A Phase 3 Randomized, Placebo-Controlled, Double-Blind Study to Evaluate Upadacitinib in Adolescent and Adult Subjects with Moderate to Severe Atopic Dermatitis

Published: 13-09-2018
Last updated: 07-02-2025

This study has been transitioned to CTIS with ID 2022-502936-38-00 check the CTIS register for the current data. The objective of the study is to assess the efficacy and safety of upadacitinib for the treatment of adolescent and adult subjects with...

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

Summary

ID

NL-OMON48825

Source
ToetsingOnline

Brief title
M18-891

Condition

- Epidermal and dermal conditions

Synonym
atopic eczema, eczema

Research involving
Human

Sponsors and support

Primary sponsor: AbbVie B.V.
Source(s) of monetary or material Support: AbbVie

Intervention

Keyword: Adolescents, Adults, Atopic Dermatitis, Upadacitinib

Outcome measures

Primary outcome

• Proportion of subjects achieving validated IGA scale for Atopic Dermatitis (vIGA-AD) of 0 or 1 with at least two grades of reduction from baseline at Week 16;

• Proportion of subjects achieving improvement from baseline of at least 75% on Eczema Area Severity Index (EASI 75) at Week 16.

Secondary outcome

The following key secondary endpoints will be analyzed to demonstrate superiority of each upadacitinib dose vs. placebo, unless otherwise specified.

Key Secondary Endpoints for EU/EMA regulatory purposes are

· Proportion of subjects achieving an improvement (reduction) in worst pruritus Numerical Rating Scale (NRS) >= 4 from Baseline at Week 16 for subjects with pruritus NRS >= 4 at Baseline;

· Proportion of subjects achieving EASI 90 at Week 16.;

· Percent change from Baseline of worst pruritus NRS at Week 16;

· Percent change in EASI score from Baseline at Week 16;

· Proportion of subjects achieving an improvement (reduction) in worst pruritus NRS >= 4 from Baseline at Week 4 for subjects with pruritus NRS >= 4 at Baseline;

· Proportion of subjects achieving EASI 75 at Week 4;

· Proportion of subjects achieving EASI 75 at Week 2;

· Proportion of subjects achieving EASI 90 at Week 4;

· Proportion of subjects achieving an improvement (reduction) in worst pruritus NRS >= 4 from Baseline at Week 1 for subjects with pruritus NRS >= 4 at Baseline;

· Proportion of subjects achieving an improvement (reduction) in Patient Oriented Eczema Measure (POEM) >= 4 from Baseline at Week 16 for subjects with POEM >= 4 at Baseline

· Proportion of subjects age >= 16 years old at screening achieving an improvement (reduction) in Dermatology Life Quality Index (DLQI) >= 4 from Baseline at Week 16 for subjects with DLQI >= 4 at Baseline;

· Proportion of subjects achieving an improvement (reduction) in worst pruritus NRS >= 4 from Baseline at Day 2 for subjects with pruritus NRS >= 4 at Baseline (upadacitinib 30 mg vs. placebo);

· Proportion of subjects achieving an improvement (reduction) in worst pruritus NRS >= 4 from Baseline at Day 3 for subjects with pruritus NRS >= 4 at Baseline (upadacitinib 15 mg vs. placebo);

· Proportion of subjects achieving EASI 50 at Week 1;

· Proportion of subjects experiencing a flare, characterized as a clinically meaningful worsening in EASI, defined as an increase of EASI by >= 6.6 from Baseline, during double-blind treatment period (DB Period);

· Proportion of subjects age >= 16 years old at screening achieving DLQI score of 0 or 1 at Week 16;

· Percent change in Scoring Atopic Dermatitis (SCORAD) from Baseline at Week 16;

· Change from Baseline in Hospital Anxiety and Depression Scale (HADS) total score at Week 16;

· Proportion of subjects achieving a Hospital Anxiety and Depression Scale-anxiety (HADS-A) < 8 and Hospital Anxiety and Depression Scale-depression (HADS-D) < 8 at Week 16 among subjects with HADS-A >= 8 or HADS-D >= 8 at Baseline;

· Proportion of subjects achieving an improvement (reduction) in Atopic Dermatitis Impact Scale (ADerm-IS) sleep domain score >= minimal clinically important difference (MCID) from Baseline at Week 16 for subjects with ADerm-IS sleep domain score >= MCID at Baseline;

· Proportion of subjects achieving an improvement (reduction) in Atopic Dermatitis Symptom Scale (ADerm-SS) skin pain score >= MCID from Baseline at Week 16 for subjects with ADerm-SS skin pain score >= MCID at Baseline;

· Proportion of subjects achieving an improvement (reduction) in ADerm-SS 7-item total symptom score (TSS-7) >= MCID from Baseline at Week 16 for subjects with ADerm-SS TSS-7 >= MCID at Baseline; ADerm-SS TSS-7 is defined as the algebraic sum of the responses to items 1 - 7 of the ADerm-SS;

· Proportion of subjects achieving an improvement (reduction) in ADerm-IS emotional state domain score >= MCID from Baseline at Week 16 for subjects with ADerm-IS emotional state domain score >= MCID at Baseline;

· Proportion of subjects achieving an improvement (reduction) in ADerm-IS daily activities domain score >= MCID from Baseline at Week 16 for subjects with ADerm-IS daily activities domain score >= MCID at Baseline;

· Proportion of subjects achieving EASI 100 at Week 16;

· Proportion of subjects achieving an improvement (reduction) in ADerm-SS TSS-7 >= MCID from Baseline at Week 4 for subjects with ADerm-SS TSS-7 >= MCID at Baseline;

· Proportion of subjects achieving an improvement (reduction) in ADerm-IS sleep domain score >= MCID from Baseline at Week 4 for subjects with ADerm-IS sleep domain score >= MCID at Baseline;

· Proportion of subjects achieving a vIGA-AD of 0 with a reduction from Baseline of >= 2 points at Week 16.

