MEA115661: A multi-centre, open-label, long-term safety study of mepolizumab in asthmatic subjects who participated in the MEA115588 or MEA115575 trials

Published: 27-03-2013 Last updated: 25-04-2024

Primary: To collect long term safety data.Secondary: To collect data on long term asthma control.

Ethical reviewApproved WMOStatusRecruitment stoppedHealth condition typeBronchial disorders (excl neoplasms)Study typeInterventional

Summary

ID

NL-OMON39006

Source ToetsingOnline

Brief title MEA115661

Condition

• Bronchial disorders (excl neoplasms)

Synonym asthma; bronchial asthma

Research involving Human

Sponsors and support

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

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Intervention

Keyword: asthma, mepolizumab, safety

Outcome measures

Primary outcome

Adverse events.

Secondary outcome

Antibodies, exacerbations, asthma control questionnaire, FEV1, no. of

withdrawals, hospitalizations, safety tests (ECG, lab etc.).

Study description

Background summary

Mepolizumab is currently under clinical development for severe asthma. Mepolizumab is a humanized antiinterleukin 5 (anti-IL5) antibody (IgG Kappa) that binds to and inactivates IL-5. IL-5 is the principle eosinophilic regulatory cytokine. It is critical for the development and release of eosinophils from the bone marrow, enhances adhesion to endothelial cells, and promotes the persistence and activation of eosinophils. Eosinophils are thought to play a major role in maintaining airway inflammation. Mepolizumab binds with high affinity to human interleukin-5 and blocks its binding to and the activation of the IL-5 receptor (CD125). It is hypothesized that blocking IL-5 with mepolizumab will have a positive effect in reducing eosinophilic inflammation in patients with severe refractory asthma who are dependent on maintenance steroid to treat their asthma. This concept has been previously investigated in a small study (N = 20) of asthmatics with persistent sputum eosinophils. The results of this study demonstrated that mepolizumab was well tolerated and effective in reducing the dose of prednisone while preventing exacerbations, decreasing blood and sputum eosinophil numbers, and improving lung function and guality of life.

Recently a study of IV mepolizumab of over 600 subjects with severe refractory uncontrolled asthma has been completed. All 3 doses investigated (75mg, 250 mg and 750mg) resulted in a clinically significant reduction in the frequency of severe exacerbations when compared to placebo and produced a marked and sustained suppression of blood eosinophils. The safety profile was similar across all treatment arms and was similar to placebo.

A PK/PD model has been developed for mepolizumab with data obtained from prior

studies. Two of these 5 studies administered mepolizumab via the subcutaneous (SC) route. The model well describes the relationship between plasma mepolizumab concentration and eosinophil counts (irrespective of the route of administration. Based on prior PK studies, the bioavailability of mepolizumab administered SC is approximately 75% and therefore a dose of 100mg SC is anticipated to provide similar exposure to the 75mg IV effective dose. A SC route of administration has been chosen for the current study as it is generally preferred by patients and is easy to administer. The current study is an extension of the study MEA115575. Patients who have completed this previous study may use mepolizumab in this extension study. The purpose is to collect long term safety data. Also patients from the study MEA115588, that is not being performed in Holland, may enter this extension study.

Study objective

Primary: To collect long term safety data. Secondary: To collect data on long term asthma control.

Study design

Open-label non-comparative phase III study. Treatment with Mepolizumab 100 mg s.c. every 4 weeks Continuation of standard treatment for asthma. Salbutamol rescue medication. Study duration approx. 1 year and 3 months. Follow-up phase 12 weeks. Approx. 660 patients.

Intervention

Treatment with mepolizumab.

Study burden and risks

Risk: adverse events of study treatment. Burden: 15 visits in approx. 1 year and 3 months. Duration 1-2h. S.c. injections (1 ml) with mepolizumab every 4 weeks during 1 year. Blood draws 11x (approx. 10 ml/occasion), thereoff 2x fasting. Pregnancy test every visit. Physical examination 2x. Pulmonary function test 4x. ECG 3x. Asthma Control Questionnaire 7x.

Contacts

Public GlaxoSmithKline BV

Huis ter Heideweg 62 Zeist 3705 LZ NL **Scientific** GlaxoSmithKline BV

Huis ter Heideweg 62 Zeist 3705 LZ NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

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

Inclusion criteria

- * Completion of the double-blind treatment during MEA115588 or MEA115575.
- * Current treatment with an additional controller medication for the past 12 weeks.

* Adequate contraception during the study and the following 4 months for females of childbearing potential.

Exclusion criteria

 \ast A study related SAE in MEA115588 or MEA115575 that was assessed as possibly related to study medication by the investigator

* Pregnancy or breastfeeding

* Current smokers.

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* Baseline ECG which has a clinically significant abnormality or which shows QTcF prolongation.

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):	03-06-2013
Enrollment:	27
Туре:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	mepolizumab
Generic name:	mepolizumab

Ethics review

Approved WMO Date:	27-03-2013
Date.	27-03-2013
Application type:	First submission
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	17-05-2013
Application type:	First submission

Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	07-06-2013
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	19-06-2013
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	20-06-2013
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	24-06-2013
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	30-08-2013
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	11-10-2013
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	08-11-2013
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	12-12-2013
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	19-03-2014
Application type:	Amendment

Review commission:	METC Amsterdam UMC
Approved WMO Date:	24-03-2014
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	08-08-2014
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	30-09-2014
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	06-01-2015
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	20-01-2015
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
Other	clinicaltrials.gov; registratienummer n.n.b.
EudraCT	EUCTR2012-001644-21-NL
ССМО	NL44003.018.13