Food-effect study of weekly administration of (bi-)daily Oral Docetaxel (ModraDoc006) in combination with ritonavir

Published: 15-06-2016
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To determine the effect of a high-fat meal on the exposure to docetaxel given as ModraDoc006 tablets in combination with ritonavir in patients with cancer.

Ethical review	Approved WMO
Status	Completed
Health condition type	Miscellaneous and site unspecified neoplasms malignant and unspecified
Study type	Interventional

Summary

ID

NL-OMON46116

Source
ToetsingOnline

Brief title
Food effect oral docetaxel (ModraDoc006)

Condition

- Miscellaneous and site unspecified neoplasms malignant and unspecified

Synonym
cancer

Research involving
Human

Sponsors and support

Primary sponsor: Modra pharmaceuticals BV

Source(s) of monetary or material Support: Modra Pharmaceuticals BV

Intervention

Keyword: Cancer, Docetaxel, Food-effect

Outcome measures

Primary outcome

To determine the effect of a high-fat meal on the exposure to docetaxel given

as ModraDoc006 tablets in combination with ritonavir in patients with cancer.

Secondary outcome

- To assess the safety of weekly ModraDoc006/ritonavir treatment

- To establish the effect of functional genetic polymorphisms on the

pharmacokinetics of oral docetaxel and ritonavir.

Study description

Background summary

In two phase I studies the combination of oral ModraDoc006 (docetaxel) in combination with ritonavir is investigated. In these trials the maximum tolerated dose was determined. The anti-tumor activity and exposure to docetaxel warranted further development of the compound ModraDoc006. Since further development is planned there is a need for a food-effect study to investigate the effect food administration has on the exposure to docetaxel. This study is designed as a worst-case scenario in which a high fat meal is co-administered with oral docetaxel / ritonavir. There is a known food-effect for docetaxel therefore an effect on the exposure to docetaxel is expected.

Study objective

To determine the effect of a high-fat meal on the exposure to docetaxel given as ModraDoc006 tablets in combination with ritonavir in patients with cancer.

Study design

Open label, cross-over, food-effect study of ModraDoc006/ritonavir.

Intervention

Patients will be treated with weekly oral docetaxel and ritonavir for two weeks. Patients will be asked to come after a fasting period. On one day the will need to consume a high-fat breakfast. On the other day the will remain fasted until several hours after treatment.
During this period an intravenous catheter will be placed for pharmcokinetics.

Study burden and risks

Patients are at risk for docetaxel and ritonavir related toxicity.
Patients will be admitted twice for one night for collection of pharmacokinetic samples. These samples will be drawn from an intravenous catheter, which will be placed twice. Patients will be asked to come to the hospital twice for additional pharmacokinetic sampling.
Patients are at risk of side-effects of the blood draw.

Contacts

Public
Modra pharmaceuticals BV

Louwesweg 6
Amsterdam 1066 EC
NL
Scientific
Modra pharmaceuticals BV

Louwesweg 6
Amsterdam 1066 EC
NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

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

Inclusion criteria

1. Histological or cytological proof of cancer;2. Patients for whom no standard therapy of proven benefit exists ;3. Patients who might benefit from treatment with docetaxel, e.g. advanced breast, gastric, esophagus, bladder, ovarian cancer and non-small cell lung cancer, head and neck cancers, prostate cancer and carcinoma of unknown primary site. ;4. Age 18 years or older;5. Able and willing to give written informed consent;6. Able and willing to undergo blood sampling for pharmacokinetics;7. Life expectancy more than 3 months;8. Minimal acceptable safety laboratory values;8.1. Hb >= 6.0 mmol/l;8.2. ANC >= 1.5 x 109 /L;8.3. Platelet count >= 100 x 109 /L;8.4. Serum bilirubin >= 1.5 x ULN, ALAT and ASAT >= 2.5 x ULN (or >= 5 x ULN in case of presence of liver metastases);8.5. Serum creatinine < 1.5 x ULN or creatinine clearance >= 50 ml/min (by Cockcroft-Gault formula).;9. WHO performance status of >= 1 ;10. No radio- or chemotherapy within the last 4 weeks prior to first dose of study medication (palliative radiation on limited field for pain reduction is allowed);11. Able and willing to swallow oral medication.

Exclusion criteria

1. Patients with known alcoholism, drug addiction and/or psychotic disorders in the medical history that are not suitable for adequate follow up;2. Women who are pregnant or breast-feeding. ;3. Men and women, who do not agree to use two reliable contraceptive methods throughout the study (adequate contraceptive methods are: use of oral, injected or implanted hormonal methods of contraception, placement of an intrauterine device (IUD) or intrauterine system (IUS), barrier methods of contraception: condom, diaphragm with spermicide, male sterilization, true abstinence). ;4. Concomitant use of MDR and CYP3A modulating drugs such as Ca¬¬+-entry blockers (verapamil, dihydropyridines), cyclosporine, quinidine, quinine, tamoxifen, megestrol and grapefruit juice, concomitant use of HIV medications; other protease inhibitors, (non) nucleoside analogs, St. Johns wort or macrolide antibiotics like erythromycin and clarithromycin. ;5. Uncontrolled infectious disease or known HIV-1 or HIV-2 infection;6. Unresolved (>grade 1) toxicities of previous chemotherapy, excluding alopecia;7. Bowel obstructions or motility disorders or previous surgery that may influence the absorption of drugs;8. Neurologic disease that may render a patient at increased risk for peripheral or central neurotoxicity;9. Pre-existing neuropathy greater than CTC grade 1;10. Patients with suspected or known brain metastases, unless they have been adequately treated and are asymptomatic without use of corticosteroids (for at least 1 month) ;11. Evidence of any other disease, neurological or metabolic dysfunction, physical examination finding or laboratory finding giving reasonable suspicion of a disease or condition that contraindicates the use of an investigational drug or puts the patient at high risk for treatment-related complications.

Study design

Design

Study type:	Interventional
Intervention model:	Crossover
Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Completed
Start date (anticipated):	29-05-2017
Enrollment:	16
Type:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	-
Generic name:	ModraDoc006 (Docetaxel)
Product type:	Medicine
Brand name:	Norvir
Generic name:	Ritonavir
Registration:	Yes - NL outside intended use

Ethics review

Approved WMO Date:	15-06-2016
Application type:	First submission
Review commission:	PTC Stichting het Nederlands Kanker Instituut - Antoni van Leeuwenhoekziekenhuis (Amsterdam)
Approved WMO Date:	01-02-2017

Application type:	First submission
Review commission:	PTC Stichting het Nederlands Kanker Instituut - Antoni van Leeuwenhoekziekenhuis (Amsterdam)
Approved WMO Date:	14-03-2017
Application type:	Amendment
Review commission:	PTC Stichting het Nederlands Kanker Instituut - Antoni van Leeuwenhoekziekenhuis (Amsterdam)
Approved WMO Date:	28-04-2017
Application type:	Amendment
Review commission:	PTC Stichting het Nederlands Kanker Instituut - Antoni van Leeuwenhoekziekenhuis (Amsterdam)

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	EUCTR2016-001234-10-NL
CCMO	NL57240.031.16

Study results

Date completed:	03-07-2018
Results posted:	25-03-2021

First publication

18-10-2020