A Phase 2, Multicenter, Randomized, Placebo-Controlled, Double-Blind, Proof-of-Concept Study to Evaluate Guselkumab for the Treatment of Subjects with Moderate to Severe Hidradenitis Suppurativa

Published: 27-08-2018
Last updated: 25-03-2025

Primary ObjectiveThe primary objective of this study is to evaluate the initial efficacy, safety, and tolerability of guselkumab in adult participants with moderate to severe hidradenitis suppurativa (HS).Secondary ObjectivesThe secondary objectives...

Ethical review	Approved WMO
Status	Completed
Health condition type	Epidermal and dermal conditions
Study type	Interventional

Summary

ID

NL-OMON46316

Source
ToetsingOnline

Brief title
NOVA

Condition

- Epidermal and dermal conditions

Synonym
chronical pain, depression

Research involving

Human

Sponsors and support

Primary sponsor: Janssen-Cilag
Source(s) of monetary or material Support: Janssen

Intervention

Keyword: Guselkumab, Moderate to severe hidradenitis suppurativa, Proof-of-concept study

Outcome measures

Primary outcome

The proportion of participants achieving Hidradenitis Suppurativa Clinical

Response (HiSCR) at Week 16

Secondary outcome

Major Secondary Endpoints

* The change from baseline in total abscess and inflammatory nodule (AN) count

at Week 16.

* The change from baseline in Dermatology Life Quality Index (DLQI) score at

Week 16.

* The change from baseline in HS-related pain in the past 24 hours based on

Hidradenitis Suppurativa Symptom Diary (HSSD) at Week 16.

Other Secondary Endpoints

* The proportion of participants achieving at least 50%, 75%, 90%, and 100%

reduction in total AN count at Week 16.

* The proportion of participants achieving an AN count of 1 and 2,

respectively, at Week 16.

* The proportion of participants achieving complete elimination of abscesses at Week 16 among those participants with abscesses at baseline.
* The change from baseline in the number of abscesses at Week 16.
* The change from baseline in HSSD symptom scale score (other than pain the past 24 hours) at Week 16.
* The change from baseline in HSSD total symptom score at Week 16.
* The proportion of participants achieving complete elimination of draining fistulas at Week 16 among those participants with draining fistulas at baseline.
* The change from baseline in number of draining fistulas at Week 16.
* The proportion of participants achieving complete elimination of inflammatory nodules at Week 16 among those participants with inflammatory nodules at baseline.
* The change from baseline in number of inflammatory nodules at Week 16.
* The proportion of participants with HS-IGA (investigator*s global assessment) score of inactive (0), almost inactive (1), or mild (2) and with at least 2-grade improvement relative to baseline at Week 16.
* The proportion of participants with HS-IGA score of inactive (0) or almost inactive (1) at Week 16 among participants with HS-IGA score of moderate (3) or severe (4) at baseline.
* The change from baseline in Hospital Anxiety and Depression Scale (HADS) scores at Week 16.
* The change from baseline in high-sensitivity C-reactive protein (hs-CRP) at Week 16.
* The distribution of the Patient Global Impression of Change (PGIC) of HS

severity at Week 16.

Study description

Background summary

Guselkumab (CNTO 1959) is a fully human immunoglobulin G1 lambda (IgG1*) monoclonal antibody that binds to the p19 protein subunit of human interleukin (IL)-23 with high specificity and affinity. The binding of guselkumab to the IL-23p19 subunit blocks the binding of extracellular IL-23 to the cell surface IL-23 receptor, inhibiting IL-23-specific intracellular signaling and subsequent activation and cytokine production. Guselkumab has been studied in Phase 1, Phase 2, and ongoing Phase 3 studies for the treatment of moderate to severe plaque psoriasis in adults. Guselkumab has been approved for the treatment of adults with moderate to severe plaque psoriasis in the United States, Europe, Canada, and several other countries. Guselkumab is also being studied globally for the treatment of psoriatic arthritis (PsA), Crohn*s disease, and pediatric psoriasis.

Study objective

Primary Objective
The primary objective of this study is to evaluate the initial efficacy, safety, and tolerability of guselkumab in adult participants with moderate to severe hidradenitis suppurativa (HS).

