A multicenter uncontrolled extension study evaluating the long term safety and efficacy of SAR153191 in patients with Ankylosing Spondylitis (AS)

Published: 16-04-2010
Last updated: 03-05-2024

The purpose of this study is to determine if SAR153191 150 mg once a week (qw) SC (subcutaneous) administration is safe and effective in reducing the recurrence and symptoms of ankylosing spondylitis over a long period of time (up to 5 years).

Ethical review	Approved WMO
Status	Pending
Health condition type	Central nervous system infections and inflammations
Study type	Interventional

Summary

ID

NL-OMON34640

Source
ToetsingOnline

Brief title
LTS11298

Condition

- Central nervous system infections and inflammations

Synonym
Bechterew's Disease, Marie Stümpell Disease

Research involving
Human

Sponsors and support

Primary sponsor: Sanofi-aventis

Source(s) of monetary or material Support: sponsor

Intervention

Keyword: Ankylosing Spondylitis, Anti-IL-6Ra mAb, Interleukin 6

Outcome measures

Primary outcome

Primary objective is to assess the long term safety of SAR153191 in patients

with ankylosing spondylitis.

Secondary outcome

Secondary Objective is to assess the long term efficacy of SAR153191 by

(ASAS20).

Study description

Background summary

Ankylosing Spondylitis (AS) is a chronic, progressive inflammatory disease characterized by inflammatory back pain, due to sacroiliitis, spondylitis and enthesitis that affects young men and women, commonly starting in the second and third decades of life. Traditional therapies
for AS are nonsteroidal anti-inflammatory drugs (NSAIDs), disease-modifying antirheumatic drugs (DMARDs) and physical therapy. However the above mentioned therapies have limited efficacy. In contrast, the anti-Tumor Necrosis Factor (anti-TNF) agents have shown better clinical efficacy in short and intermediate
* term evaluations, but 30% to 40% of patients are still anti-TNF resistant.

Interleukin-6 (IL-6) is an important cytokine for the pathogenesis of AS. There is evidence that the inflammation in AS is at least partly mediated by tumor necrosis factor-alpha and IL-6, as high levels of these cytokines have been found in biopsy from sacroiliac joints of patients with AS. Also high levels of circulating IL-6 have been found in several groups of AS patients. Therefore blocking IL-6 signaling pathway with SAR153191, is thought to provide beneficial effects in patients with ankylosing spondylitis.However, no IL-6 mAb has been approved in this indication.

Study objective

The purpose of this study is to determine if SAR153191 150 mg once a week (qw) SC (subcutaneous) administration is safe and effective in reducing the recurrence and symptoms of ankylosing spondylitis over a long period of time (up to 5 years).

Study design

An uncontrolled open label extension study of SAR153191 up to 5 years or until commercially available or until discontinuation of the project whichever is sooner. The patient will receive 150 mg of SAR153191 given once a week (qw). Adjustment of dose is possible to 150 mg SC every other week (q2w) in case of safety issue. The final dose regimen will be switched to the proposed top pivotal dose regimen at time of selection.

Intervention

SAR153191 150 mg will be adminstered to all participating patients once a week (qw) SC (subcutaneous).

Study burden and risks

De patient visits the hospital for a minimum of 27 visits and a maximum of 29 visits during the study. The first visit is the screening visit, which is followed by a randomization visit (Day 1), a visit at week 2, 4, 6, 8, 12, every 12 weeks starting from week 24 to week 260 and week 266. The patient can take the opportunity to be visited at home by a home nursing service at week 2 and 6. This is arranged by the sponsor. If the patient is more comfortable to visit the hospital, then this is not a problem. During these (hospital) visits physical examinations will be performed, bloodsamples will be taken, an ECG will be made, a MRI and X-rays will be performed and several questionnaires have to be completed. Further at the beginning of the study it will be checked if the patient does not have Tuberculosis.

Bloodsamples
During blood draws, the patient may have pain and/or bruising at the place on the arm where blood is taken. Blood clots may form and infections may occur, but these events are rare. The amount of blood to be drawn will be approximately 650 mL over 266 weeks.

Study medication
Treatment with SAR153191 may increase the risk of infection including tuberculosis (TB), due to the fact that the immune system may become weaker and not able to fight infections as it should therefore causing bacteria, fungi, or viruses to spread throughout thebody. It is possible that the body may develop antibodies (proteins that your body makes when exposed to foreign substances) to this new drug. The patient may suffer from bruises, pain or discomfort at

injection or puncture sites.

ECG, MRI and X-ray
There might only be a little discomfort, but not risk, when the electrocardiogram electrodes are placed on the skin and the recording of the electrocardiogram.
During the MRI the patient need not to move or change his/her position; and this may be uncomfortable due to the AS.
Radiation exposure from an X-ray of the spine is equivalent to the amount of radiation exposure one experiences from less than 1 year of natural background radioation in the Netherlands.

Pregnancy
If the patient has childbearing potential, she must either have been surgically sterilised (tuballigation or hysterectomy) at least one month prior to study entry; or use an IUD (intrauterine device) combined with diaphragm, condom or spermicide; or use an oral contraceptive (the pill) together with a barrier method, in any case she must have a negative pregnancy test at the baseline visit and every 4 weeks during the study. Males must use 2 forms of contraception: a condom with a spermicidal gel.

Contacts

Public
Sanofi-aventis

Kampenringweg 45 D-E
2803 PE Gouda
NL
Scientific
Sanofi-aventis

Kampenringweg 45 D-E
2803 PE Gouda
NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

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

Inclusion criteria

I 01. Patients with AS that have completed 12 weeks of treatment in the DRI11073 study.
I 02. Patients must give informed consent for participating in the LTS11298 study prior to any procedure related to the study.

Exclusion criteria

E 01. Any patients who experienced any adverse events leading to treatment discontinuation from the DRI11073 study.
E 02. Any abnormalities or adverse events at the last treatment visit of the DRI11073 study that per Investigator judgment would adversely affect patient*s participation in this study.
E 03. Positive pregnancy test at the last visit in the DRI 11073 study.
E 04. Breast-feeding women.
E 05. For women of childbearing potential, unwillingness to utilize adequate contraception methods or not become pregnant during the full course of the study. Adequate contraceptive measures include oral contraceptives (stable use for 2 or more cycles prior to screening) and other prescription pharmaceutical contraceptives; IUD; bilateral tubal legations; vasectomy; condom or diaphragm plus either contraceptive sponge, foam or jelly. If subject is on MTX and/ or any other concomitant medication, please follow their precautions and recommendations. For example, if a subject is on Methotrexate, which requires a longer term use of contraception, then the longer period should be used to protect safety of subject.
E 06. Men who are unwilling to utilize 2 form of contraception: a condom and a spermicidal agent.

Study design

Design

Study phase:	2
Study type:	Interventional
Masking:	Open (masking not used)
Control:	Uncontrolled

Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	01-07-2010
Enrollment:	6
Type:	Anticipated

Medical products/devices used

Product type:	Medicine
Brand name:	nog niet beschikbaar
Generic name:	SAR153191

Ethics review

Approved WMO Date:	16-04-2010
Application type:	First submission
Review commission:	METC Amsterdam UMC
Approved WMO Date:	27-10-2010
Application type:	Amendment
Review commission:	METC Amsterdam UMC

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
EudraCT	EUCTR2010-019263-11-NL
CCMO	NL31887.018.10
Other	Zie sectie J.