A randomized, double-blind, active control, multicenter study to evaluate the efficacy at week 52 of subcutaneously administered secukinumab monotherapy compared with subcutaneously administered adalimumab monotherapy in patients with active psoriatic arthritis

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

Summary

ID

NL-OMON45596

Source
ToetsingOnline

Brief title
CAIN457F2366 (EXCEED 1)

Condition

- Joint disorders
- Epidermal and dermal conditions

Synonym
psoriatic arthritis

Research involving
Human

Sponsors and support

Primary sponsor: Novartis
Source(s) of monetary or material Support: Novartis Pharma B.V. (sponsor/verrichter van het onderzoek)

Intervention

Keyword: adalimumab, psoriatic arthritis, secukinumab

Outcome measures

Primary outcome

To demonstrate that the efficacy of secukinumab monotherapy 300 mg s.c.at Week 52 is superior to adalimumab monotherapy (40 mg s.c.) based on the proportion of subjects achieving an American College of Rheumatology 20 (ACR20) response.

Secondary outcome

To demonstrate that:

1. Secukinumab monotherapy (300 mg s.c.) is superior to adalimumab monotherapy (40 mg s.c.) at Week 52, based on the proportion of subjects achieving PASI90 response.

2. Secukinumab monotherapy (300 mg s.c.) is superior to adalimumab monotherapy (40 mg s.c.) at Week 52, based on the proportion of subjects achieving an ACR50 response.

3. The improvement (change) from baseline on secukinumab monotherapy (300 mg s.c.) is superior to adalimumab monotherapy (40 mg s.c.) at Week 52, for the Health Assessment Questionnaire * Disability Index (HAQ-DI©) score.

4. Secukinumab monotherapy (300 mg s.c.) is superior to adalimumab monotherapy (40 mg s.c.) at Week 52, based on the proportion of subjects achieving the resolution of enthesitis.

An additional secondary objective is to evaluate the safety and tolerability of secukinumab monotherapy (300 mg s.c.) compared with adalimumab monotherapy (40 mg s.c.) as assessed by vital signs, clinical laboratory values, and adverse events monitoring.

Study description

Background summary

In PsA, more than half of the patients take biological DMARDs as a monotherapy with very good control of their disease. Similar outcome in response has been demonstrated with or without use of cDMARDs (including methotrexate). Thus no biologics have shown positive synergistic effects on any clinical outcomes and this is reflected in all their labels. Treatment with biologic monotherapy in PsA is therefore clinically justifiable and avoids unwarranted exposure to the potential toxicity of cDMARDs.
The randomized, double-blind, active control, multicenter, parallelgroup design used in this study is in alignment with phase III trials of other biologics in this disease area and also in compliance with the European Medicines Agency (EMA) guidelines on PsA trials.

Study objective

The purpose of this study is to compare the safety and efficacy of secukinumab monotherapy and adalimumab monotherapy in patients with active psoriatic arthritis (PsA) who are naïve to biologic therapy for PsA or PsO and are intolerant or having inadequate response to conventional disease-modifying antirheumatic drug (cDMARDs).
Efficacy will be evaluated based on multiple indices of improvement in signs and symptoms, physical function, quality of life and patient reported outcomes.

Study design

This is a randomized, double-blind, active control, multicenter, parallel-group trial evaluating secukinumab monotherapy and adalimumab monotherapy in

