Zevalin (90Yttrium-ibritumomab tiuxetan)-BEAM and autologous stem cell transplantation or single dose 90Yttrium ibritumomab tiuxetan as consolidation of induction chemotherapy in patients with transformed non-Hodgkin*s lymphoma. ;A phase II clinical trial

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The objective of the study is to determine the effectivity of this consolidation treatment, as well as the conversion rate of PR to CR in patients in PR before consolidation and the effect on the immunological recovery.

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Lymphomas non-Hodgkin's B-cell
Study type	Observational invasive

Summary

ID

NL-OMON39525

Source
ToetsingOnline

Brief title
Z-BEAM and AuSCT or single dose Z in patients with transformed lymphoma

Condition

- Lymphomas non-Hodgkin's B-cell
- Lymphomas non-Hodgkin's B-cell

Synonym

transformed lymphoma, transformed non-Hodgkin's lymphoma

Research involving
Human

Sponsors and support

Primary sponsor: Vrije Universiteit Medisch Centrum
Source(s) of monetary or material Support: Ministerie van OC&W

Intervention

Keyword: 90Y-ibritumomab tiuxetan, autologous stem cell transplantation, transformed lymphoma

Outcome measures

Primary outcome

2 year progression free survival.

Secondary outcome

2 year overall survival

time to next treatment

conversionrate of PR to CR as measured by PET-CT if in PR before consolidation

therapy.

recovery of immunoglobins, B-,T-, and NK-cell subsets measured at different

time points after consolidation therapy.

Study description

Background summary

Transformed lymphoma has a very short progression free survival after treatment with chemo-immunotherapy only. Consolidation of remission-induction is thus necessary. In the VUmc patients with transformed lymphoma receive consolidation treatment with high dose chemotherapy (BEAM) followed by autologous stem cell transplantation. The effect of this consolidation treatment can be enhanced by adding 90Y-ibritumomab tiuxetan, which has been used in other aggressive

lymphomas with inferior prognosis. (ref: Shimoni Exp Hematol 2007, blz 534-540)
In patients not eligible for autologous stem cell transplantation, consolidation therapy with single dose 90Y-ibritumomab tiuxetan can most likely improve PFS without inacceptable toxicity. (ref: Zinzani Ann Oncol 2008, blz 769-773)

Study objective

The objective of the study is to determine the effectivity of this consolidation treatment, as well as the conversion rate of PR to CR in patients in PR before consolidation and the effect on the immunological recovery.

Study design

If patients with a first diagnosis of transformed lymphoma reach a CR or PR assessed by PET-CT scan after induction with R-CHOP or R-DHAP,R-VIM, R-DHAP they can be consolidated with 90Yttrium ibritumomab tiuxetan combined with BEAM and followed byautologous stem cell transplantation if 18-71 years old, or with single dose 90Yttrium ibritumomab tiuxetan if ineligible for stem cell transplantation or older than 70 years.

Study burden and risks

Patients undergo 1 extra PET-CT scan according to protocol for final evaluation.
They have to give more blood samples for analysis, although drawing the blood can be done during routine laboratory investigations.
They undergo 1 extra bone marrow aspirate and biopsy after two years for final evaluation.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

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

Inclusion criteria

* First diagnosis of transformation of lymphoma;* Histologically confirmed CD20 positive transformed B cell NHL lymphoma, according to the WHO classification 2008 , stage I-IV. ;* For consolidation with AuSCT after Z-BEAM: age 18-71 years old;* For single dose 90Y-ibritumomab tiuxetan: older than 70 years and 18-71 years but ineligible for autologous stem cell transplantation ;* WHO performance status of 0-2 (Appendix C);* Life expectancy of at least 3 months;* Induction treatment with R-CHOP or R-DHAP-VIM-DHAP;* CR defined as disappearance of all evidence of disease on PET-CT or PR defined as a reduction of tumor size of more than 50% and decreasing FDG-avidity on PET-CT after induction consisting of rituximab containing polychemotherapy. (see appendix A);* Absense of PET positive bulky disease after induction treatment defined as a lesion larger than 5 cm;* Less than 25% bone marrow involvement at the end of induction treatment (measurement in a representative bone marrow biopsy) ;* For AuSCT: Stem cells harvested: a minimum of 2 x 106 CD34+ cells/kg ;* For single dose 90Y-ibritumomab tiuxetan: ANC * 1.5 x 109/l and platelets * 100 x 109/l;* Written informed consent obtained according to local guidelines

Exclusion criteria

* Known hypersensitivity to murine antibodies or proteins;* Presence of any other active neoplasms or history of prior malignancy, except non-melanoma skin tumours or stage 0 (in situ) cervical carcinoma during the past 5 years;* Patients with abnormal liver function (total bilirubin > 2.0 x ULN);* Presence of CNS involvement ;* Patients with pleural effusion or ascites after induction therapy;* Patients who have received G-CSF or GM-CSF therapy within two weeks prior to study enrollment;* Patients who have received biologic therapy, immunotherapy, R-CHOP(-like) chemotherapy, surgery, or an investigational drugs less than 4 weeks prior to first day of study treatment (i.e. 90Yttrium ibritumomab tiuxetan + AuSCT) or who have not recovered from the toxic effects of such therapy;* Female patients who are pregnant or breast feeding, or adults of reproductive potential not employing an effective

method of birth control during study treatment and for at least 12 months thereafter;* Known diagnosis of HIV infection;* Patients unwilling or unable to comply with the protocol;Additional exclusion criteria for autologous SCT:;* Unfit for high dose chemotherapy followed by autologous stem cell transplantation due to physical or mental condition.;Additional exclusion criteria for single dose 90Y-ibritumomab tiuxetan;* Patients who have received prior external beam radiotherapy to > 25% of active bone marrow (involved field or regional).

Study design

Design

Study phase:	2
Study type:	Observational invasive
Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	01-07-2010
Enrollment:	58
Type:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	Zevalin
Generic name:	90Y ibritumomab tiuxetan

Ethics review

Approved WMO

Date:	09-04-2010
Application type:	First submission
Review commission:	METC Amsterdam UMC

Approved WMO Date:	17-05-2010
Application type:	First submission
Review commission:	METC Amsterdam UMC
Approved WMO Date:	15-05-2012
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	30-05-2012
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	26-08-2014
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	29-08-2014
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	EUCTR2010-019659-22-NL

Register	ID
CCMO	NL31654.029.10