Secondary Objectives
The secondary objectives of this study are:
* To evaluate the efficacy of guselkumab in adult participants with moderate to severe HS during the maintenance phase.
* To evaluate the effect of guselkumab on the dermatologic health-related quality of life in adult participants with moderate to severe HS.
* To evaluate the pharmacokinetics (PK), immunogenicity, and pharmacodynamics (PD) of guselkumab therapy in adult participants with moderate to severe HS.

Study design

This is a Phase 2, multicenter, randomized, placebo-controlled, double-blind study evaluating the efficacy, safety, PK, and immunogenicity of subcutaneous (SC) and intravenous (IV) administered guselkumab for the treatment of moderate to severe HS in adult participants. The participant population will comprise men and women who have had moderate to severe HS for at least 1 year. Two database locks (DBL) are planned for this study at Week 16 and Week 48, respectively. An interim analysis will be conducted when a subset of

participants have completed the Week 16 visit.
An independent Data Monitoring Committee (DMC) will be commissioned for this study for safety evaluation.

Intervention

All participants will be randomized in a 1:1:1 ratio to 1 of 3 treatment groups as described below:

Group 1: Guselkumab Regimen 1 (1,200 mg IV q4w x 3 * 200 mg SC q4w)
Participants will receive guselkumab 1,200 mg IV at Week 0, Week 4, and Week 8 (ie, a total of 3 IV guselkumab doses and 3 SC placebo doses). At Week 12, participants will continue treatment with guselkumab 200 mg SC q4w through Week 36.

Group 2: Guselkumab Regimen 2 (200 mg SC q4w x 4 * 200 mg SC q4w)
Participants will receive guselkumab 200 mg SC at Week 0, Week 4, and Week 8 (ie, a total of 3 SC guselkumab doses and 3 IV placebo doses). At Week 12, participants will continue treatment with guselkumab 200 mg SC q4w through Week 36.

Group 3: Placebo
Participants will receive placebo IV and SC at Week 0, Week 4, and Week 8 (ie, a total of 3 IV and 3 SC placebo doses) and an additional SC placebo dose at Week 12. At Week 16, participants will be rerandomized at a 1:1 ratio to either guselkumab 200 mg SC q4w through week 36 or guselkumab 100 mg SC at Weeks 16, 20, 28, 36 and placebo at Weeks 24 and 32.
A screening period will take approximately 4 weeks. All participants will enter safety follow-up after Week 36 through Week 48.

Study burden and risks

Side effects (application) study medication, possible side effects/discomforts of the evaluations in the study, unknown risks.

An independent DMC will be responsible for monitoring safety data on an ongoing basis to ensure the continuing safety of the participants enrolled in this study. The committee will meet regularly to review unblinded safety data. After the review, the DMC will make recommendations to the sponsor regarding the conduct of the study.

Any clinically relevant changes occurring during the study must be recorded in the AE section of the eCRF.
Any clinically significant abnormalities persisting at the end of the study or early withdrawal will be followed by the investigator until resolution or until a clinically stable endpoint is reached.

Contacts

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NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

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

Inclusion criteria

-Be a man or a woman at least 18 years of age (or the legal age of consent in the jurisdiction in which the study is taking place).
-Have moderate to severe HS for at least 1 year (365 days) prior to the baseline visit.
-Have HS lesions present in at least 2 distinct anatomic areas.
-Had an inadequate response to an adequate course of appropriate oral antibiotics for treatment of HS.
-Have stable HS for at least 1 month (28 days) prior to the screening visit.
-Have a total abscess and inflammatory nodule (AN) count of *3 at the screening and baseline visit.
-Must agree to daily use of one of the following over-the-counter treatments to the body areas affected with HS lesions: either soap and water, or a topical antiseptic wash containing chlorhexidine gluconate, triclosan, or benzoyl peroxide, or a dilute bleach bath.