approximately 850 subjects with active PsA. A screening period of up to 8 weeks before randomization will assess subject eligibility and be followed by a treatment period of 52 weeks. Efficacy assessments will occur through Study Week 52 and adverse event collection for safety will occur for an additional 16 weeks thereafter, at week 60 and 68. Total study duration is max 76 weeks.
At Baseline, subjects whose eligibility is confirmed will be randomized to either Group 1 (secukinumab 300 mg as 2 x 150 mg s.c. injections), or Group 2 (adalimumab 40 mg as 1 s.c. injection) with approximately 425 subjects/group. In order to maintain the blind, both groups will receive 1 or 2 placebo s.c. injections to keep consistency in the number of injections at each dosing visit. Secukinumab is available in 150 mg/1.0 mL pre-filled syringes (PFS) and adalimumab is available in 0.4 mL PFS. Placebo (1.0 and 0.5 mL, PFS) is also available.
Group 1 - Secukinumab 300 mg s.c.
Secukinumab 300 mg (2 x 1 mL PFS) will be administered at Baseline, Weeks 1, 2, 3 and 4, followed by dosing every 4 weeks until Week 48. In addition, all Group 1 subjects will receive placebo (1 x 1mL PFS) at given visits in order to maintain the blind.
Group 2 - Adalimumab 40 mg s.c.
Adalimumab 40 mg (1 x 0.4 mL PFS) will be administered at Baseline followed by dosing every 2 weeks until Week 50. In addition, all Group 2 subjects will receive placebo (1 x 0.5mL or 2 x 0.5mL PFS) at given visits in order to maintain the blind.

Intervention

Investigational treatment:
- Secukinumab 150 mg, liquid formulation in a PFS (2 x 1 mL PFS for 300 mg dose)

Reference treatment:
- Adalimumab 40 mg, liquid formulation in a 0.4 mL PFS
- Placebo, liquid formulation in a 1 and 0.5 mL PFS

Study burden and risks

Adverse Events of Cosentyx or Humira
15x Physical examination (no internal investigations)
1x ECG
1x Chest X-ray
16x tender and swollen joint count
15x VAS scores for pain
15x VAS scores for disease activity (global and disease specific)
15x questionnaires (HAQ-DI, PAP, PGAD, PPAGDA)
8x questionnaires (DLQI, EQ-5D, FACIT, SF-36, WPAI-GH)
33 study visits (in case no home administration is performed) of 1 - 3 hrs, depending on the amount of time needed to complete the questionnaires

17x blood draws (pain, bruising, a small blood cloth, infection at injection site)
44 onderhuidse injecties met Cosentyx of Humira en placebo (pain, bleeding, swelling, infection)
1x TB test (pain, swelling, hardness)

Contacts

Public
Novartis

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NL
Scientific
Novartis

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

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

Inclusion criteria

Diagnosis of PsA classified by CASPAR; Rheumatoid factor and anti-CCP antibodies negative; diagnosis of active plaque psoriasis, with at least one psoriatic plaque of *2cm diameter or nail changes consistent with psoriasis or documented history of plaque psoriasis; inadequate control of symptoms with NSAIDs; inadequate control of symptoms with a conventional DMARD.;Other protocol-defined inclusion criteria may apply. See protocol for more details.

Exclusion criteria

Pregnant or nursing women, evidence of ongoing infectious or malignant process; previous exposure to any biologic drug for Psoriatic Arthritis or Psoriasis; subjects taking high potency opioid analgesics; ongoing use of prohibited psoriasis treatments / medications; previous treatment with any cell-depleting therapies including but not limited to anti-CD20, investigational agents;Other protocol-defined exclusion criteria may apply. See protocol for more details.

Study design

Design

Study phase:	3
Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Active
Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	03-05-2017
Enrollment:	15
Type:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	Cosentyx
Generic name:	secukinumab
Registration:	Yes - NL intended use
Product type:	Medicine
Brand name:	Humira

Generic name:	adalimumab
Registration:	Yes - NL intended use

Ethics review

Approved WMO Date:	19-12-2016
Application type:	First submission
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	20-01-2017
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	16-03-2017
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	21-03-2017
Application type:	First submission
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	25-09-2017
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	19-10-2017
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	30-04-2018

Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	17-09-2019
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)

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	EUCTR2015-004477-32-NL
ClinicalTrials.gov	NCT02745080
CCMO	NL59674.044.16