Early prediction of adalimumab levels with InsightRx

Published: 22-01-2019 Last updated: 19-03-2025

Prediction of adalimumab steady-state levels, based on 2 adalimumab levels in the induction phase of therapy with InsightRx.

| Ethical review | Approved WMO |
|-----------------------|--|
| Status | Recruitment stopped |
| Health condition type | Gastrointestinal inflammatory conditions |
| Study type | Observational invasive |

Summary

ID

NL-OMON49110

Source ToetsingOnline

Brief title Early prediction of adalimumab levels with InsightRx

Condition

- Gastrointestinal inflammatory conditions
- Joint disorders

Synonym

Inflammatory Bowel Diseases (M.Crohn and Ulcerative Colitis) and Rheumatic diseases (Rheumatoid Arthritis, Psoriatic Arthritis, Spondyloarthropathy)

Research involving

Human

Sponsors and support

Primary sponsor: Maxima Medisch Centrum Source(s) of monetary or material Support: wetenschapsfonds MMC

Intervention

Keyword: Adalimumab, InsightRx, Prediction, Therapeutic Drug Monitoring

Outcome measures

Primary outcome

Accuracy of adalimumab level at steady-state prediction, based on early TDM. To numerically quantify the bias and precision, model-predicted levels shall be compared to the observed values in the datasets. MPE (bias) and normalised RMSE (precision) of the individual weighted residuals will be calculated using Microsoft Excel:

Normalised RMSE is RMSE divided by (maximal dependant variable minus minimal dependant variable).

Precise model prediction is defined as MPE and normalised RMSE < 25% (5,6,7).

Secondary outcome

With the newly collected adalimumab levels and anti-adalimumab antibodie titers

(and more detailed timing of administration data) new PK parameters will be

estimated with NONMEM for both IBD and rheumatic disease population.

Study description

Background summary

Based on cumulative expenses, adalimumab has been the most expensive drug in the Netherlands over the past few years (source: NZA monitor geneesmiddelen in de medisch-specialistische zorg). It is therefore prudent to intervene early in non-responders and adjust dosage to the individual patient. This serves both patient satisfaction and medicines expenses. Target adalimumab trough-levels have been established and TDM is performed in routine clinical practice, late in therapy. Population pharmacokinetic models have been developed and could theoretically be used for early dosage prediction, but these models have not yet reached clinical practice. There is a need for a user-friendly translation of these population pharmacokinetic adalimumab models into clinical practice to aid in dosing.

Study objective

Prediction of adalimumab steady-state levels, based on 2 adalimumab levels in the induction phase of therapy with InsightRx.

Study design

Observational intervention study

Study burden and risks

Patients will be exposed tot minimal burden in our study. Patients are required to use a special needlecontainer which sends details on usage (surrogate for adalimumab administration) to the investigator. Furthermore, patients should collect 3 samples at home through fingerprick for adalimumab TDM which should be sent to the investigator within 24 hours (for stability purposes) clearly marked with date and time af collection

Contacts

Public Maxima Medisch Centrum

DE RUN 4600 Veldhoven 5504 DB NL **Scientific** Maxima Medisch Centrum

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

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

Inclusion criteria

All adult patients over 18 years of age with new adalimumab prescriptions at initial dosing interval of 14 days for rheumatic diseases (RA,PsA,SpA) or inflammatory bowel disease (UC, Crohn*s disease) will be eligible to participate in our study.

Exclusion criteria

- * Pregnancy
- * Previous adalimumab use
- * Allergy for adalimumab or excipients (Humira)
- * Patients unable or unwilling to consent to participation to this trial

Study design

Design

| Study type: Observational invasive | | | | |
|------------------------------------|-------------------------|--|--|--|
| Masking: | Open (masking not used) | | | |
| Control: | Uncontrolled | | | |
| Primary purpose: | Treatment | | | |

Recruitment

| NL | |
|---------------------------|---------------------|
| Recruitment status: | Recruitment stopped |
| Start date (anticipated): | 01-03-2019 |

| Enrollment: | 40 |
|-------------|--------|
| Туре: | Actual |

Ethics review

| Approved WMO | |
|--------------------|---|
| Date: | 22-01-2019 |
| Application type: | First submission |
| Review commission: | METC Maxima Medisch Centrum (Veldhoven) |
| Approved WMO | |
| Date: | 25-03-2019 |
| Application type: | Amendment |
| Review commission: | METC Maxima Medisch Centrum (Veldhoven) |
| Approved WMO | |
| Date: | 21-06-2019 |
| Application type: | Amendment |
| Review commission: | METC Maxima Medisch Centrum (Veldhoven) |
| Approved WMO | |
| Date: | 11-02-2020 |
| Application type: | Amendment |
| Review commission: | METC Maxima Medisch Centrum (Veldhoven) |

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

ID: 24282 Source: NTR Title:

In other registers

| Register | | |
|----------|--|--|
| ССМО | | |
| OMON | | |

ID NL68292.015.18 NL-OMON24282