

# A randomised, open label, controlled trial to assess the efficacy and safety of dihydroartemisinin-piperaquine for the treatment of primary and the prevention of secondary infections with Plasmodium falciparum

<b>Submission date</b> 09/06/2008	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 24/07/2008	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 10/05/2012	<b>Condition category</b> Infections and Infestations	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> 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**  
1.0.6

# Study information

## Scientific Title

A randomised open label study to assess the safety and efficacy of dihydroartemisinin-piperaquine (Artekin™) compared with lumefantrine-artemether (Coartem®) for the treatment of uncomplicated Plasmodium falciparum malaria in Kenyan children

## Study objectives

Dihydroartemisinin-piperaquine is at least as efficacious as artemether-lumefantrine for the treatment of primary and the prevention of secondary infections with Plasmodium falciparum.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Ethics approval received from:

1. Kenya Medical Research Institute, National Ethic Review Committee (Kenya) on the 26th June 2005
2. University of Oxford, Oxford Tropical Research Ethics Committee (UK) on the 6th July 2005
3. University of Heidelberg School of Medicine, Ethics Committee (Germany) on the 8th August 2005

## Study design

Randomised, open label, controlled trial

## Primary study design

Interventional

## Study type(s)

Treatment

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

Uncomplicated Plasmodium falciparum malaria

## Interventions

1. Three-day, three-dose regimen of dihydroartemisinin-piperaquine (Artekin™); co-formulation: target dose of 2 mg/kg/ once per day of dihydroartemisinin and target dose of 18 mg/kg/once per day of piperaquine
2. Three-day, six-dose regimen of artemether-lumefantrine (Coartem®); co-formulation containing 20 mg of artemether and 120 mg of lumefantrine:
  - 2.1. 5 kg to less than 15 kg: one tablet/twice per day
  - 2.2. 15 kg to less than 25 kg: two tablets/twice per day
  - 2.3. 25 kg to less than 35 kg: three tablets/twice per day

Patients are followed-up for 84 days.

## Intervention Type

Drug

## Phase

Not Specified

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

Dihydroartemisinin-piperaquine (Artekin™), lumefantrine-artemether (Coartem®)

**Primary outcome(s)**

1. The cure ratio of dihydroartemisinin-piperaquine is non-inferior to that of artemether-lumefantrine (non-inferiority margin = 5%)
2. The cure ratio of dihydroartemisinin-piperaquine is at least 90%

**Key secondary outcome(s)**

1. Polymerase chain reaction (PCR)-uncorrected day 28 cure ratio
2. Safety profiles of the two treatments
3. Time to asexual parasite clearance (PCT)
4. Time to fever clearance (FCT)
5. Gametocyte prevalence and density on days 7, 14, 28, 42, 63 and 84
6. Haematological recovery (Haemoglobin [Hb] changes) from day 0 to day 28, day 42, and day 84
7. Cure ratios at day 42 (PCR corrected and PCR uncorrected)
8. Cure ratios at day 63 (PCR corrected and PCR uncorrected)
9. Cure ratios at day 84 (PCR corrected and PCR uncorrected)
10. Rate of PCR-confirmed reinfections to estimate the chemoprophylactic effect of dihydroartemisinin-piperaquine

**Completion date**

31/12/2008

## Eligibility

**Key inclusion criteria**

1. Males and females aged between 6 months and 59 months inclusive
2. Body weight of 5 kg and above
3. Microscopically confirmed, monoinfection of Plasmodium falciparum (parasitaemia greater than or equal to 2,000/μL to 200,000/μL)
4. History of fever in the previous 24 hours or presence of fever (axillary temperature at greater than or equal to 37.5°C)
5. Signed informed consent by the parents or guardians
6. Parents or guardians willingness and ability to comply with the study protocol for the duration of the trial

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Child

**Lower age limit**

6 months

**Upper age limit**

59 months

**Sex**

All

**Key exclusion criteria**

1. Participation in any investigational drug study during the previous 30 days
2. Known hypersensitivity to the study drugs
3. Severe malaria
4. Danger signs: not able to drink or breast-feed, vomiting (greater than twice in 24 hours), recent history of convulsions (greater than one in 24 hours), unconscious state, unable to sit or stand
5. Electrocardiogram (ECG) abnormality that requires urgent management
6. Presence of intercurrent illness or any condition which in the judgment of the investigator would place the subject at undue risk or interfere with the results of the study
7. Severe malnutrition (defined as weight for height less than 70% of the median National Center for Health Statistics [NCHS]/World Health Organisation [WHO] reference)

**Date of first enrolment**

01/09/2005

**Date of final enrolment**

31/12/2008

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

Germany

Kenya

**Study participating centre**

Im Neuenheimer Feld 350

Heidelberg

Germany

69120

**Sponsor information****Organisation**

University of Heidelberg School of Medicine (Germany)

**ROR**

<https://ror.org/038t36y30>

# Funder(s)

## Funder type

Research organisation

## Funder Name

Medicines for Malaria Venture (MMV) (Switzerland)

## Alternative Name(s)

MMV

## Funding Body Type

Private sector organisation

## Funding Body Subtype

Other non-profit organizations

## Location

Switzerland

## Funder Name

German Research Council (Deutsche Forschungsgemeinschaft [DFG]) (Germany)

# 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="#">Results article</a>	results	01/10/2011		Yes	No