

Pharmacokinetics of a new paediatric formulation of valacyclovir used for prophylaxis and treatment of VZV and HSV infections in children (VALID II).

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Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Viral infectious disorders
Study type	Interventional

Summary

ID

NL-OMON50198

Source

ToetsingOnline

Brief title

VALID-2

Condition

- Viral infectious disorders

Synonym

chicken pox, herpes infection

Research involving

Human

Sponsors and support

Primary sponsor: Afdeling Apotheek

Source(s) of monetary or material Support: ZonMW

Intervention

Keyword: paediatric formulation, pharmacokinetics, valacyclovir oral solution

Outcome measures

Primary outcome

Pharmacokinetic parameters of acyclovir: AUC₀₋₁₂, C_{max} and C_{min}.

Secondary outcome

Amount and severity of adverse events

Study description

Background summary

Herpes infections in immunocompromised patient cause longer periods of clinical symptoms and viral shedding, increased severity and more frequent episodes of reactivation. This may lead to dissemination, hepatitis, post herpetic neuralgia, bacterial super infection, pneumonitis, encephalitis and death. Valacyclovir is an oral prodrug of acyclovir, with at least equal efficacy and a similar safety profile as intravenous aciclovir and therefore less expensive and more convenient. However, in immunocompromised children practical problems exist with adult-dose tablets. A formulation with acceptable palatability, good pharmaceutical quality and possibility of flexible dosing is needed. A new paediatric formulation (oral solution) has been developed to fulfill those needs. The pharmacokinetics of this formulation will be investigated in children who have an indication for (val)Acyclovir prophylaxis.

Study objective

In this trial the plasma pharmacokinetics of acyclovir will be investigated after administration of valacyclovir oral solution in children who have an indication for (val)Acyclovir prophylactic treatment. Furthermore, the safety profile of a single dose of valacyclovir oral solution in children will be determined.

Study design

This study will be an opportunistic design, single dose (at steady state), one-period, steady state, multiple center, trial.

Pharmacokinetics will be determined on a day of valacyclovir oral solution dosing (which is giving as standard of care).

Intervention

Intake of valacyclovir oral solution (as standard of care) and collection of bloodsamples for determination of the pharmacokinetics.

Study burden and risks

This study will be performed in children who have an indication for (val)Acyclovir prophylactic treatment. These children are admitted to the hospital. Therefore, no more visits are scheduled for the study. The duration of the entire trial is one day during hospital admission.

One could argue that a study in children might be unethical, but the oral solution had antiviral activity. So, the study participants will benefit from the participation in this clinical trial. The study participants are subjects between 2 and 12 years, these subjects are representative for the group who will receive this formulation.

On the other hand, valacyclovir can lead to adverse events including: headache (*10%), nausea, vomiting, diarrhea, dizziness, rash, pruritis (*1% and <10%), leucopenia, thrombocytopenia, hallucinations, mental confusion, diminished consciousness, agitation, tremor, dyspnoea, abdominal discomfort, urticaria, kidney pain (*0,1% and <1%), anaphylaxis, ataxia, dysarthria, convulsions, encephalopathy, coma, psychotic symptoms, reversible increase in liver enzymes and bilirubin, angioedema, impaired renal function and acute renal failure (*0,01% and <0,1%).

Adverse events of acyclovir are comparable, but also include: shortness of breath (*0,01% and <0,1%) anaemia and hepatitis (*0,01%).

However, the patients will receive valacyclovir anyway according to the local protocol. So, the study does not rise or decrease the risk on these adverse events. For pharmacokinetic purposes 7 blood samples will be taken in total. The total blood volume collected will be approximately 21 mL.

Blood samples will be collected from an inserted cannula or PAC being already in place for treatment of their underlying condition, which minimizes inconvenience for the children. The overall risk is judged to be minimal.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Children (2-11 years)

Inclusion criteria

1. Subject is in the age of 1-12 years.
2. Subject receives (val)acyclovir prophylaxis and is planned to receive valacyclovir oral solution.
3. Subject is managed with a central venous catheter (CVC/Port-a-Cath).
4. Subject*s parents have signed the Informed Consent Form prior to screening evaluations.

Exclusion criteria

1. Severe anemia (Hb < 5.0 mmol/L).
2. Full dose has not been taken.

Study design

Design

Study phase:	4
Study type:	Interventional
Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Treatment

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	20-01-2020
Enrollment:	16
Type:	Actual

Ethics review

Approved WMO	
Date:	16-04-2019
Application type:	First submission
Review commission:	CMO regio Arnhem-Nijmegen (Nijmegen)
Approved WMO	
Date:	17-06-2019
Application type:	First submission
Review commission:	CMO regio Arnhem-Nijmegen (Nijmegen)
Approved WMO	
Date:	30-04-2020
Application type:	Amendment
Review commission:	CMO regio Arnhem-Nijmegen (Nijmegen)
Approved WMO	
Date:	04-05-2020
Application type:	Amendment
Review commission:	CMO regio Arnhem-Nijmegen (Nijmegen)

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	EUCTR2017-001451-30-NL
ClinicalTrials.gov	NCT04081480
CCMO	NL61579.091.18

Study results

Date completed: 12-05-2021

Actual enrolment: 7

Summary results

Trial ended prematurely