

# Research into injecting golimumab less frequently by using increased doses

No registrations found.

<b>Ethical review</b>	Positive opinion
<b>Status</b>	Recruiting
<b>Health condition type</b>	-
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON21487

### Source

NTR

### Brief title

INDIGO

### Health condition

Rheumatoid arthritis (RA), psoriatic arthritis (PsA), axial spondyloarthritis (axSpA)

## Sponsors and support

**Primary sponsor:** Sint Maartenskliniek

**Source(s) of monetary or material Support:** None

## Intervention

## Outcome measures

### Primary outcome

Description of peak levels, trough levels and area-under-the-curve (AUC) of the following golimumab regimens: 50 mg every month, 100 mg every one-and-a-half month and 100 mg every two months, in patients with a rheumatic disease.

### Secondary outcome

- 1) Efficacy of the two intervention regimens by changes in disease activity (DAS28-CRP, ASDAS or PASDAS) compared to 50 mg every month;
- 2) Proportion of patients with undetectable golimumab levels and/or antibodies to golimumab;
- 3) Incidence of AEs, with special interest to injection site reactions;
- 4) Preference of participants: 50 mg every month or 100 mg with a prolonged interval

## Study description

### Background summary

Golimumab is a TNF receptor antagonist, proven effective in the treatment of rheumatoid arthritis, psoriatic arthritis and axial spondyloarthritis, in a dose of 50 mg every month. Apart from the 50 milligram injections, 100 milligram injections are also on the market, registered for patients weighing > 100 kg for whom treatment with 50 milligram is not considered effective. However, 100 milligram injections were also tested on normal-weight patients in the registration studies, proven effective and safe, even on long-term. With the 100 milligram injections being available, a new dosing schedule can be created, in which 100 milligram is given with a prolonged dose interval, which would lead to a lower frequency of injections for patients with the same efficacy.

But, there is not much known on the pharmacokinetics of golimumab 100 mg with a prolonged dose interval in patients with a rheumatic disease, so that such a dosing schedule can not yet be created. Therefore, the aim of this explorative study is to determine pharmacokinetic parameters (peak level, trough level, AUC) of the following golimumab regimens: 50 mg every month (control), 100 mg every 1,5 months (expected similar trough levels to 50 mg every month with a drug half-life of 14 days) and 100 mg every 2 months (expected similar AUC to 50 mg every month).

### Study objective

Golimumab 100 mg every 1,5 month has similar trough levels to golimumab 50 mg every month; golimumab 100 mg every 2 months has a similar AUC to golimumab 50 mg every month.

### Study design

Disease activity measurements: baseline, 4 months, 8 months

Golimumab serum level measurements: trough - peak - in between - trough for every regimen in the last cycle

### Intervention

- 1) Golimumab 50 mg every month (1 cycle)
- 2) Golimumab 100 mg every 1,5 month (2 cycles)

3) Golimumab 100 mg every 2 months (2 cycles)

## Contacts

### Public

Sint Maartenskliniek  
Celeste van der Togt

024 3272793

### Scientific

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## Eligibility criteria

### Inclusion criteria

- 1) rheumatoid arthritis (according to 2010 ACR RA and/or 1987 RA criteria and/or clinical diagnosis confirmed by a rheumatologist)  
or psoriatic arthritis (according to CASPAR criteria and/or clinical diagnosis of peripheral SpA of the psoriatic arthritis subtype confirmed by a rheumatologist)  
or axial spondyloarthritis (according to ASAS criteria and/or clinical diagnosis confirmed by a rheumatologist)
- 2) patients using golimumab in the standard dose of 50 mg every month for at least three months with a good clinical response, defined as DAS28-CRP  $\leq$  2.6 or PASDAS  $\leq$  3.2 or ASDAS  $\leq$  2.1
- 3) Informed consent,  $\geq$  16 years old and mentally competent
- 4) Ability to measure the outcome of the study in this patient (e.g. patient availability, willing and being able to undergo repeated serum samples)
- 5) Ability to read and communicate well in Dutch

### Exclusion criteria

- 1) Pregnancy

## Study design

### Design

Study type:	Interventional
Intervention model:	Crossover
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

### Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	02-03-2020
Enrollment:	35
Type:	Anticipated

### IPD sharing statement

**Plan to share IPD:** Undecided

## Ethics review

Positive opinion	
Date:	12-02-2020
Application type:	First submission

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

## Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register	ID
NTR-new	NL8373
Other	CMO Arnhem-Nijmegen : CMO 2019-5971

## Study results