-Before randomization, a woman must be either:
a. not of childbearing potential;
b. of childbearing potential and practicing a highly effective method of birth control.
-A woman of childbearing potential must have a negative urine pregnancy test at screening and at Week 0 prior to administration of study intervention.
-A woman must agree not to donate eggs for the purposes of assisted reproduction during the study and for at least 12 weeks after receiving the last administration of study intervention.
-A man who is sexually active with a woman of childbearing potential and who has not had a vasectomy must agree to use a barrier method of birth control.
-Are considered eligible according to the following TB screening criteria:
a. have no history of latent or active TB before screening;
b. have no signs or symptoms suggestive of active TB upon medical history and/or physical examination;
c. have had no recent close contact with a person with active TB or, if there has been such contact, will be referred to a physician specializing in TB to undergo additional evaluation and, if warranted, receive appropriate treatment for latent TB before the first administration of study intervention;
d. within 2 months before the first administration of study intervention, have a negative QuantiFERON®-TB Gold test result, or have a newly identified positive QuantiFERON®-TB test result in which active TB has been ruled out and for which appropriate treatment for latent TB has been initiated before the first administration of study intervention;
e. have a chest radiograph (both posterior-anterior and lateral views, or per country regulations where applicable), taken within 3 months before the first administration of study intervention and read by a qualified radiologist, with no evidence of current, active TB or old, inactive TB.
-Agree not to receive a live virus or live bacterial vaccination during the study, or within 12 weeks after the last administration of study intervention.
-Agree not to receive a BCG vaccination during the study, or within 12 months after the last administration of study intervention.
-Have screening laboratory test results within the following parameters:
a. Hemoglobin *10 g/dL
b. White blood cells *3.5 x 103/µL
c. Neutrophils *1.5 x 103/µL
d. Platelets *100 x 103/µL
e. Serum creatinine *1.5 mg/dL
f. Aspartate aminotransferase *2 × upper limit of normal (ULN)
g. Alanine aminotransferase *2 × ULN
h. Alkaline phosphatase *2 × ULN
-Be willing and able to adhere to the prohibitions and restrictions specified in this protocol.
-Must sign an informed consent form (ICF) indicating that he or she understands the purpose of and procedures required for the study, and is willing to participate in the study.

Exclusion criteria

-Has previously received guselkumab.
-Any other active skin disease or condition that could have interfered with assessment of HS.
-Has a draining fistula count of >20 at the baseline visit.
-Receipt of immunomodulatory biologic therapies (eg monoclonal antibodies) within 3 months or 5 half-lives prior to the baseline visit, whichever is longer.
-Receipt of any oral antibiotic treatment for HS or inflammatory disorders within 4 weeks prior to the baseline visit.
-Receipt of systemic non-biologic therapies for the treatment of HS <4 weeks prior to the baseline visit.
-Has received any therapeutic agent directly targeted to IL-17 or IL-23 within 6 months of the first administration of study intervention (including but not limited to ustekinumab, tildrakizumab, risankizumab, secukinumab, ixekizumab, or brodalumab).
-Has received natalizumab, belimumab, or agents that modulate B cells or T cells (eg, rituximab, alemtuzumab, abatacept, or visilizumab) within 12 months of the first administration of study intervention.
-Has received any systemic immunosuppressants (eg, methotrexate, azathioprine, cyclosporine, 6-thioguanine, mercaptopurine, mycophenolate mofetil, tacrolimus) or anakinra within 4 weeks of the first administration of study intervention.
-Receipt of prescription topical therapies for the treatment of HS within 14 days prior to the baseline visit.
-Has unstable cardiovascular disease, defined as a recent clinical deterioration in the last 3 months or a cardiac hospitalization within the last 3 months.
-Currently has a malignancy or has a history of malignancy within 5 years before screening.
-Has or has had a serious infection (eg, sepsis, pneumonia, or pyelonephritis), or has been hospitalized or received IV antibiotics for an infection during the 2 months before screening.;For a complete list of all exclusion criteria, please refer to section 5.2 of the protocol on page 26-30.

Study design

Design

Study phase:	2
Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Placebo
Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Completed
Start date (anticipated):	29-11-2018
Enrollment:	12
Type:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	Tremfya
Generic name:	guselkumab
Registration:	Yes - NL outside intended use

Ethics review

Approved WMO Date:	27-08-2018
Application type:	First submission
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	29-11-2018
Application type:	First submission
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	04-03-2019
Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	26-06-2019
Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO	

Date:	11-10-2019
Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	17-12-2019
Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	11-02-2020
Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)

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	EUCTR2018-001176-38-NL
ClinicalTrials.gov	NCT03628924
CCMO	NL66801.056.18

Study results

Date completed:	13-05-2020

Results posted: 20-05-2021

URL result
URL
Type
int
Naam
M2.2 Samenvatting voor de leek
URL

Internal documents
File