Study description

Background summary

Evidence suggests that inhibition of Janus kinase (JAK)-mediated pathways may be a promising approach for the treatment of subjects with moderate to severe atopic dermatitis (AD). Current treatment paradigms for AD suggest that there is a need for additional treatment options for patients. More selective JAK inhibitors may decrease the risk for infection (including viral reactivation) and/or malignancy that are observed with pan JAK inhibitor or less selective JAK inhibitors. AbbVie is developing a small molecule inhibitor of JAK, upadacitinib, that may address the current needs for subjects with AD.

Study objective

This study has been transitioned to CTIS with ID 2022-502936-38-00 check the CTIS register for the current data.

The objective of the study is to assess the efficacy and safety of upadacitinib for the treatment of adolescent and adult subjects with moderate to severe AD who are candidates for systemic therapy.

Study design

This is a Phase-3, randomized, placebo-controlled, double-blind multicenter study. The study is comprised of a 35-day screening period, a 16 week double-blind treatment period, a blinded extension period of up to Week 136,

and a 30-day Follow-up Visit.

Intervention

Subjects will be randomized in a 1:1 ratio and will receive oral daily doses of upadacitinib (dose A or dose B). Subjects originally in the upadacitinib dose A and dose B group will continue their treatment into the blinded extension period up to the Week 136 visit.

Study burden and risks

There will be higher burden for subjects participating in this trial compared to their standard of care. Subject will be visiting the hospital more frequently. During these visits study procedures will be performed including blood sampling and questionnaires. Subject will also be tested for TB, significant heart conditions, pregnancy, HCV/HBV and HIV. Subjects will also complete a daily diary. During rest and sleep subjects will wear an activity recording bracelet. Women of Childbearing Potential should practice a method of birth control, during the study through at least 30 days after the last dose of study drug.

Subjects will either receive upadacitinib or placebo during the study. The most common side effects reported during previous studies of upadacitinib were headache, upper chest infection, common cold, diarrhea and cough. An elevation of an enzyme in the blood called creatine phosphokinase (CPK, a protein released mainly from muscle cells) was observed in treated patients. The majority of these patients did not have any muscle symptoms and did not stop study drug because of elevated CPK levels.

The hypothesis that upadacitinib should be effective in targeting inflammation associated with AD and the lack of approved systemic therapies for moderate to severe AD, especially for long-term use, indicate that there is an acceptable rationale to conduct this study. There may or may not be benefit for study subjects but there may be benefit for future patients with atopic dermatitis. The subject*s condition may get better, may worsen, or may stay unchanged.

Contacts

Public
AbbVie B.V.

Wegalaan 9
Hoofddorp 2132JD
NL

Scientific
AbbVie B.V.

Wegalaan 9
Hoofddorp 2132JD
NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adolescents (12-15 years)
Adolescents (16-17 years)
Adults (18-64 years)
Elderly (65 years and older)

Inclusion criteria

• Male or female subjects 12-75 years of age , • Active moderate to severe atopic dermatitis defined by EASI, IGA, BSA, and pruritus, • Candidate for systemic therapy or have recently required systemic therapy for atopic dermatitis

Exclusion criteria

• Prior exposure to any JAK inhibitor, • Unable or unwilling to discontinue current AD treatments prior to the study , • Requirement of prohibited medications during the study, • Other active skin diseases or skin infections requiring systemic treatment or would interfere with appropriate assessment of atopic dermatitis lesions, • Female subject who is pregnant, breastfeeding, or considering pregnancy during the study

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:	Recruiting
Start date (anticipated):	28-01-2019
Enrollment:	16
Type:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	upadacitinib
Generic name:	-

Ethics review

Approved WMO Date:	13-09-2018
Application type:	First submission
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	03-01-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO	

Date:	03-01-2019
Application type:	First submission
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	24-01-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	01-02-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	11-02-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	27-02-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	19-03-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	28-03-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	02-04-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	17-04-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO	

Date:	16-05-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	27-05-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	17-06-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	23-07-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	24-07-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	18-10-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	22-10-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	04-12-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	18-12-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO	

Date:	21-01-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	23-01-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	13-03-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	10-08-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	27-08-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	05-10-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	02-11-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	15-12-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	04-01-2021
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO	

Date:	27-01-2021
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	25-04-2021
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	21-05-2021
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	23-05-2021
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	28-05-2021
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	16-10-2021
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	19-05-2022
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	29-10-2022
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	02-12-2022
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO	

Date:	30-01-2023
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	01-03-2023
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO Date:	22-05-2023
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)

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
EU-CTR	CTIS2022-502936-38-00
EudraCT	EUCTR2018-001383-28-NL
ClinicalTrials.gov	NCT03607422
CCMO	NL66142.042.18