

A Phase 3, Multi-Center, Randomized, Double-Blind, Placebo-Controlled, 104-Week Study to Evaluate the Efficacy and Safety of Belimumab Administered in Combination with Rituximab to Adult Subjects with Systemic Lupus Erythematosus (SLE) (study 205646)

Published: 24-10-2017

Last updated: 12-04-2024

Primary: To evaluate the efficacy of belimumab and a single cycle of rituximab administered in a combination regimen to adult participants with SLE. Secondary: Other aspects of efficacy. Safety and tolerability. Questionnaires.

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

Summary

ID

NL-OMON50250

Source

ToetsingOnline

Brief title

study 205646, BLISS-BELIEVE

Condition

- Autoimmune disorders

Synonym

SLE; systemic lupus erythematosus

Research involving

Human

Sponsors and support

Primary sponsor: GlaxoSmithKline

Source(s) of monetary or material Support: GlaxoSmithKline BV

Intervention

Keyword: belimumab, combination, rituximab, SLE

Outcome measures

Primary outcome

Proportion of participants with a state of disease control defined as a SLE

Disease Activity Index (SLEDAI)-2K score *2, achieved without

immunosuppressants and with corticosteroids at a prednisone equivalent dose of

*5 mg/day at Week 52.

Secondary outcome

Major: Clinical remission (SLEDAI-2K score=0) at Week 64.

Others (e.g.): Clinical or complete remission (SLEDAI-2K score=0) by visit and

for *24 weeks. Disease control (SLEDAI-2K score *2) at week 104, by visit. Time

to first (severe) flare. Adverse events. See protocol pages 10-12 for complete

list.

Study description

Background summary

SLE is characterized by autoantibodies, including antibodies to double-stranded DNA (dsDNA), and by abnormal B cell activation and differentiation, indicating that therapies which deplete or modulate B cells could be beneficial in treating SLE. Belimumab and rituximab are monoclonal antibodies that achieve

their expected pharmacology through different but complementary mechanisms; therefore, based on their mechanisms of action, synergistic effects when used in combination in the treatment of SLE are possible compared to either treatment alone. Belimumab treatment increases peripheral memory B cells potentially by mobilization from tissues this may include the autoreactive B cell compartment. This mobilization would expose these cells to more efficient depletion by rituximab. Continuing belimumab after a single course of rituximab would then suppress the B-lymphocyte stimulator (BLyS) elevation observed after rituximab monotherapy, thus suppressing the signal which leads to rapid repopulation of B cells, including autoreactive B cells. This study will assess whether co-administration of belimumab and a single cycle of rituximab may optimize (registered) treatment with belimumab, resulting in improvements in clinical status with a favorable safety profile.

Protocol amendment 3: addition of a sub study (the effect of the study medication on B cells; 6 times approx. 10 mL blood).

Study objective

Primary:

To evaluate the efficacy of belimumab and a single cycle of rituximab administered in a combination regimen to adult participants with SLE.

Secondary:

Other aspects of efficacy. Safety and tolerability. Questionnaires.

Study design

Phase 3, 3-arm randomized double-blind placebo-controlled 104 week study.

Randomization (1:2:1) to:

D. Belimumab plus 1 course of rituximab placebo

E. Belimumab plus 1 course of rituximab

F. Belimumab plus standard therapy with immunosuppressants (open-label).

Belimumab will be administered weekly (200 mg subcutaneously) for 51 weeks

(Arms A and B) or 104 weeks (Arm C).

Rituximab (or placebo) will be administered in week 4 and 6 (intravenously).

Premedication 30 min prior to infusions (incl. methylprednisolone 100 mg IV).

Standard therapy in Arm C will be administered for 104 weeks.

After the initial 12 weeks of study treatment, a protocol-specified corticosteroid taper will be initiated and conducted under the direction of the investigator for participants in all 3 arms. See protocol page 14 for details. Participants in Arms A and B will enter into the 52-week observational phase of the study without belimumab and/or rituximab treatment after completing Week 52 (Weeks 53 through 104).

Blinded independent assessors will conduct the SLEDAI-2K at key time points.

An Independent Data Monitoring Committee (IDMC) will regularly review the safety data.

At least 200 subjects (400 to be screened).

Intervention

Treatment with belimumab with or without rituximab.

Down titration (and potential discontinuation) of corticosteroids.

Study burden and risks

Risk: Adverse events of belimumab with or without rituximab. Decrease of disease control.

Burden:

Visits every 4 weeks (year 1), every 8 weeks (year 8).

