A confirmatory, placebo-controlled, randomised, double-blind, single-dummy, parallel group, ratio-finding study in constipated pain patients to establish an optimal hydromorphone âx* naloxone ratio with an improved bowel function and a comparable analgesic efficacy compared to hydromorphone alone

Published: 12-06-2009 Last updated: 06-05-2024

see protocol summary

Ethical reviewApproved WMOStatusRecruitment stoppedHealth condition typeOther conditionStudy typeInterventional

Summary

ID

NL-OMON37097

Source

ToetsingOnline

Brief title

Optimisation of Hydromorphone - Naloxone Ratio for the treatment of pain

Condition

- Other condition
- Gastrointestinal motility and defaecation conditions
- Miscellaneous and site unspecified neoplasms benign

Synonym

cancer related background pain, chronic cancer pain

Health condition

pijnbestrijding

Research involving

Human

Sponsors and support

Primary sponsor: Mundipharma

Source(s) of monetary or material Support: farmaceutisch bedrijf: Mundipharma

Intervention

Keyword: - bowel function, - Hydromorfone, - Naloxone

Outcome measures

Primary outcome

see protocol summary

Secondary outcome

see protocol summary

Study description

Background summary

see protocol summary

Study objective

see protocol summary

Study design

see protocol summary

Intervention

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see protocol summary

Study burden and risks

see protocol summary

Contacts

Public

Mundipharma

Hohenstrasse 10 Limburg / Lahn 65549 DE Scientific Mundipharma

Hohenstrasse 10 Limburg / Lahn 65549

DE

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

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

Inclusion criteria

1. Male or female subjects at least 18 years (females less than one year post-menopausal must have a negative serum or urine pregnancy test prior to the first dose of study medication, be non-lactating, and willing to use adequate and highly effective methods of contraception throughout the study. A highly effective method of birth control is defined as those which result in a low failure rate (i.e. less than 1% per year) when used consistently and correctly such as sterilisation, implants, injectables, combined oral contraceptives, some IUDs (Intrauterine Device, hormonal), sexual abstinence or vasoectomised partner).

- 2. Subjects who are receiving WHO step II or step III analgesic medication for the treatment of non-cancer or cancer pain.
- 3. Documented history of non-cancer or cancer pain that requires opioid therapy (8, 24 or 48 mg hydromorphone PR per day for the duration of the study).
- 4. Subjects with constipation caused or aggravated by opioids:
- * Subject*s medical need of regular intake of laxatives to have at least 3 bowel evacuations per week, or having less than 3 bowel evacuations when not taking a laxative, respectively.
- * In the opinion of the subject and Investigator it is confirmed that the subject*s constipation is induced, or worsened by the subject*s pre study opioid medication (present at Screening)
- 5. Subjects must be willing to discontinue their current opioid analgesic routine.
- 6. Subjects must be willing to discontinue their current laxative regimen and willing to comply with the use of oral bisacodyl as laxative rescue medication.
- 7. Subjects taking daily fiber supplementation or bulking agents are eligible if they can be maintained on a stable dose and regimen throughout the study, and in the Investigator*s opinion are willing and able to maintain adequate hydration.
- 8. Subjects must be willing and able (e.g. mental and physical condition) to participate in all aspects of the study, including use of medication, completion of subjective evaluations, attending scheduled clinic visits, completing telephone contacts, and compliance with protocol requirements as evidenced by providing written, informed consent.
- 9. In the Investigator*s opinion the subject*s non-analgesic concomitant medications, including those medications for the treatment of depression are thought to be stable, and will remain stable throughout the Double-blind Phase of the study.
- 10. In the Investigator*s opinion the non opioid analgesic medication dose will remain stable during the Double-blind Phase.

Exclusion criteria

- 1. Any history of hypersensitivity to hydromorphone, naloxone, bisacodyl, related products or other ingredients of the study medication.
- 2. Any contraindication to hydromorphone, naloxone, bisacodyl, related products and other ingredients of the study medication.
- 3. Active alcohol or drug abuse and/or history of opioid abuse.
- 4. Evidence of clinically significant cardiovascular, renal, hepatic, gastrointestinal (e.g. paralytic ileus), or psychiatric disease, as determined by medical history, clinical laboratory tests, ECG results, and physical examination, that would place the subject at risk upon exposure to the study medication or that may confound the analysis and/or interpretation of the study results.
- 5. Chronic or intermittent pain that results from Fibromyalgia or Rheumatoid Arthritis.
- 6. Subjects receiving hypnotics or other central nervous system (CNS) depressants that, in the Investigator*s opinion, may pose a risk of additional CNS depression with opioid study medication.
- 7. Subjects with uncontrolled seizures or convulsive disorder.

- 8. Surgery within 2 months prior to the start of the Screening Period, or planned surgery during the 8-week Maintenance Phase that may affect GI motility or pain.
- 9. Subjects presently taking, or who have taken, naloxone * 30 days prior to the start of the Screening Period.
- 10. Subjects suffering from diarrhoea.
- 11. Subjects with any situation in which opioids are contraindicated (e.g., severe respiratory depression with hypoxia and/or hypercapnia, severe chronic obstructive lung disease, paralytic ileus).
- 12. Subjects with hypothyroidism, Addison's disease, increase of intracranial pressure.
- 13. Abnormal aspartate aminotransferase (AST; SGOT), alanine aminotransferase (ALT; SGPT), or alkaline phosphatase levels (> 3 times the upper limit of normal)
- 14. Abnormal total bilirubin and/or creatinine level(s) (greater than 1.5 times the upper limit of normal), gamma glutamyl transpeptidase (GGT or GGTP) * 5 times the upper limit of normal.

Study design

Design

Study phase: 3

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Double blinded (masking used)

Control: Placebo

Primary purpose: Treatment

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 19-03-2010

Enrollment: 20

Type: Actual

Medical products/devices used

Product type: Medicine

Brand name: nvt

Generic name: 2 mg Naloxone Hydrochloride Prolonged Release Tablets

Product type: Medicine

Brand name: nvt

Generic name: 8 mg Naloxone Hydrochloride Prolonged Release Tablets

Product type: Medicine

Brand name: Palladone SR capsules

Generic name: Hydromorphone hydrochloride

Registration: Yes - NL intended use

Product type: Medicine

Brand name: Pallodon retard 4 mg

Generic name: Hydromorfon hydrochloride

Registration: Yes - NL intended use

Product type: Medicine

Brand name: Pallodon retard 8 mg

Generic name: Hydromorfon hydrochloride

Registration: Yes - NL intended use

Ethics review

Approved WMO

Date: 12-06-2009

Application type: First submission

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

Approved WMO

Date: 03-09-2009

Application type: First submission

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

Approved WMO

Date: 19-05-2010

Application type: Amendment

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

Approved WMO

Date: 21-05-2010

Application type: Amendment

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

Approved WMO

Date: 20-09-2010

Application type: Amendment

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

Approved WMO

Date: 24-09-2010

Application type: Amendment

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

Approved WMO

Date: 29-07-2011

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 1

EudraCT EUCTR2008-005315-18-NL

CCMO NL26847.098.09