An Open-Label, Flexible-Dose Study of Retigabine Immediate Release (IR) as Adjunctive Therapy to Specified Monotherapy Antiepileptic Treatments in Adults with Partial-Onset Seizures (RGB113905)

Published: 19-04-2010
Last updated: 30-04-2024

Primary: To evaluate the efficacy of retigabine as adjunctive therapy to each of the following specified monotherapy AED treatments: carbamazepine/ oxcarbazepine, lamotrigine, levetiracetam or valproic acid in subjects with partial-onset seizures (...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Neurological disorders NEC
Study type	Interventional

Summary

ID

NL-OMON34560

Source
ToetsingOnline

Brief title
RGB113905

Condition

- Neurological disorders NEC

Synonym
epilepsy

Research involving

Human

Sponsors and support

Primary sponsor: GlaxoSmithKline
Source(s) of monetary or material Support: GlaxoSmithKline BV

Intervention

Keyword: flexible dosing, Partial-onset epilepsy, Retigabine

Outcome measures

Primary outcome

Number of seizures.

Secondary outcome

Number of seizures, side effects, fuctional status and productivity.

Study description

Background summary

Epilepsy affects approximately 50 million people worldwide. Currently available antiepileptic drugs (AEDs) provide satisfactory seizure control in approximately 70% of patients; however, the remaining 30% of epilepsy patients are refractory to treatment. The partial-onset seizure is the most common type of seizure that is uncontrolled in adult patients.
The introduction of new AEDs during the last decade has increased therapeutic possibilities. However, none of the newer AEDs provides adequate seizure control in all patients. The treatment of patients who do not respond adequately to current AEDs remains a problem and motivates the continued search for compounds with good efficacy and an acceptable safety and tolerability profile.
Retigabine is a novel antiepileptic compound with well-documented anticonvulsant properties. Retigabine has a primary pharmacological action that is unlike currently available antiepileptic drugs (AEDs).
Retigabine has been shown to be superior to placebo as adjunctive therapy in subjects with partial-onset epilepsy.
The RCTs involved strict selection criteria and also mandated titration to one of three fixed doses. In these studies, in about 70% of cases, retigabine was an add-on to two or more AEDs.

This Phase IIIb study is a hypothesis generating investigation to gain insight into efficacy, safety and tolerability, and health outcomes of retigabine as adjunctive therapy to specified monotherapy AED treatments using a flexible dosing regimen in adult subjects with partial-onset seizures.

Study objective

Primary: To evaluate the efficacy of retigabine as adjunctive therapy to each of the following specified monotherapy AED treatments: carbamazepine/ oxcarbazepine, lamotrigine, levetiracetam or valproic acid in subjects with partial-onset seizures (POS) using a flexible dosing regimen.
Secondary: Efficacy in the pooled set of specified AED treatments. Safety and tolerability with each and in the pooled set of monotherapy AED treatments. Effect with each and in the pooled set of the specified monotherapy AED treatments on functional status and productivity.

Study design

Open-label, non-comparative phase III study:
* Screening and 8 week baseline evaluation with continuation of existing monotherapy AED.
* Start with retigabine 150 mg/day, gradual dose increase in the 1st 4 weeks to 600 mg/day. Continuation of existing AED, dose not to be changed.
* 16 week period with flexible dosing of retigabine (in principle 300-1200 mg/day) and of existing AED.
* Possibility to participate in follow-up study or gradual discontinuation of retigabine in 3 weeks.
Approx. 235 patients.

Intervention

Treatment with retigabine.

Study burden and risks

Risks: Adverse effects of study medication.
Burden: 7-8 visits in 33 weeks. 2-3x vital signs, 2x physical and neurological examination, 6-7x blood tests (50 ml total), 6-7x pregnancy test (if relevant), 4-5x ECG, 6-7x 1-2 questionnaires (incl. questions about mental condition and suicide thoughts), 2x bladder ultrasound.
Diaries during entire period (medication intake and seizure calendar).

