Proof-of-concept study of BI 655130 addon treatment in patients with mild-tomoderately active ulcerative colitis during TNF inhibitor therapy

Published: 28-03-2017 Last updated: 13-04-2024

see section 21 & 2.2This trial aims to prove the concept of induction of mucosal healing by BI 655130 add-ontherapy in patients with mild or moderate ulcerative colitis and persisting endoscopic activitydespite pre-existing TNFi treatment.This...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Gastrointestinal inflammatory conditions
Study type	Interventional

Summary

ID

NL-OMON47670

Source ToetsingOnline

Brief title

BI 655130 in patient with mild to moderate ulcerative colitis.

Condition

• Gastrointestinal inflammatory conditions

Synonym bowel inflammation, ulcerative colitis

Research involving

Human

Sponsors and support

Primary sponsor: Boehringer Ingelheim

Source(s) of monetary or material Support: de opdrachtgever Boehringer Ingelheim

Intervention

Keyword: bowel inflammation, TNF inhibitor, ulcerative colitis

Outcome measures

Primary outcome

see protocol 5.1.1.

Mucosal healing (MCS mESS *1) at Week 8

Secondary outcome

See protocol 5.1.2

Clinical remission based on Mayo score (total MCS *2 points, and all subscores

*1 point) at Week 8

Histological remission (Robarts (RHI) score *6) at Week 8

Clinical remission based on Mayo score (total MCS *2 points, and all subscores

*1 point)at Week 12

Mucosal healing (MCS mESS *1) at Week 12

Histological remission (Robarts (RHI) score *6) at Week 12

Modified clinical remission based on Mayo score (total modified MCS *2 and: RBS

=0,

Stool Frequency Score (SFS) =0 or 1 and drop *1 from baseline, AND mESS *1) at

Week 8

Modified clinical remission based on Mayo score (total modified MCS *2 and: RBS

Study description

Background summary

see section 1.1

Current biologic treatment of UC is associated with approximately one third of patients each

failing with primary or secondary non-response. In addition, treatment may be limited due to

safety and tolerability issues. Therefore, despite of therapeutic progress, there remains a

significant unmet medical need for new treatment options with an improved safety and

efficacy profile compared to the current therapeutic standard.

BI 655130 is a humanized antagonistic monoclonal IgG1 antibody blocking IL-36*, IL-36* and IL-36* binding to IL-36R. The IL-36 pathway has been associated with the pathogenesis of several inflammatory diseases including inflammatory bowel diseases, pustular psoriasis and psoriasis vulgaris. Emerging preclinical data suggest that IL-36R is a potential target for

the treatment of inflammatory bowel diseases, such as ulcerative colitis.

Study objective

see section 21 & 2.2

This trial aims to prove the concept of induction of mucosal healing by BI 655130 add-on

therapy in patients with mild or moderate ulcerative colitis and persisting endoscopic activity

despite pre-existing TNFi treatment.

This trial will explore safety and efficacy of a dose of BI 655130 that was modelled to

achieve the similar exposures as the highest exposures tested and found safe and tolerable in

preceding single and multiple dose studies in healthy subjects, as add-on to pre-existing TNFi

treatment. Secondary and further objectives include assessment of the

pharmacokinetic (PK) profile of BI 655130 and early exploration of specific biomarkers with potential usefulness to predict clinical efficacy or safety outcome or help understand BI 655130`s mode of action.

Study design

see section 3.1 & 3.2

This is a multi-centre, multi-national, randomised, parallel-group, multiple-doses, placebocontrolled,

double-blind Phase IIa study. Approximately 30 eligible patients with mild to moderate UC and persisting endoscopic activity will be randomised at 2:1 ratio, stratified

based on concurrent infliximab use, into treatment arm (approximately 20 patients) versus

placebo (approximately 10 patients).

Overall treatment duration is 12 weeks with additional 24 weeks follow-up. However, the timing of start of treatment (V2) during mid cycle of the TNFi dosing cycle, and primary endpoint assessment at Week 8 are driven by the notation of spontaneous disease activity fluctuations in patients in TNFi. This will reduce the confounding effect of such fluctuations. A secondary endpoint assessment after 12 weeks will help to understand the response kinetics

over a longer induction period.

Intervention

See section 4.1-4.4

treatment with BI655130 or placebo.

Study burden and risks

See section 2.3

Contacts

Public

Boehringer Ingelheim

Comeniusstraat 6 Alkmaar 1817 MS NL **Scientific** Boehringer Ingelheim

Comeniusstraat 6 Alkmaar 1817 MS NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

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

Inclusion criteria

- 18 * 60 years at screening and randomisation
- Diagnosis of ulcerative colitis *5 months prior to screening
- Receiving TNFi treatment with doses (i.e. dose and dosing interval) unchanged for *4 months prior to randomisation
- Mild or moderate disease activity, defined as total Mayo Score (MCS) (*10)
- Further criteria apply, refer to protocol section 3.3.2.

Exclusion criteria

- Prior use of more than one different TNF inhibitor or vedolizumab
- Extensive colonic resection
- Evidence of infection with C. difficile or other intestinal pathogen <28 days prior to screening
- Active or latent tuberculosis

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:	Recruitment stopped
Start date (anticipated):	09-08-2017
Enrollment:	6
Туре:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	unknown
Generic name:	unknown

Ethics review

Approved WMO	
Date:	28-03-2017
Application type:	First submission
Review commission:	METC Amsterdam UMC
Approved WMO Date:	21-06-2017

Application type:	First submission
Review commission:	METC Amsterdam UMC
Approved WMO	METC Amsterdam offe
Date:	10-08-2017
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	18-09-2017
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	02-11-2017
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	06-11-2017
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	18-01-2018
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	08-03-2018
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	04-06-2018
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	08-06-2018
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	27-08-2018

Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	12-09-2018
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	23-11-2018
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	21-12-2018
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	02-01-2019
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	11 04 2010
Date:	11-04-2019
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	10-05-2019
Application type:	Amendment
Review commission:	METC Amsterdam UMC
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Date:	21-05-2019
Application type:	Amendment
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Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	06-04-2020

Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	15-04-2020
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 EudraCT ClinicalTrials.gov CCMO ID EUCTR2016-004572-21-NL NCT03123120 NL60945.018.17