

Longwing: An extension study for patients with Dravet syndrome, a severe form of epilepsy, who previously participated in studies of STK-001 in the United Kingdom

Submission date 16/06/2022	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 28/06/2022	Overall study status Ongoing	<input type="checkbox"/> Protocol
Last Edited 05/03/2026	Condition category Nervous System Diseases	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and Study aims

Dravet syndrome (DS) is a rare form of epilepsy that begins in the first year of a child's life and has a poor long-term prognosis. DS is among the most drug-resistant forms of epilepsy, with more than 90% of patients continuing to have uncontrolled seizures despite treatment with multiple antiepileptic drugs, as well as many other significant symptoms such as cognitive, mood, sleep, and movement problems. DS is most commonly caused by a mutation in a gene, called SCN1A, which usually leads to the SCN1A protein not functioning as well as normal.

This extension study will continue research into a new investigational drug, called STK-001, which is intended to increase the levels of SCN1A from the normal gene, to find out how safe it is and how it is tolerated when given at different increasing doses in children and adolescents with DS.

Who can participate?

Patients aged 2.5 years old and over with a diagnosis of Dravet syndrome who have previously participated in a Stoke Therapeutics' study of STK-001.

What does the study involve?

It is expected that patients enrolled in the main study, STK-001-DS-102 (ADMIRAL) will roll over without interruption to this extension study. In the event that a patient does not roll over immediately, the patient still has the option to enroll in this study within 4 weeks of their End of Study Visit from Study STK-001-DS-102.

The duration of the study for each patient is up to 15 months or, for patients tolerating treatment, the study duration will continue with treatment every 4 months (16 weeks), until the end of the study, or unacceptable toxicity, withdrawal of consent, or Investigator/Sponsor

decision, whichever comes first. Dosing beyond the initial dose on Day 1 will not occur until after MHRA provides approval for this study to proceed with the 2nd and consecutive doses of STK-001.

Patients will receive intrathecal administration (injection into the spinal canal) of study drug STK-001 at the dose level they received while participating in Study STK-001-DS-102, or at a dose level recommended by the Safety Monitoring Committee.

After completion of treatment, patients will enter a 24-week Follow-up Period for safety monitoring that consists of a non-clinic telephone visit by either the Principal Investigator (PI) or a Sub-Investigator (Sub-I).

What are the possible benefits and risks of participating?

There is no guarantee that participants will receive medical benefits from taking part in this study. However, the information from this study may help better treat children with Dravet syndrome in the future. It is possible that the participants will not improve during the study or may even worsen. Treatment with this study drug may also involve risks to the participant's future health that are currently unknown.

Where is the study run from?

Stoke Therapeutics (USA)

When is the study starting and how long is it expected to run for?

October 2021 to November 2027

Who is funding the study?

Stoke Therapeutics (USA)

Who is the main contact?

Stoke Therapeutics General Mailbox, clinicaltrials@stoketherapeutics.com

Contact information

Type(s)

Public

Contact name

Dr Stoke Therapeutics General Mailbox

Contact details

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Type(s)

Principal investigator

Contact name

Prof Andreas Brunklaus

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Additional identifiers**Clinical Trials Information System (CTIS)**

2021-005626-14

Integrated Research Application System (IRAS)

1004380

Protocol serial number

STK-001-DS-502, CPMS CHIL 51531

Study information**Scientific Title**

Longwing: An open-label extension study for patients with Dravet syndrome who previously participated in studies of STK-001

Acronym

Longwing

Study objectives

Administration of multiple doses of STK-001 is safe and well tolerated in patients with DS ages 2.5 years and older

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved: 26/04/2022, Scotland A Research Ethics Committee (Research Ethics Service, 2nd Floor, Waverley Gate, 2-4 Waterloo Place, Edinburgh, EH1 3EG, Scotland; +44 (0)131 465 5680; ruth.fraser4@nhslothian.scot.nhs.uk), Ref: 22/SS/0005

Study design

Multicentre interventional open-label extension long-term safety tolerability study

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Dravet syndrome (participants ≥ 2.5 years of age)

Interventions

Current intervention as of 01/08/2023:

Participants who have completed the ADMIRAL (STK-001-DS-102) study will have the possibility of rolling over on to the Longwing (STK-001-DS-502) extension study. This rollover can be completed on the same day as the End of Study visit for the ADMIRAL study or up to 4 weeks after.

