

Chemotherapy with methotrexate and cytarabine with or without thiotepa, and with or without rituximab, followed by brain irradiation vs chemotherapy supported by autologous stem cells transplantation for immunocompetent patients with central nervous system lymphoma

Submission date 10/08/2011	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 10/08/2011	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 25/10/2022	Condition category Cancer	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

<https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-trial-looking-high-dose-chemotherapy-radiotherapy-stem-cell-transplant-people-recently-diagnosed-primary-lymphoma-brain-spinal-cord-ielgs-32>

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

ClinicalTrials.gov (NCT)

NCT01011920

Clinical Trials Information System (CTIS)

2009-012432-32

Protocol serial number

10139

Study information

Scientific Title

Randomized phase II trial on primary chemotherapy with high-dose methotrexate and high-dose cytarabine with or without thiotepa, and with or without rituximab, followed by brain irradiation vs high-dose chemotherapy supported by autologous stem cells transplantation for immunocompetent patients with newly diagnosed primary CNS lymphoma.

Acronym

IELSG32

Study objectives

Objectives:

To establish in a prospective, randomized phase II trial, the activity of three different chemotherapy combinations in patients with newly diagnosed primary central nervous system lymphoma (PCNSL):

1. High-dose methotrexate (HD-MTX) + high-dose cytarabine (HD-araC)
2. HD-MTX + HD-araC + rituximab
3. HD-MTX + HD-araC + rituximab + thiotepa

To establish the efficacy of two consolidation strategies: conventional whole-brain radiotherapy (WBRT) vs. highdose chemotherapy supported by autologous stem cell transplantation (HDC + ASCT) in patients with newly diagnosed PCNSL.

Ethics approval required

Old ethics approval format

Ethics approval(s)

29/06/2011, ref: 11/LO/0420

Study design

Randomised, interventional

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Lymphoma (non-Hodgkin's)

Interventions

Patients will be randomised to one of 3 chemotherapy regimens:

Arm A Methotrexate & Cytarabine

Arm B - Methotrexate & Cytarabine with Rituximab

Arm C Methotrexate & Cytarabine with Rituximab and Thiotepa

Those who are in SD or respond to treatment will be further randomised to consolidation therapy.

Arm D Whole Brain Radiotherapy

Arm E BCNU, Thiotepa and Stem Cell Transplant

Follow Up Length: 120 month(s); Study Entry : Multiple Randomisations

Intervention Type

Drug

Phase

Phase II

Drug/device/biological/vaccine name(s)

1. Carmustine 2. Cytarabine 3. Methotrexate 4. Rituximab 5. Thiotepa

Primary outcome(s)

Complete remission following primary chemotherapy

Key secondary outcome(s)

Failure-free survival at 2 years

Completion date

30/09/2013

Eligibility

Key inclusion criteria

1. Histological or cytological assessed diagnosis of non-Hodgkin's lymphoma
2. Diagnostic sample obtained by stereotactic or surgical biopsy, cerebrospinal fluid (CSF) cytology examination or vitrectomy
3. Disease exclusively localized into the central nervous system, CSF, cranial nerves or eyes
4. At least one measurable lesion
5. Previously untreated patients (previous or ongoing steroid therapy admitted)
6. Aged 18-65 years (with ECOG Performance Status 0-3), Aged 66-70 (with ECOG Performance Status 0-2)
7. Adequate bone marrow (PLT = 100000 mm³, Hb = 9 g/dl, ANC = 2.000 mm³)
8. Adequate bone marrow (PLT ≥ 100000 mm³, Hb ≥ 9 g/dl, ANC ≥ 2.000 mm³), renal (creatinine clearance ≥ 60 ml/min) cardiac (VEF ≥ 50%), hepatic function (total serum bilirubin ≤ 3 mg/dL, AST/ALT and γGT ≤ 2 per upper normal limit value).
9. Sexually active patients of childbearing potential agreeing in implementing adequate contraceptive measures during study participation. (13 is part of 12 inclusion criteria)
10. Absence of any familial, sociological or geographical condition potentially hampering

compliance with the study protocol and follow-up schedule
11. Patient-signed informed consent obtained before registration
12. Male or female participants

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Upper age limit

65 years

Sex

All

Total final enrolment

227

Key exclusion criteria

1. Patients with lymphomatous lesions outside the CNS
2. Patients with a previous non-Hodgkin lymphoma at any time
3. Previous or concurrent malignancies with the exception of surgically cured carcinoma in-situ of the cervix, carcinoma of the skin or other cancers without evidence of disease at least from 5 years
4. Hepatitis-B-Virus surface antigen (HBsAg) and Hepatitis-C-Virus (HCV) positivity
5. HIV infection, previous organ transplantation or other clinically evident form of immunodeficiency
6. Concurrent treatment with other experimental drugs
7. Concurrent pregnancy or lactation
8. Patients not agreeing to take adequate contraceptive measures during the study
9. Symptomatic coronary artery disease, cardiac arrhythmias uncontrolled with medication or myocardial infarction within the last 6 months (New York Heart Association Class III or IV heart disease)

Date of first enrolment

01/10/2011

Date of final enrolment

30/09/2013

Locations**Countries of recruitment**

United Kingdom

England

Germany

Italy

Switzerland

Study participating centre

Clinical Trials Unit

Southampton

United Kingdom

SO16 6YD

Sponsor information

Organisation

Southampton University Hospitals NHS Trust

ROR

<https://ror.org/0485axj58>

Funder(s)

Funder type

Charity

Funder Name

Cancer Research UK Clinical Trials Advisory and Awards Committee

Results and Publications

Individual participant data (IPD) sharing plan

Not provided at time of registration

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	01/05/2016	10/04/2019	Yes	No
Results article	results	01/11/2017	10/04/2019	Yes	No
HRA research summary			28/06/2023	No	No
Plain English results			25/10/2022	No	Yes
Study website	Study website	11/11/2025	11/11/2025	No	Yes