Belimumab SC injection (ca 1 mL) during 1 (Arms A, B) or 2 (Arm C) years. 2 IV infusions with rituximab (or placebo) (250 mL) and IV pre-medication met methylprednisolone (2,5 mL) (arm A, B).

Physical examination: every visit.

SLEDAI-2K score: every visit.

Blood draws: every visit (30-150 mL, 1.200 mL blood in total).

Pregnancy test: every visit.

Alcohol en drugs screen: at screening.

ECG: at screening.

Diary (data on administration belimumab): 1-2 years (as long as belimumab is administered).

Questionnaires: C-SSRS every visit, FACIT-fatigue, Lupus QoL, WPAI, global assessment 9 times in total.

Optional: genetics blood sample (6 ml), 6 blood samples of approx. 10 mL for optional research on B cells.

Contacts

Public

GlaxoSmithKline

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NL

Scientific

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NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

- * Males and females ≥ 18 years of age.
- * SLE according to the ACR criteria (at least 4/11 criteria).
- * Screening SLEDAI-2K score ≥ 6 (total score).
- * Unequivocally positive autoantibody test results. See protocol page 49 for details.
- * Stable SLE treatment regimen consisting of any of the following medications (alone or in combination) for a period of at least 30 days prior to Day 1: corticosteroids, immunosuppressants, anti-malarials, NSAIDs. See protocol page 49-50 for details.
- * Female participant of childbearing potential who agrees to follow the contraceptive guidance in appendix 3 of the protocol during the treatment period and for at least 16 weeks after the last dose of belimumab or at least 12 months after the last dose of rituximab (or placebo).

Exclusion criteria

- * Symptomatic herpes zoster within 3 months prior to screening.
- * Evidence of active or latent tuberculosis. See protocol page 50 for details
- * Clinical evidence of significant unstable or uncontrolled acute or chronic diseases not due to SLE. See protocol page 51 for details.
- * Acute or chronic infection requiring management. See protocol page 51 for details.
- * Severe lupus kidney disease. See protocol page 52 for details.
- * Live vaccine within 1 month prior to screening, or plans to receive such vaccines during the screening period or during the study.
- * Use in the past year of belimumab, rituximab, abatacept, any B-cell targeted therapy, biologic investigational agent other than B cell targeted therapy. See

protocol page 52 for details.

- * 3 or more courses of systemic corticosteroids within the past year.
- * Use in the 90 days prior to study day 1: anti-TNF therapy, anakinra, IV immunoglobulins, >100 mg prednisone per day, plasmapheresis.
- * Use in the 60 days prior to study day 1: non-biologic investigational drug, IV cyclophosphamide, any steroid injection.
- * Positive HIV, hepatitis B or C test.
- * Pregnancy or breastfeeding.

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:	Recruitment stopped
Start date (anticipated):	16-05-2018
Enrollment:	10
Type:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	Benlysta
Generic name:	belimumab
Registration:	Yes - NL outside intended use
Product type:	Medicine
Brand name:	MabThera

Generic name: rituximab
Registration: Yes - NL outside intended use

Ethics review

Approved WMO
Date: 24-10-2017
Application type: First submission
Review commission: MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO
Date: 16-02-2018
Application type: First submission
Review commission: MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO
Date: 28-02-2018
Application type: Amendment
Review commission: MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO
Date: 26-03-2018
Application type: Amendment
Review commission: MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO
Date: 06-04-2018
Application type: Amendment
Review commission: MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO
Date: 11-04-2018
Application type: Amendment
Review commission: MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO
Date: 11-12-2018

Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	02-01-2019
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	24-01-2019
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	29-01-2019
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	12-02-2019
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	19-02-2019
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	17-06-2019
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO Date:	24-06-2019
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO	
Date:	19-02-2020
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO	
Date:	25-02-2020
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO	
Date:	01-05-2020
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO	
Date:	11-05-2020
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO	
Date:	19-05-2020
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO	
Date:	26-06-2020
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO	
Date:	07-07-2020
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO	
Date:	27-11-2020
Application type:	Amendment

Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO	
Date:	16-12-2020
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO	
Date:	29-01-2021
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)
Approved WMO	
Date:	02-02-2021
Application type:	Amendment
Review commission:	MEC-U: Medical Research Ethics Committees United (Nieuwegein)

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	EUCTR2016-003050-32-NL
CCMO	NL63490.100.17
Other	www.gskclinicalstudyregister.com 205646

Study results