

A Phase I, randomized, double-blind, placebo-controlled, single-center study to evaluate the safety, tolerability, pharmacokinetics, including the effect of food, and pharmacodynamics of single and multiple ascending oral doses of GLPG3312, in adult, healthy subjects.

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To evaluate the safety and tolerability of single and multiple ascending oral doses of GLPG3312, in adult, healthy subjects, when given as IR or as MR formulation compared with placebo. To evaluate the PK of single and multiple ascending oral doses...

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

Summary

ID

NL-OMON48364

Source

ToetsingOnline

Brief title

GLPG3312-CL-101 SAD/MAD

Condition

- Other condition

Synonym

IBD, inflammatory diseases

Health condition

Ontstekingsziekten zoals IBD

Research involving

Human

Sponsors and support

Primary sponsor: Galapagos NV

Source(s) of monetary or material Support: Galapagos NV

Intervention

Keyword: GLPG3312, Inflammatory bowel diseases, Pharmacokinetics, Safety

Outcome measures

Primary outcome

Frequency and severity of treatment-emergent adverse events (TEAEs), treatment-emergent SAEs, and TEAEs leading to treatment discontinuations, in adult, healthy subjects.

Secondary outcome

Plasma, urine, and stool (Part 4 only) PK parameters of GLPG3312 in adult, healthy subjects: maximum observed plasma concentration (C_{max}), area under the plasma concentration-time curve (AUC), A_{efeces}, A_{Eurine}, t_{1/2}.

Ratio in extent and exposure following dosing of GLPG3312 as a MR formulation, under fed conditions (high-fat high-calorie) versus fasted conditions, in adult, healthy subjects.

Study description

Background summary

GLPG3312 is a first-in-class drug in clinical development for the treatment of inflammatory bowel diseases. In experimental IBD animal models a dose-dependent improvement has already been demonstrated in disease activity and symptoms related to inflammatory bowel. This research aims at an initial evaluation of the safety, pharmacokinetics and pharmacodynamics of GLPG3312 in humans.

Study objective

To evaluate the safety and tolerability of single and multiple ascending oral doses of GLPG3312, in adult, healthy subjects, when given as IR or as MR formulation compared with placebo.

To evaluate the PK of single and multiple ascending oral doses of GLPG3312, in adult, healthy subjects, when given as IR or as MR formulation.

To explore the food-effect (FE) on the PK of a single oral dose of GLPG3312, in adult, healthy subjects, when given as MR formulation

Study design

Part A: The actual study will consist of 1 period during which the subject will stay in the research center for 6 days (5 nights).

Part B: The actual study will consist of 1 period during which the subject will stay in the research center for 6 days (5 nights) / 7 days (7 nights for group K and any optional cohorts)

Part C: The actual study will consist of 2 periods during which the subject will stay in the research center for 8 days (7 nights).

Part D: The actual study will consist of 1 period during which the subject will stay in the research center for 22 days (21 nights).

GLPG3312 or placebo or placebo will be given as oral tablets with 240 milliliters (mL) of (tap) water.

Part 1: For safety reasons, initially 2 volunteers will receive the study compound in each group. One volunteer will receive GLPG3312, and 1 will receive placebo. After administration, the safety and tolerability of the study compound in these 2 volunteers will be closely monitored. If there are no concerns about the safety and tolerability 24 hours after administration, then the remaining 6 volunteers (5 will receive GLPG3312 and 1 will receive placebo) in each group will receive the study compound. The study medication will be administered double-blind.

Part 2: Whether the subject will receive GLPG3312 or placebo will be determined by chance. Per group, 6 volunteers will receive GLPG3312 and 2 volunteers will

receive placebo.

Part 3: The subject will receive the study compound once with a breakfast and once without breakfast. The order in which this will occur will be determined by chance. In one period the subject will receive a high-fat breakfast with a standard composition, which must be started exactly on time and must be finished within 20 minutes. The entire breakfast must be consumed. In the other period the subject will receive the study compound in a fasted condition. There will be a washout period of at least 7 days between administrations of the study compound.

