A Phase 3, Multicenter, Randomized, Double-Blind, Parallel, Placebo-Controlled Induction Study of Mirikizumab in Conventional-Failed and Biologic-Failed Patients with Moderately to Severely Active Ulcerative Colitis

Published: 14-05-2018 Last updated: 11-04-2024

To test the hypothesis that mirikizumab is superior to placebo in inducing clinical remission at Week 12 in patients with moderately to severely active ulcerative colitis (UC)

Ethical review Approved WMO **Status** Recruitment stopped

Health condition type Gastrointestinal inflammatory conditions

Study type Interventional

Summary

ID

NL-OMON46510

Source

ToetsingOnline

Brief title

LUCENT 1 - I6T-MC-AMAN

Condition

Gastrointestinal inflammatory conditions

Synonym

Inflamatory bowel, Ulcerative Colitis

Research involving

Human

Sponsors and support

Primary sponsor: Eli Lilly

Source(s) of monetary or material Support: pharmaceutical industry

Intervention

Keyword: Mirikizumab, Treatment failed, Ulcerative Colitis

Outcome measures

Primary outcome

The primary endpoint is clinical remission at Week 12 (mirikizumab versus placebo). Clinical remission is based on the MMS and is defined in protocol.

Secondary outcome

The MMS and the composite SF and RB score, derived from assessment of the Mayo score, will be used to determine the major secondary endpoints. The major secondary endpoints are as follows:

- Clinical response at Week 12.
- Endoscopic remission at Week 12.
- Symptomatic remission at Week 4.
- Symptomatic remission at Week 12.
- Clinical response at Week 12 in the biologic-failed population

Study description

Background summary

Ulcerative colitis is a chronic disease of unknown etiology that is characterized by inflammation of the rectum and colon. Symptoms include diarrhea, rectal bleeding (RB), urgency, and tenesmus (a feeling of incomplete evacuation of the rectum after defecation). Ulcerative colitis has a relapsing* remitting course, meaning that many patients have intermittent disease flares

that are interspersed with periods of remission. Treatment goals in UC include induction of remission (typically within a 6 to 12 week time frame) and maintenance of remission in the longer term (assessed over 52 weeks of continuous treatment in clinical trials). In both clinical practice and in clinical trials, clinical response and clinical remission are assessed by a combination of endoscopy (improvement in the endoscopic appearance of the mucosa and healing of ulcers) and patient-reported outcomes, including a reduction in stool frequency (SF) and a resolution of RB. Control of intestinal inflammation in UC is also associated with a reduction in the risk of hospitalization, colectomy, and in the longer term, UCassociated dysplasia and colorectal cancer.

Study objective

To test the hypothesis that mirikizumab is superior to placebo in inducing clinical remission at Week 12 in patients with moderately to severely active ulcerative colitis (UC)

Study design

Study AMAN is a multicenter, randomized, double-blind, parallel-arm, placebo-controlled study designed to evaluate the safety and efficacy of mirikizumab, compared with placebo, over a 12-week induction period. Approximately 2230 patients will be screened to achieve approximately 1160 randomized patients.

Intervention

This study involves a comparison of IV administration of mirikizumab versus placebo during a 12-week induction period. Mirikizumab or Placebo is given as an intravenous infusion (Weeks 0, 4, 8).

Study burden and risks

At the time of this benefit/risk assessment, evaluation of unblinded safety data from the completed or ongoing clinical studies, including the unblinded period of the Study AMAC, which tests mirikizumab IV every 4 weeks (Q4W), have not revealed any dose-related safety or tolerability concerns. In addition, evaluation of blinded safety data in ongoing studies in psoriasis, UC and Crohn*s disease (CD) with mirikizumab SC Q4W administered up to 92 weeks, and IV Q4W for up to 52 weeks have not revealed safety or tolerability concerns. Across ongoing studies, immediate hypersensitivity reactions, including serious nonfatal anaphylaxis, have been reported at the onset or during IV infusion of mirikizumab. As noted in the IB, such reactions are considered by the sponsor to be related to mirikizumab and hence have been identified as adverse drug reactions (ADRs).

Consult the most current IB for information regarding ADRs and potential risks with mirikizumab.

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

- 1. Male or female patients *18 and *80 years of age at the time of initial screening
- 2. Diagnosis of UC for at least 3 months prior to baseline.
- 3. Confirmed diagnosis of moderately or severely active UC, as assessed by the modified Mayo score (MMS).
- 4. Demonstrated an inadequate response to, a loss of response to, or an intolerance to conventional or to biologic therapy for UC.
- 5. If female, must meet the contraception requirements.

Exclusion criteria

- 1. Patients with a current diagnosis of Crohn's disease or inflammatory bowel disease-unclassified (indeterminate colitis).
- 2. Patients with a previous colectomy.
- 3. Patients with current evidence of toxic megacolon.
- 4. Prior exposure to anti-IL12p40 antibodies (e.g. ustekinumab) or anti- IL-23p19 antibodies (e.g. risankizumab, brazikumab, guselkumab or tildrakizumab).

Study design

Design

Study phase: 3

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Double blinded (masking used)

Control: Placebo

Primary purpose: Treatment

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 19-02-2019

Enrollment: 12

Type: Actual

Medical products/devices used

Product type: Medicine

Brand name: Mirikizumab

Generic name: LY3074828

Ethics review

Approved WMO

Date: 14-05-2018

Application type: First submission

Review commission: METC Amsterdam UMC

Approved WMO

Date: 24-07-2018

Application type: First submission

Review commission: METC Amsterdam UMC

Approved WMO

Date: 25-10-2018

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 26-02-2019

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 01-03-2019

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 21-08-2019

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 15-10-2019

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 16-12-2019

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 05-03-2020

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 09-06-2020

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 EUCTR2017-003229-14-NL

CCMO NL65500.018.18