

Single arm NCRI feasibility study of Cyclophosphamide, Hydroxydaunorubicin, Oncovin, Prednisone (CHOP) in combination with Ofatumumab in induction and maintenance for patients with newly diagnosed Richters syndrome

Submission date 30/03/2011	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 30/03/2011	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 26/10/2022	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-study-ofatumumab-with-chop-for-richters-syndrome-chop-or>

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

ClinicalTrials.gov (NCT)

NCT01171378

Clinical Trials Information System (CTIS)

2009-016459-23

Protocol serial number

9476

Study information

Scientific Title

Single arm NCRI feasibility study of Cyclophosphamide, Hydroxydaunorubicin, Oncovin, Prednisone (CHOP) in combination with Ofatumumab in induction and maintenance for patients with newly diagnosed Richters syndrome

Acronym

CHOP-OR

Study objectives

The primary objective of the study will be to evaluate overall response rate (ORR) to CHOP-O (CHOP chemotherapy plus Ofatumumab) according to the Revised Response Criteria for Malignant Lymphoma (Cheson).

Secondary objectives will be feasibility of recruitment, progression free survival and overall survival, the clinical benefit and changes in patient reported outcome measures, safety and tolerability.

This is a multi-centre non-randomised Phase II NCRI feasibility study in 35 patients with newly diagnosed RS in the UK. CHOP-O will be given for six cycles followed by six cycles of Ofatumumab maintenance treatment every eight weeks and a three months follow-up period. The total duration of recruitment will be 24 months starting from the opening of the first site. Richters Syndrome (RS) is a high-grade transformation that occurs in 5-15% of patients with B cell chronic lymphocytic leukaemia (B-CLL). RS is a complication of B-CLL in which the leukemia changes into a fast-growing diffuse large B cell lymphoma. The pathogenesis of RS is poorly understood and predictors of transformation and response to treatment are unknown. Management of RS remains unsatisfactory; the mean overall survival of patients treated with conventional chemo-immunotherapy such as CHOP-R is 8 months from the end of treatment. CHOP is the acronym for a chemotherapy regimen, cyclophosphamide, hydroxydaunorubicin (doxorubicin), Oncovin (vincristine), and prednisone/prednisolone) and the R stands for the monoclonal antibody, Rituximab. Ofatumumab, a next generation monoclonal anti CD20 antibody, has proven single agent activity in relapsed/refractory B-CLL and other non-Hodgkin lymphomas. In addition, it has shown a favourable safety profile in the maintenance setting. Therefore, the aim of this study is to evaluate Ofatumumab in combination with CHOP in induction and maintenance treatment of patients with RS.

Ethics approval required

Old ethics approval format

Ethics approval(s)

10/H0604/85; First MREC approval date 05/11/2010

Study design

Non-randomised; Interventional; Design type: Treatment

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Topic: National Cancer Research Network; Subtopic: Haematological Oncology, Lymphoma;
Disease: Leukaemia (chronic), Lymphoma (non-Hodgkin's)

Interventions

CHOP-O (CHOP with Ofatumumab), Subjects will be given CHOP in combination with ofatumumab (CHOP-O).

CHOP-O is CHOP (cyclophosphamide, hydroxydaunorubicin (doxorubicin), Oncovin (vincristine), and prednisone/prednisolone) in combination with the monoclonal antibody, ofatumumab. The first 4 infusions of CHOP will be weekly. CHOP-O will be given every 3 weeks for six cycles during induction. Subjects will then receive ofatumumab maintenance treatment once every eight weeks for 6 cycles.; Follow Up Length: 3 month(s); Study Entry : Registration only

Intervention Type

Drug

Phase

Phase II

Drug/device/biological/vaccine name(s)

Cyclophosphamide, Hydroxydaunorubicin, Oncovin, Prednisone, Ofatumumab

Primary outcome(s)

Objective response; Timepoint(s): Objective response as defined by the revised response criteria for malignant lymphoma

Key secondary outcome(s)

1. To assess feasibility of recruitment
2. To further assess the efficacy of CHOP in combination with ofatumumab in induction and maintenance treatment of Richters Syndrome
3. To assess the safety and tolerability of CHOP in combination with ofatumumab in induction and maintenance treatment of Richters Syndrome

Completion date

31/05/2014

Eligibility

Key inclusion criteria

Current inclusion criteria as of 14/03/2014:

1. Signed written informed consent prior to performing any study-specific procedures
2. Patients with B-CLL and newly diagnosed not previously treated and biopsy proven Richters transformation - Diffuse large B-cell lymphoma (DLBCL)
3. Computerised tomography (CT) scan performed within 8 weeks prior to starting treatment
4. Eastern Cooperative Oncology Group (ECOG) performance status of 0, 1, 2 or 3
5. Age 18 years and over
6. Target gender: male and female
7. Lower age limit 18 years

Previous inclusion criteria:

1. Signed written informed consent prior to performing any study-specific procedures
2. Patients with B-CLL and newly diagnosed not previously treated and biopsy proven Richters transformation - Diffuse large B-cell lymphoma (DLBCL)
3. Computerised tomography (CT) scan performed within 6 weeks prior to starting treatment
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5. Age 18 years and over
6. Target gender: male and female
7. Lower age limit 18 years

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Total final enrolment

37

Key exclusion criteria

Current exclusion criteria as of 14/03/2014:

1. CHOP or CHOP-like antracycline-containing treatment for DLBCL within 6 months prior to registration
2. Known CNS involvement 1. Treatment for Diffuse large B-cell lymphoma (DLBCL) within 6 months prior to registration
2. Known CNS involvement of B-cell chronic lymphocytic leukemia (B-CLL)
3. Any other malignancy that requires active treatment with the exception of basal cell carcinoma and non-invasive squamous cell carcinoma
4. Chronic or ongoing active infectious disease requiring systemic treatment such as, but not limited to:
 - 4.1. Chronic renal infection
 - 4.2. Chronic chest infection with bronchiectasis

4.3. Tuberculosis

4.4. Active hepatitis

5. Subjects meeting any of the following criteria must not be enrolled in the study:

5.1. Positive serology for Hepatitis B (HB) defined as a positive test for HBsAg. (In addition, if negative for HBsAg but HBcAb positive (regardless of HBsAb status), a HB DNA test will be performed and if positive the subject will be excluded). Consent will be sought prior to any test being performed.

5.2. Clinically significant cardiac disease including:

5.2.1. Unstable angina

5.2.2. Uncontrolled congestive heart failure

5.2.3. Arrhythmia requiring therapy, with the exception of extra systoles or minor conduction abnormalities

5.3. Significant concurrent, uncontrolled medical condition including, but not limited to:

5.3.1. Renal

5.3.2. Hepatic

5.3.3. Haematological

5.3.4. Gastrointestinal

5.3.5. Endocrine

5.3.6. Pulmonary

5.3.7. Neurological

5.3.8. Cerebral or psychiatric disease

5.4. History of significant cerebrovascular disease in last 6 months

5.5. Known HIV positive

6. Known or suspected hypersensitivity to components of investigational product

7. Patients who have received treatment with any non-marketed drug substance or experimental therapy within 4 weeks prior to Visit 2 (start of treatment, cycle 1 day 1)

8. Current participation in any other interventional clinical study

9. Patients known or suspected of not being able to comply with a study protocol (e.g. due to alcoholism, drug dependency or psychological disorder)

10. Breast feeding women or women with a positive pregnancy test at screening.

11. Women of childbearing potential not willing to use adequate contraception during study and for 12 months after last dose of ofatumumab. Adequate contraception is defined as abstinence, hormonal birth control or intrauterine devices

Previous exclusion criteria:

1. Treatment for DLBCL within 6 months prior to registration

2. Known CNS involvement 1. Treatment for Diffuse large B-cell lymphoma (DLBCL) within 6 months prior to registration

2. Known CNS involvement of B-cell chronic lymphocytic leukemia (B-CLL)

3. Any other malignancy that requires active treatment with the exception of basal cell carcinoma and non-invasive squamous cell carcinoma

4. Chronic or ongoing active infectious disease requiring systemic treatment such as, but not limited to:

4.1. Chronic renal infection

4.2. Chronic chest infection with bronchiectasis

4.3. Tuberculosis

4.4. Active hepatitis

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5.2. Clinically significant cardiac disease including:

5.2.1. Unstable angina

5.2.2. Congestive heart failure

5.2.3. Arrhythmia requiring therapy, with the exception of extra systoles or minor conduction abnormalities

5.3. Significant concurrent, uncontrolled medical condition including, but not limited to:

5.3.1. Renal

5.3.2. Hepatic

5.3.3. Haematological

5.3.4. Gastrointestinal

5.3.5. Endocrine

5.3.6. Pulmonary

5.3.7. Neurological

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Date of first enrolment

30/04/2011

Date of final enrolment

31/05/2014

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

University of Oxford

Oxford

United Kingdom

OX3 7DQ

Sponsor information

Organisation

University of Oxford

ROR

<https://ror.org/052gg0110>

Funder(s)

Funder type

Industry

Funder Name

GlaxoSmithKline (UK)

Alternative Name(s)

GlaxoSmithKline plc., GSK plc., GlaxoSmithKline plc, GSK

Funding Body Type

Government organisation

Funding Body Subtype

For-profit companies (industry)

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

Not provided at time of registration

IPD sharing plan summary

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/10/2016	25/04/2019	Yes	No
Protocol article	protocol	13/02/2015		Yes	No
Basic results				No	No
HRA research summary			28/06/2023	No	No
Plain English results			26/10/2022	No	Yes
Study website	Study website	11/11/2025	11/11/2025	No	Yes