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A double-blind placebo-controlled multicenter study to evaluate the efficacy and safety of MBP8298 in subjects with secondary progressive multiple sclerosis (SPMS)

Submission date
13/06/2005

Recruitment status
No longer recruiting

Registration date
20/09/2005

Overall study status
Completed

Last Edited
01/07/2014

Condition category
Nervous System Diseases

[_] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[X] Results
[_] 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

Protocol serial number
MBP8298-01

Study information

Scientific Title

Study objectives
The major clinical hypothesis is that MBP8298 will significantly delay the progression of disability, as measured by the Expanded Disability Status Scale (EDSS), in subjects diagnosed with Secondary Progressive Multiple Sclerosis and who are human leukocyte antigen (HLA) DR2 and/or DR4 positive.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Not provided at time of registration

Study design
Randomised controlled trial

Primary study design
Interventional

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Secondary Progressive Multiple Sclerosis

Interventions
An intravenous administration of MBP peptide versus placebo

Intervention Type
Drug

Phase
Not Specified

Drug/device/biological/vaccine name(s)
MBP8298

Primary outcome(s)
To compare the clinical efficacy of 500 mg MBP8298 given intravenously every 6 months for a period of 2 years, to placebo, in subjects diagnosed with SPMS who are positive for the HLA DR2 and/or DR4 haplotype. Clinical efficacy is defined as a statistically and clinically significant increase in the time to confirmed worsening of disability as measured by EDSS.

Key secondary outcome(s))
1. To assess safety of MBP8298 synthetic peptide in all subjects irrespective of genotype
2. To compare the clinical efficacy of 500 mg MBP8298 given intravenously every 6 months for a period of 2 years, to placebo, in subjects diagnosed with SPMS who are negative for the HLA DR2 and/or DR4 haplotype. Clinical efficacy is defined as a statistically and clinically significant increase in the time to confirmed worsening of disability as measured by EDSS.
3. To assess the effects of MBP8298 on MRI parameters:
3.1. Activity analysis (T2 lesions, Gadolinium-enhancing lesions)

3.2. Lesion burden (T2 burden of disease, chronic T1 black holes)
3.3. Atrophy (brain and cervical cord)
4. To confirm that treatment with MBP8298 induces immunological tolerance or shift in functional response profile to MBP peptide (82-98) and determine whether this is dependent on HLA subtype
5. To determine whether MBP8298 induces immunological tolerance or shift in functional response profile to other MBP epitopes and other myelin antigens (e.g., proteolipid protein [PLP], myelin oligodendrocyte glycoprotein [MOG]), indicating the stop of epitope spreading and whether this too is dependent on HLA subtype
6. To confirm the ratio of HLA DR2/4 positive to HLA DR2/4 negative subjects in the SPMS population
7. To determine whether MBP8298 induces an improvement in the quality of life of SPMS patients, as determined by the MSQoL-54 (SF-36 plus 18 MS-specific questions in Sweden and Norway)

Completion date
01/05/2008

Eligibility

Key inclusion criteria
1. Male or female subjects, 18-65 years of age
2. Documented history of SPMS. SPMS is defined as an MS patient who has been diagnosed with MS for at least 3 years, and in the 3-year period prior to enrolment must have documented progression of their pyramidal or cerebellar Kurtzke functional subscores (FSS) in the absence of acute relapses. (In the absence of documented FSS changes, clinical notes documenting changes consistent with these changes will be acceptable). The subject must also have experienced at least one acute relapse as part of their diagnosis of Relapsing/Remitting Multiple Sclerosis (RRMS). Only one relapse prior to diagnosis of MS can be in accordance with the McDonald diagnostic criteria as long as cranial magnetic resonance imaging (MRI) findings consistent with the diagnosis of MS are also present.
3. Absence of relapse in the 3 months prior to baseline
4. EDSS of 3.5 6.5
5. Pyramidal or Cerebellar FSS ≥3
6. Subject must be able and willing to give meaningful, written informed consent prior to participation in the trial, in accordance with regulatory requirements
7. In the Investigators opinion, subjects must be reliable, compliant, and agree to cooperate with all trial evaluations

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Adult

Lower age limit
18 years

Upper age limit
65 years

Sex
All

Key exclusion criteria
1. Diagnosis of Primary Progressive MS
2. Subjects have previously received MBP8298
3. Any known malignancy, or history of malignancy, with the exclusion of basal cell carcinoma
4. Steroid therapy within 30 days prior to first dose, or any other treatment known to be used for putative or experimental MS treatment
5. Therapy with ß-interferon, glatiramer acetate, mitoxantrone, cyclophosphamide, methotrexate, azathioprine, or any other immuno-modulating (e.g., intravenous immunoglobulin [IVIG]) or immunosuppressive drugs, including recombinant or non-recombinant cytokines or plasma exchange, within 6 months prior to performance of the first study-specific test, with the exception of corticosteroids or adrenocorticotropic hormone (ACTH) for relapse treatment.
6. Initiation of therapy with 4-aminopyridine (4-AP) or 3,4-diaminopyridine (3,4-DAP)
7. History of anaphylactic/anaphylactoid reactions to glatiramer acetate
8. Abnormal laboratory values at the Baseline Visit deemed by the Investigator to be clinically significant
9. Known allergy to Gadolinium-DTPA
10. Treatment at any time with Cladribine, total lymphoid irradiation, monoclonal antibody treatment e.g. anti-CD4, anti-CD52, anti-VLA4, anti-CD20
11. Treatment at any time with an altered peptide ligand
12. Any conditions that could interfere with the performance of study-specific procedures (e.g., MRI)
13. Previous randomization to this study
14. Known positivity for human immunodeficiency virus (HIV), Hepatitis B, or Hepatitis C
15. Participation in any other non-MS clinical trial within 30 days prior to performance of the first study-specific test (the screening/baseline visit), or any investigational therapy in the past 6 months
16. Females who are breastfeeding, pregnant (pregnancy test at screening), or not using a medically approved method of contraception regularly
17. Known or suspected current or past alcohol or drug abuse (within the last year)
18. Any medical, psychiatric or other condition that could result in a subject not being able to give fully informed consent, or to comply with the protocol requirements
19. Any other condition that, in the Investigators opinion, makes the subject unsuitable for participation in the study

Date of first enrolment
06/12/2004

Date of final enrolment
01/05/2008

Locations

Countries of recruitment
United Kingdom

Canada

Denmark

Estonia

Finland

Germany

Latvia

Netherlands

Spain

Sweden

Study participating centre
501 Smyth Road
Ottawa
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K1H 8L6

Sponsor information

Organisation
BioMS Technology Corp (Canada)

ROR
https://ror.org/03fvjvp95

Funder(s)

Funder type
Industry

Funder Name
BioMS Technology Corp (Canada)

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	18/10/2011		Yes	No