1. Treatment Period

Patients who meet the eligibility criteria will undergo pre-dose evaluations and will receive doses of STK-001 every 4 months as follows:

1.1. An initial dose on Day 1 after their transition from the ADMIRAL Study (STK-001-DS-102)

1.2. Doses 2 and 3 on Weeks 16 and 32, respectively, which may occur only after MHRA provides approval for patients in this study to proceed with their 2nd and 3rd doses of STK-001. Note: MHRA provided approval for patients in this study to proceed with their 2nd, 3rd and additional doses of STK-001.

1.3. Patients who are tolerating treatment may then continue with doses every 4 months with an End of Study/Follow-up Visit 24 weeks after the last dose of study drug. Patients who do not continue treatment after Dose 3 will have a follow-up Visit (V5) at Week 48 and an End of Study Visit at Week 56.

Patients will receive intrathecal (IT) administration of study drug STK-001 at the dose level they received while participating in Study STK-001-DS-102, or at a dose level recommended by the Safety Monitoring Committee. The highest dose administered may not exceed that evaluated previously in the ADMIRAL (STK-001-DS-102) study or approved for Longwing (STK-002-DS-502).

In addition to study visits, the study centre will monitor the patient's condition through telephone contacts after each study drug administration. During this time, information on seizures will be collected by paper diary.

2. Follow-up Period

After completion of treatment, patients will enter a 24-week Follow-up Period for safety monitoring that consists of a non-clinic telephone visit and an Onsite End of Study Visit.

3. Duration of Participation

The duration of the study for each patient is up to 15 months or, for patients tolerating treatment, study duration will continue with treatment every 4 months (16 weeks), until the end of the study, or unacceptable toxicity, withdrawal of consent, or Investigator/Sponsor decision, whichever comes first. Dosing beyond the initial dose on Day 1 will not occur until after MHRA provides approval for this study to proceed with the 2nd and consecutive doses of STK-001. Note: MHRA provided approval for patients in this study to proceed with their 2nd, 3rd and additional doses of STK-001.

Previous intervention:

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1. Treatment Period

Patients who meet the eligibility criteria will undergo pre-dose evaluations and will receive doses of STK 001 every 4 months as follows:

- 1.1. An initial dose on Day 1 after their transition from the ADMIRAL Study (STK-001-DS-102)
- 1.2. Doses 2 and 3 on Weeks 16 and 32, respectively, which may occur only after MHRA provides approval for patients in this study to proceed with their 2nd and 3rd doses of STK-001
- 1.3. Patients who are tolerating treatment may then continue with doses every 4 months with an End of Study/Follow-up Visit 24 weeks after the last dose of study drug. Patients who do not continue treatment after Dose 3 will have a follow-up Visit (V5) at Week 48 and an End of Study Visit at Week 56.

Patients will receive intrathecal (IT) administration of study drug STK-001 at the dose level they received while participating in Study STK-001-DS-102, or at a dose level recommended by the Safety Monitoring Committee. The highest dose administered may not exceed that evaluated previously in the ADMIRAL (STK-001-DS-102) study.

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Intervention Type

Drug

Phase

Phase I/II

Drug/device/biological/vaccine name(s)

STK-001

Primary outcome(s)

Current primary outcome measures as of 01/08/2023:

1. Safety and tolerability of multiple doses of STK-001 from screening (day-1) until 6 months after multiple drug dosing, based on:
 - 1.1. Incidence, type, severity, and seriousness of adverse events (AEs) measured by review of all reported events for all participants
 - 1.2. Incidence of abnormal vital signs (including body temperature, heart rate, systolic and diastolic blood pressure, and respiratory rate) measured using standard methods such as thermometer and blood pressure cuff
 - 1.3. Incidence of abnormal 12-lead electrocardiogram (ECG) findings (including PR, QRS, and QT intervals) measured using 12-lead electrocardiograms
 - 1.4. Incidence of abnormal laboratory parameters (including haematology, coagulation, clinical chemistry and urine tests) measured using validated assays of blood and urine samples
 - 1.5. Incidence of immunogenicity (anti-drug antibodies) measured using a validated assay in serum
 - 1.6. Percent change from baseline in locomotor skill ability assessed using the Gillette Functional Assessment Questionnaire (FAQ) total score
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Previous primary outcome measures:

