

# Vaccination with Adjuvants, Peptides and Elimination of Regulatory Cells: Enhancement of the body's anticancer immunity by vaccination

<b>Submission date</b> 17/12/2012	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 29/01/2013	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 29/03/2018	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

<http://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-study-looking-at-using-a-vaccine-and-chemotherapy-to-treat-advanced-cancer-vaper>

## Contact information

### Type(s)

Scientific

### Contact name

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## Additional identifiers

Clinical Trials Information System (CTIS)

2014-003025-18

Protocol serial number

## Study information

### Scientific Title

In vitro generation of optimal tumour antigen-specific anticancer immune responses, by vaccination with Human Telomerase Reverse Transcriptase (HTERT) peptides, in combination with specific adjuvants and elimination of immunosuppressive regulatory cells, in patients with advanced cancer

### Acronym

VAPER

### Study objectives

Vaccination with HTERT peptides in combination with specific adjuvants and elimination of regulatory suppressor cells can enhance anticancer immune responses.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

London - London Bridge Research Ethics Committee, 08/05/2015, REC ref: 15/LO/0117

### Primary study design

Interventional

### Study design

Single-centre open-label fixed-dose comparative study

### Study type(s)

Prevention

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

Advanced cancer

### Interventions

Patients are randomly allocated to either Group A or Group B.

All patients (groups A and B) will receive eight intradermal injections of 2 ml, consisting of 700ug of HTERT peptides in 1 ml normal saline (NS) mixed with Montanide ISA-51 VG, 1 ml, given at 3 weekly intervals.

Topical Imiquimod 12.5 mg will be applied by the patient to the vaccination site day 1-5 post vaccination.

All patients (groups A and B) will receive a 10 day course of low dose oral Cyclophosphamide day 1-10 of each vaccination cycle.

Group B patients will take Celecoxib 400mg bd PO daily for the duration of the trial.

## **Intervention Type**

Drug

## **Phase**

Phase I/II

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

Human Telomerase Reverse Transcriptase (HTERT) peptides, cyclophosphamide

## **Primary outcome(s)**

To establish that the study is safe, well tolerated and patient acceptable.

Patients will be asked to complete validated questionnaires (Mood Rating Scale, Hospital Anxiety and Depression Scale, Patient Attitude to Treatment Scale, FACT-Biological Response Modifiers) prior to treatment, at each vaccination visit and 4 weeks after the final vaccination. The forms will be evaluated and statistically analysed by Chi square and Fisher's exact tests at the end of treatment.

Morbidity, side effects of treatment, will be documented at each clinic visit. Serious adverse events (SAEs) and sudden unexpected serious adverse reactions (SSUSARs) will be documented if and when they occur.

## **Key secondary outcome(s)**

The generation of specific anticancer immunological responses and objective evidence of clinical responses during the programme.

Blood will be taken for assessment of immunological parameters prior to treatment, at each vaccination visit and 4 weeks after the end of treatment. Tumour markers, if present, will also be monitored at each visit and documented.

Reduction or stasis of tumour volume will be recorded at each visit if there is measureable tumour.

## **Completion date**

31/12/2018

## **Eligibility**

### **Key inclusion criteria**

1. Age 18-85, either sex
2. Histologically or cytologically proven cancer
3. No further beneficial anticancer therapy available
4. Completed treatment at least 4 weeks previously
5. Post menopausal or sterilised or practising contraception
6. WHO status 3 or less
7. Life expectancy at least 30 weeks
8. Ability to give informed written consent

### **Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 Years

**Upper age limit**

85 Years

**Sex**

All

**Key exclusion criteria**

1. Pregnancy, lactation
2. Men and premenopausal women unwilling to practise reliable contraception
3. Inability to give informed written consent
4. Cerebral metastasis
5. Autoimmune disorders
6. Undergoing immunosuppressive therapy
7. Cardiovascular disease:coronary artery disease,major cardiac disease [left ventricular ejection fraction (LVEF <50%)], poorly controlled hypertension
- 8.Peptic ulceration,inflammatory bowel disease
9. Allergy to nonsteroidal anti-inflammatory drug (NSAID) therapy, celecoxib, asthma or allergy following aspirin
10. Allergy to sulphonamides
11. Past history of stroke or transient ischaemic attacks

**Date of first enrolment**

04/02/2013

**Date of final enrolment**

31/12/2018

**Locations****Countries of recruitment**

United Kingdom

England

**Study participating centre**

**Nottingham University Hospitals NHS Trust**

Nottingham

United Kingdom

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# Sponsor information

## Organisation

Nottingham University Hospitals NHS Trust (UK)

## Organisation

King's College Health Partners Clinical Trials Office

## Organisation

Nottingham University Hospitals NHS Trust

## ROR

<https://ror.org/05y3qh794>

# Funder(s)

## Funder type

Charity

## Funder Name

Candles Charity (UK)

# 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?
<a href="#">HRA research summary</a>			28/06/2023	No	No