Contacts

Public
GlaxoSmithKline

Huis ter Heideweg 62
3705 LZ Zeist
NL
Scientific
GlaxoSmithKline

Huis ter Heideweg 62
3705 LZ Zeist
NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adults (18-64 years)
Elderly (65 years and older)

Inclusion criteria

* Age 18 years and above (men or women).
* Epilepsy with partial-onset seizures i.e., simple or complex partial seizures with or without secondary generalization (International League Against Epilepsy (ILAE) classification; 1981) for more than 24 weeks prior to the Baseline Visit.
* At least 4 partial-onset seizures (i.e., simple or complex partial seizures with or without secondary generalization) during an 8-week prospective Baseline Phase with at least one partial seizure occurring during each 4-week period.
* Is currently receiving a stable dose of one of the following AEDs: carbamazepine/oxcarbazepine, lamotrigine, levetiracetam or valproic acid in a stable dose for 4 weeks prior to Baseline Visit (retrospective or prospective) and during the Baseline period. Benzodiazepines used in any manner other than acute usage as defined in this protocol will be considered concurrent AED usage and will not be permitted.

* Adequate contraception for females of childbearing potential.

Exclusion criteria

* History of generalised epilepsy.
* Status epilepticus (other than simple partial status epilepticus) within the 24 weeks prior to Baseline Visit.
* Participation in a previous retigabine study (subjects with documented evidence of having received placebo will be eligible).
* Is currently following or planning to follow the ketogenic diet.
* Has been treated with vigabatrin within the past 6 months prior to Baseline; if a subject has been previously treated with vigabatrin, a visual perimetry test after discontinuation of vigabatrin must show no visual field constriction.
* Active suicidal plan/intent or has had active suicidal thoughts in the past 6 months. Has history of suicide attempt in the last 2 years or more than 1 lifetime suicide attempt.
* Pregnancy or lactation.

Study design

Design

Study phase:	3
Study type:	Interventional
Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	03-03-2011
Enrollment:	20
Type:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	retigabine

Generic name:	retigabine

Ethics review

Approved WMO Date:	19-04-2010
Application type:	First submission
Review commission:	METC Leiden-Den Haag-Delft (Leiden) metc-ldd@lumc.nl

Approved WMO Date:	17-06-2010
Application type:	Amendment
Review commission:	METC Leiden-Den Haag-Delft (Leiden) metc-ldd@lumc.nl

Approved WMO Date:	28-07-2010
Application type:	First submission
Review commission:	METC Leiden-Den Haag-Delft (Leiden) metc-ldd@lumc.nl

Approved WMO Date:	05-10-2010
Application type:	Amendment
Review commission:	METC Leiden-Den Haag-Delft (Leiden) metc-ldd@lumc.nl

Approved WMO Date:	06-10-2010
Application type:	Amendment
Review commission:	METC Leiden-Den Haag-Delft (Leiden) metc-ldd@lumc.nl

Approved WMO

Date:	28-01-2011
Application type:	Amendment
Review commission:	METC Leiden-Den Haag-Delft (Leiden)
	metc-ldd@lumc.nl

Approved WMO

Date:	15-04-2011
Application type:	Amendment
Review commission:	METC Leiden-Den Haag-Delft (Leiden)
	metc-ldd@lumc.nl

Approved WMO

Date:	18-05-2011
Application type:	Amendment
Review commission:	METC Leiden-Den Haag-Delft (Leiden)
	metc-ldd@lumc.nl

Approved WMO

Date:	31-05-2011
Application type:	Amendment
Review commission:	METC Leiden-Den Haag-Delft (Leiden)
	metc-ldd@lumc.nl

Approved WMO

Date:	10-06-2011
Application type:	Amendment
Review commission:	METC Leiden-Den Haag-Delft (Leiden)
	metc-ldd@lumc.nl

Approved WMO

Date:	24-08-2011
Application type:	Amendment
Review commission:	METC Leiden-Den Haag-Delft (Leiden)
	metc-ldd@lumc.nl

Approved WMO

Date:	31-08-2011
Application type:	Amendment
Review commission:	METC Leiden-Den Haag-Delft (Leiden) metc-ldd@lumc.nl

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
Other	clinicaltrials.gov; registratienummer nog niet bekend
EudraCT	EUCTR2009-017744-14-NL
CCMO	NL32162.098.10