1. Safety and tolerability of multiple doses of STK-001 from screening (day-1) until 6 months after multiple drug dosing, based on:
 - 1.1. Incidence, type, severity, and seriousness of adverse events (AEs) measured by review of all reported events for all participants
 - 1.2. Incidence of abnormal vital signs (including body temperature, heart rate, systolic and diastolic blood pressure, and respiratory rate) measured using standard methods such as thermometer and blood pressure cuff
 - 1.3. Incidence of abnormal 12-lead electrocardiogram (ECG) findings (including PR, QRS, and QT intervals) measured using 12-lead electrocardiograms
 - 1.4. Incidence of abnormal laboratory parameters (including haematology, coagulation, clinical chemistry and urine tests) measured using validated assays of blood and urine samples
 - 1.5. Incidence of immunogenicity (anti-drug antibodies) measured using a validated assay in serum

Key secondary outcome(s)

1. Pharmacokinetic (PK) parameters measured by analysis of plasma concentrations of STK-001 using hybridization ELISA from day 1 (dosing) until 6 months after multiple drug dosing
2. Exposure of STK-001 in cerebrospinal fluid (CSF) by measurement of STK-001 concentrations using hybridization ELISA from day 1 (dosing) until the last study drug dosing day
3. Seizure frequency measured using a paper diary from screening (day -1) until 6 months after multiple drug dosing
4. Overall clinical status as measured by the Clinician-assessed Global Impression of Change

Scale from baseline (day -1) until 6 months after multiple drug dosing
5. Quality-of-life measured by EuroQoL-five dimensions, youth version (EQ-5D-Y) from baseline (day -1) until 6 months after multiple drug dosing

Completion date

22/11/2027

Eligibility

Key inclusion criteria

1. Completed dosing with STK-001 and the End of Study Visit in Study STK 001-DS-102, with an acceptable safety profile per the Investigator's judgment
2. Satisfactory compliance with study visits and procedures in Study STK 001-DS-102 per Investigator and Sponsor judgment
3. Completed Study STK-001-DS-102 within 4 weeks of the start of their participation in Study STK-001-DS-502, unless approved by the Sponsor

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Mixed

Lower age limit

2.5 years

Upper age limit

100 years

Sex

All

Total final enrolment

0

Key exclusion criteria

1. Met any withdrawal criteria from Study STK-001-DS-102
2. Current treatment as maintenance therapy with an antiepileptic drug acting primarily as a sodium channel blocker including phenytoin, carbamazepine, oxcarbazepine, lamotrigine, lacosamide, or rufinamide
3. Clinically significant unstable medical conditions other than epilepsy
4. Clinically relevant symptoms or a clinically significant illness (in the judgment of the Investigator) in the 4 weeks prior to Screening/Baseline of Study STK-001-DS-502, other than epilepsy
5. Spinal deformity or other condition that may alter the free flow of CSF or has an implanted CSF drainage shunt
6. Prior treatment (or is being treated) with an investigational product (other than STK-001)

since participating in Study STK 001 DS-102
7. Participating in an observational study

Date of first enrolment

09/05/2022

Date of final enrolment

08/11/2023

Locations

Countries of recruitment

United Kingdom

England

Scotland

Study participating centre

Great Ormond Street Hospital for Children

Great Ormond Street

London

England

WC1N 3JH

Study participating centre

Sheffield Children's Hospital

Western Bank

Sheffield

England

S10 2TH

Study participating centre

Royal Hospital For Children

1345 Govan Road

Glasgow

Scotland

G51 4TF

Sponsor information

Organisation

Stoke Therapeutics, Inc

Funder(s)

Funder type

Industry

Funder Name

Stoke Therapeutics, Inc

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Data sharing statement to be made available at a later date

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		05/03/2026	05/03/2026	Yes	No
HRA research summary			26/07/2023	No	No