Part 4: The subject will receive GLPG3312 or placebo via a dosing cup (containing mini-tablets) or as a capsule (also containing mini-tablets) by mouth. It will be given with 240 milliliters (ml) of (tap) water. This will depend on the on the tolerability and safety data that are collected during the study.

Intervention

GLPG3312 or placebo or placebo will be given as oral tablets with 240 milliliters of (tap) water.

See section 'Study Design' for more details about the intervention.

Study burden and risks

The study compound may cause side effects.

GLPG3312 was administered to humans for the first time in part 1 of this study.

After prolonged daily administration of GLPG3312 in rats and dogs, adverse reactions were observed during 6 weeks, which were not observed after 7 and 14 days of administration of a single dose.

Drawing blood and/or insertion of the indwelling cannula may be painful or cause some bruising.

In total, we will take a maximum of 240milliliters (mL) of blood from the subject. This amount does not cause any problems in adults.

To make a heart tracing, electrodes (small, plastic patches) will be pasted at specific locations on the subjects arms, chest and legs. Prolonged use of these electrodes can cause skin irritation (rash and itching).

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

- Male or female between 18 to 55 years of age (extremes included), on the date of signing the ICF. Females should be of non-childbearing potential as defined in the protocol.
- A body mass index (BMI) between 18 to 30 kg/m², inclusive.
- Subject must be able and willing to comply with restrictions on prior medication.
- Male subjects with female partners of childbearing potential must be willing to comply with contraceptive methods.

Exclusion criteria

- Positive serology for HBsAg, or HCV, or history of hepatitis from any cause with the exception of hepatitis A that was resolved at least 3 months prior to first dosing of the IMP.
- History of, or a current immunosuppressive condition (e.g. HIV infection).
- Having any illness judged by the investigator as clinically significant, in the 3 months prior to first dosing of the IMP.
- Any history, or current sign or symptom of a cardiovascular, renal, or metabolic bone disease or disease of bone remodeling, or any history of endocrine disease, including an abnormal laboratory result for prespecified clinical laboratory safety parameters related to these conditions.
- History of malignancy within the past 5 years prior to screening with the exception of excised and curatively treated nonmetastatic cell carcinoma of the skin or carcinoma in situ of cervix which is considered cured with minimal risk of recurrence.
- Significant blood loss (including blood donation >450 mL), or transfusion of any blood product within 12 weeks prior to screening.
- Treatment with any medication (including over-the-counter and/or prescription medication, dietary supplements, nutraceuticals, vitamins and/or herbal supplements) except occasional paracetamol (maximum dose of 2 g/day and a maximum of 10 g/ 2 weeks) in the last 2 weeks or 5 half-lives of the drug, whichever is longer, prior to the first dosing of the IMP.
- Active drug abuse or alcohol abuse (alcohol abuse defined as regular weekly intake of more than 14 units) within 2 years prior to first IMP administration.
- Active smoker and/or has used nicotine or nicotine-containing products within the past 6 months before the first IMP administration.
- Regular consumption of a large quantity of caffeinated coffee, tea (> 6 cups per day) or equivalent.
- Concurrent participation or participation in a drug, drug/device or biologic investigational research study within 12 weeks or 5 half-lives of the IMP, whichever is longer, prior to first dosing of the IMP.

Study design

Design

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): 15-01-2019
Enrollment: 100
Type: Actual

Ethics review

Approved WMO
Date: 10-12-2018
Application type: First submission
Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)

Approved WMO
Date: 13-12-2018
Application type: First submission
Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)

Approved WMO
Date: 11-03-2019
Application type: Amendment
Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)

Approved WMO
Date: 29-04-2019
Application type: Amendment
Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)

Approved WMO
Date: 24-05-2019
Application type: Amendment
Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)

Approved WMO
Date: 03-06-2019

Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	26-09-2019
Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	02-10-2019
Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	11-12-2019
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	EUCTR2018-001955-11-NL
ClinicalTrials.gov	NCT03800472
CCMO	NL68190.056.18