen
Netherlands
9700 RB

# Sponsor information

#### Organisation

Dutch Haemato-Oncology Association (Stichting Hemato-Oncologie Volwassenen Nederland) (HOVON) (Netherlands)

#### **ROR**

https://ror.org/056kpdx27

# Funder(s)

### Funder type

Research organisation

### **Funder Name**

Koningin Wilhelmina Fonds (KWF) (Netherlands)

### **Funder Name**

Dutch Haemato-Oncology Association (Stichting Hemato-Oncologie Volwassenen Nederland) (HOVON) (Netherlands)

# **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	15/01/2008	28/01/2019	Yes	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes