

Multicentre, randomised study comparing autologous intravesical macrophage cell therapy (Bexidem®) to intravesical Bacillus Calmette-Guerin (BCG) therapy in patients with superficial papillary bladder cancer

Submission date 16/04/2009	Recruitment status No longer recruiting	☐ Prospectively registered ☐ Protocol
Registration date 27/05/2009	Overall study status Completed	☐ Statistical analysis plan ☒ Results
Last Edited 11/06/2010	Condition category Cancer	☐ 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
MAK-BLA-202

Study information

Scientific Title

Phase II/III, multicentre, open-label, randomised study comparing autologous intravesical macrophage cell therapy (Bexidem®) to intravesical Bacillus Calmette-Guerin (BCG) therapy in patients with superficial papillary bladder cancer who have undergone complete transurethral resection

Acronym

Bexidem®

Study objectives

1. Phase II step:

- 1.1. Primary objective: To demonstrate a superior safety profile of Bexidem® therapy with respect to 'frequent immunotherapy-linked adverse events' (FILAEs) compared to BCG therapy
- 1.2. Secondary objective: To evaluate overall efficacy and recurrence-free survival in patients treated with Bexidem® therapy

2. Phase III step:

- 2.1. Primary objective: To compare efficacy (recurrence-free survival) of Bexidem® therapy to BCG therapy
- 2.2. Secondary objective: To evaluate overall safety of Bexidem® therapy as compared to BCG therapy

Ethics approval required

Old ethics approval format

Ethics approval(s)

All participating centres received ethics approval prior to recruitment of the first participant:

- 1. Spain: Regional EC - CEIC Regional de la Comunidad de Madrid; Local EC - CEIC Autonómico de Ensayos Clínicos de Andalucía - Consejería de Salud; Local EC - Comité Ético de Investigación Clínica de Galicia SERGAS
- 2. Hungary: Central EC Central Ethics Committee - Egészségügyi és Tudományos Tanács; Institutional Research Ethic Committee - Fővárosi Szent István Hospital; Institutional Research Ethic Committee - Budai Irgal Masrendi Intézményi Kutatásetikai Bizottság; IKEB Hatarozat döntésről; Regionális Kuratásetukai Bizottsága (Győr - Moson - Sopron etc..) - Egészségügyi és Tudományos Tanács; Local Ethic Committee Bajcsy - Zsilinszky Hospital; Regional and Institutional Committee of Science and research Ethics - Semmelweis Hospital; Local Ethic Committee Jahn Ferenc South-Pest Hospital; Regionális Kuratásetukai Bizottsága (Győr - Moson - Sopron etc..) - Egészségügyi és Tudományos Tanács; Institutional Research Ethic Committee of Local Government of Capital City; Local Ethic Committee Bács - Kiskun County Hospital
- 3. France: Central EC - CCPPRB du l'Hopital Paris
- 4. Germany: Ethik-Kommission Medizinische - Fakultät Universität Regensburg; Ethikkommission Med. Fakultät der HHU Düsseldorf; Ethikkommission Charité - Universitätsmedizin; Ethikkommission - Medizinischen Fakultät der Technischen Universität; Ethikkommission der Landesärztekammer Rheinland-Pfalz
- 5. Belgium: Commission d'Ethique Biomédicale - Hospitalo-Facultaire; Comité Éthique - CHR de la Citadelle; Etisch Comité O.L. Vrouwziekenhuis; Etisch Comité AZ Groeninge
- 6. Luxembourg: Comité Éthique CNER 18

Primary study design

Interventional

Study design

Phase II/III multicentre open-label randomised study

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Superficial papillary bladder cancer

Interventions

Dosage and administration:

Three treatment cycles: first cycle consists of either 6 weekly Bexidem® instillations (0.5 - 2 x 10⁸ cells in a total volume of 50 ml per instillation) or BCG instillations (1 - 19.2 x 10⁸ CFU in a total volume of 50 ml). Maintenance consists of two cycles (at month 3 and month 6) of each three weekly Bexidem® instillations, or 3 weekly BCG instillations.

