

# A double blind, placebo controlled study to evaluate the safety and immunogenicity of escalating doses of $10^8$ colony forming units (CFU), $10^9$ CFU and $10^{10}$ CFU of M04NM11 in patients who have chronic hepatitis B infection

<b>Submission date</b> 02/06/2008	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 26/06/2008	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 06/05/2016	<b>Condition category</b> Infections and Infestations	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

Prof Graham Foster

### Contact details

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## Additional identifiers

EudraCT/CTIS number

IRAS number

**ClinicalTrials.gov number**

**Secondary identifying numbers**

MS04.03

## Study information

### Scientific Title

A double blind, placebo controlled study to evaluate the safety and immunogenicity of escalating doses of  $10^8$  colony forming units (CFU),  $10^9$  CFU and  $10^{10}$  CFU of M04NM11 in patients who have chronic hepatitis B infection

### Study objectives

To show that M04NM11 is safe, compared to placebo, when given in escalating doses to patients with chronic hepatitis B virus.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Ethics approval has been obtained from the following Ethics Committees:

1. Multicentre Research Ethics Committee for Scotland on the 15/11/2006, ref: 06/MRE10/37
2. Clinical Centre Kragujevac Ethics Committee on the 18/01/2007, ref: 01-460/22.01
3. Clinical Centre of Serbia Ethics Committee on the 25/01/2007, ref: 39/10
4. Clinical Centre Novi Sud Ethics Committee on the 31/01/2007, ref: 00-01/13

### Study design

Multicentre double-blind randomised dose escalation 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 below to request a patient information sheet

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

Chronic hepatitis B virus

### Interventions

Patients will visit the clinic a total of 20 times over the one year treatment period.

M04NM11 or placebo will be administered orally in escalating doses of  $10^8$  CFU,  $10^9$  CFU and  $10^{10}$  CFU within each patient if well tolerated. Patients will receive up to six doses at 28 day intervals over a five month period, with a six month follow-up period.

During this time, they will be required to provide blood and urine samples for assessment of safety and efficacy. A stool sample will be taken at the end of the trial.

### **Intervention Type**

Drug

### **Phase**

Not Specified

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

M04NM11

### **Primary outcome measure**

1. The incidence of clinically significant changes in serum biochemistry and haematology tests, particularly elevations of ALT or bilirubin, or prolongation of PT
2. The incidence of adverse events, including flu-like symptoms, attributable to the investigational product
3. The incidence of serious adverse events attributable to the investigational product

The primary outcome measures will be at screening; on days 3, 7, 14 and 28 after the first dose; days 7, 14 and 28 after the second dose and days 14 and 28 after subsequent doses. Following receipt of the final dose, patients will be followed up for a further 20 weeks up to day 308.

### **Secondary outcome measures**

1. The proportion of patients in each group who experience a decrease in HBV DNA load of greater than or equal to 2 log<sub>10</sub>, or a reduction to less than  $10 \times 4$  copies/mL, maintained until day 168 (28 days after the final dose)
2. The proportion of patients in groups 1 and 2 who become HBeAg negative at any study visit before day 168 (28 days after the final dose)
3. The proportion of patients in each group who were negative for anti-HBe at baseline, who have anti-HBe at day 168 (28 days after the final dose), or if patients were anti-HBe positive at baseline the proportion who have a four-fold increase in anti-HBe titre at day 168
4. The proportion of patients in each group with normal ALT levels by day 168
5. The proportion of patients in each group who demonstrate a significant change in the frequency of HBV specific interferon gamma producing T cells determined by enzyme-linked immunosorbent spot (ELISPOT) assay or by intracellular cytokine staining
6. The proportion of patients who maintain a treatment effect in the follow up period as demonstrated by maintenance of the reduction in HBV DNA load achieved during the treatment period, maintenance of HBeAg negative status or conversion to HBeAg negative status between days 196 and 308 (two to six months after the last dose)

### **Overall study start date**

01/12/2006

### **Completion date**

30/06/2009

# Eligibility

## Key inclusion criteria

1. Participating patients must be over 18 years of age, either sex
2. Have been hepatitis B surface antigen (HBsAg) positive for at least six months
3. A detailed medical history demonstrating stable alanine aminotransferase (ALT), prothrombin time (PT) and serum bilirubin and a liver biopsy in the previous 24 months
4. Patients will be stratified and recruited according to hepatitis B 'e' antigen (HBeAg) status and viral deoxyribonucleic acid (DNA) load

## Participant type(s)

Patient

## Age group

Adult

## Lower age limit

18 Years

## Sex

Both

## Target number of participants

Up to 45 patients

## Key exclusion criteria

1. Have any hypersensitivity to the investigational medicinal product (IMP)
2. Are hepatitis C virus (HCV) or hepatitis D virus (HDV) positive
3. Are receiving or have received medication for their hepatitis B in the previous 12 months
4. Have evidence of hepatic decompensation, cirrhosis or ALT greater than 5.1 x upper limit of normal (ULN), PT greater than 1.25 x ULN or total bilirubin greater than 1.5 x ULN
5. Immuno-suppression or close contact with immuno-suppressed people

## Date of first enrolment

01/12/2006

## Date of final enrolment

30/06/2009

# Locations

## Countries of recruitment

England

Serbia

United Kingdom

**Study participating centre**  
**Clinical Research Centre**  
London  
United Kingdom  
E1 2AT

## **Sponsor information**

### **Organisation**

Emergent Product Development UK Ltd (UK)

### **Sponsor details**

540 - 545 Eskdale Road  
Winnersh Triangle  
Wokingham  
Berkshire  
United Kingdom  
RG41 5TU  
+44 (0)118 944 3300  
byfordm@ebsi.com

### **Sponsor type**

Industry

### **Website**

<http://www.emergentbiosolutions.com>

### **ROR**

<https://ror.org/007nce146>

## **Funder(s)**

### **Funder type**

Industry

### **Funder Name**

Emergent Product Development UK Ltd (UK) - commercially funded

## **Results and Publications**

### **Publication and dissemination plan**

Not provided at time of registration

**Intention to publish date**

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**

Not provided at time of registration