Study duration:

Phase II: Individual patient participation: 24 months including follow-up observation. Total study duration: 42 months

Phase III: Individual patient participation: 24 months including follow-up observation. Total study duration: dependent upon total number of patients

Intervention Type

Drug

Phase

Phase II/III

Drug/device/biological/vaccine name(s)

Bexidem®

Primary outcome(s)

Phase II: To demonstrate a superior safety profile of Bexidem® with respect to FILAEs compared to BCG therapy.

Phase III: To compare efficacy (recurrence-free survival) of Bexidem® therapy to BCG therapy.

The comparison of toxicity will be performed after all patients in the Phase II step have completed all cycles of treatment and at least three months of follow up (month 9). The recurrence-free survival in each group will be estimated after all Phase II patients have completed at least six months of follow up after the last treatment (month 12 visit). These analyses will serve as the basis for a decision to proceed to the Phase III step as well as to estimate the expected recurrence-free survival in the two groups and recalculate the sample size required for the Phase III step.

Key secondary outcome(s)

Phase II: To evaluate overall efficacy and recurrence-free survival in patients treated with Bexidem® therapy.

Phase III: To evaluate overall safety of Bexidem® therapy as compared to BCG.

The comparison of toxicity will be performed after all patients in the Phase II step have completed all cycles of treatment and at least three months of follow up (month 9). The recurrence-free survival in each group will be estimated after all Phase II patients have completed at least six months of follow up after the last treatment (month 12 visit). These analyses will serve as the basis for a decision to proceed to the Phase III step as well as to estimate the expected recurrence-free survival in the two groups and recalculate the sample size required for the Phase III step.

Completion date

16/03/2007

Eligibility

Key inclusion criteria

1. Male and female patients
2. At least 18 years of age
3. Fully resected papillary transitional cell carcinoma
4. Stage TaGI, TaGII, TaGIII, T1GI or T1GII (N0, M0)
5. Either of the following:
 - 5.1. Plurifocal tumours
 - 5.2. Unifocal tumour provided greater than or equal to two tumour occurrences within the last 24 months
6. World Health Organization (WHO) performance status 0 - 2
7. Normal upper urinary tract as documented by intravenous (IV) urography or computed tomography (CT) scan
8. Blood creatinine less than 200 $\mu\text{mol/L}$
9. Alanine aminotransferase (ALT) and aspartate aminotransferase (AST) less than 2.5 x upper limit of normal (ULN)
10. Leukocytes greater than or equal to $3,500/\text{mm}^3$
11. Able to understand and follow treatment scheme
12. Signed and dated Informed Consent

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 Years

Sex

All

Key exclusion criteria

1. Greater than or equal to T1GIII bladder cancer
2. Carcinoma in situ (CIS)

3. Active tuberculosis
4. Other active infection (including urinary tract infection) and/or infections that may compromise the immune system such as human immunodeficiency virus (HIV), human T-lymphotropic virus (HTLV), hepatitis B or hepatitis C infection
5. History of other active malignancy within five years, except adequately treated basal cell and squamous cell carcinoma of the skin
6. Other serious illness or medical conditions (e.g. history of significant cardiac or respiratory dysfunction)
7. Patients with a contra-indication preventing apheresis
8. History of autoimmune-related disorder
9. Known hypersensitivity to any of the components of the study drugs (e.g. dimethylsulphoxide [DMSO])
10. Immunosuppression or congenital or acquired immune deficiencies, whether due to concurrent disease (e.g. acquired immune deficiency syndrome [AIDS], leukaemia, lymphoma), cancer therapy (cytotoxic drugs, radiotherapy) or immunosuppressive therapy (e.g. corticosteroids, cyclosporin)
11. Family history of Creutzfeldt-Jacob disease and/or risk of Creutzfeldt-Jacob disease defined as patient having received extracted growth hormone or neurosurgery before 1996
12. Prior systemic reaction to BCG therapy
13. Pregnant or nursing women

Date of first enrolment

25/06/2004

Date of final enrolment

16/03/2007

Locations

Countries of recruitment

Belgium

France

Germany

Hungary

Luxembourg

Spain

Study participating centre

Oberarzt

Regensburg

Germany

93053

Sponsor information

Organisation

IDM Pharma SA (France)

ROR

<https://ror.org/048p4wq89>

Funder(s)

Funder type

Industry

Funder Name

IDM Pharma SA (France)

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	08/06/2010		Yes	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes