A Phase 3, Randomized, Double-Blind, Placebo-Controlled Study of the Efficacy and Safety of Parsaclisib in Participants With Primary Warm Autoimmune Hemolytic Anemia (PATHWAY)

Published: 29-11-2021
Last updated: 05-04-2024

Primary - To evaluate the efficacy of parsaclisib in the treatment of participants with wAIHA.Secondary - To further evaluate the efficacy of parsaclisib in the treatment of participants with wAIHA.

Ethical review	Approved WMO
Status	Will not start
Health condition type	Autoimmune disorders
Study type	Interventional

Summary

ID

NL-OMON52364

Source
ToetsingOnline

Brief title
INCB 50465-309 / Pathway

Condition

- Autoimmune disorders

Synonym
anemia, warm hemolytic anemia

Research involving
Human

Sponsors and support

Primary sponsor: Incyte Corporation
Source(s) of monetary or material Support: Industry - Incyte Corporation - USA

Intervention

Keyword: anemia, auto-immune, hemolytic

Outcome measures

Primary outcome

• Proportion of participants attaining a durable hemoglobin response, defined

as hemoglobin >= 10 g/dL with an increase from baseline of >= 2 g/dL not

attributed to rescue therapy at >= 3 of the 4 available visits at Week 12 and/or

later during the 24-week double-blind treatment period

Secondary outcome

• Proportion of participants with a >= 3-point increase from baseline in FACIT-F

score at Week 24.

Study description

Background summary

Autoimmune hemolytic anemia is a rare acquired disorder in which autoantibodies directed against RBC membrane antigens lead to their accelerated destruction. Currently, there is no approved and effective targeted therapy for treatment of primary wAIHA. Despite current treatment algorithms, there is a significant morbidity and mortality rate, and disease relapse remains an ongoing challenge for a significant number of patients with wAIHA. Corticosteroids remain the first-line therapy; however, high initial doses are required, responses are often achieved slowly, and only a minority of patients achieve a lasting response.Therefore, there remains an unmet need for new treatments for wAIHA. In addition to showing
efficacy in a number of B-cell-related cancers, treatment with parsaclisib has shown significant improvement in animal models of AIHA and lupus nephritis, as well as other antibody-mediated diseases. Parsaclisib may represent an

alternative treatment for participants who have failed at least 1 prior treatment

Study objective

Primary - To evaluate the efficacy of parsaclisib in the treatment of participants with wAIHA.
Secondary - To further evaluate the efficacy of parsaclisib in the treatment of participants with wAIHA.

Study design

Randomized, double-blind, placebo-controlled, multicenter study

Intervention

Participants will receive parsaclisib 2.5 mg or placebo QD for 24 weeks. Participants who complete the double-blind treatment period, are tolerating study treatment, and in the investigator's opinion will benefit from continued treatment will continue into an open-label extension period for an additional 24 weeks of parsaclisib 2.5 mg QD. A 12-week post-treatment follow-up period will include 3 visits every 4 weeks to assess safety and persistence of effect. Participants who benefit from the treatment can participate in the long-term extension study.

Study burden and risks

Adverse events
- Potential adverse events in relation to the study treatment (adverse events are listed in the ICF attachment D)
-Mogelijke bijwerkingen van de behandeling (bijwerkingen worden beschreven in Bijlage D van het ICF)

Procedures
-Blood draws/blood tests: Momentary discomfort, soreness, bruising, and in rare cases, infection at the draw site or excess bleeding; rarely light headedness, or fainting. Approximate total amount of blood drawn of the course of the study: 343 mL, average amount for blood donation is 480 mL.
-Electrocardiogram (ECG): Rash or minor irritation of the skin may occur from the sticky pads used.
-Six-minute walk test: get out of breath or become exhausted. However, the participant may slow down, stop, or rest during the test if you need to.

The potential risks to study participants in association with parsaclisib treatment in the study are mitigated by the planned safety measures detailed in the protocol (Table 5) and are balanced by the potential improvement in

hemoglobin in a population who have failed at least 1 prior therapy, have limited treatment options and supported by positive benefit/risk seen with parsaclisib 2.5 mg dose in Study INCB 50465-206.

Contacts

Public
Incyte Corporation

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US
Scientific
Incyte Corporation

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

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

Inclusion criteria

1. Ability to comprehend and willingness to sign a written ICF for the study.
2. Men or women, age >= 18 years at the time of signing the ICF.
Note: For Japan, men and women, age >= 20 years or older.
3. Diagnosis of primary wAIHA based on the presence of hemolytic anemia and serological evidence of anti-erythrocyte antibodies, detectable by a DAT positive for IgG only or IgG plus C3d.
Note: Prior documentation of DAT testing is permitted.

4. Participants who were inadequately controlled with, were intolerant to, or have a contraindication to other therapies. There is no limit to the number of prior treatment regimens.
5. Hemoglobin >= 6.5 to < 10 g/dL with symptoms of anemia as assessed by the investigator at screening (hemoglobin as determined by local laboratory).
6. FACIT-F score <= 43 at screening.

Exclusion criteria

1. Women currently pregnant or breastfeeding or participants expecting to conceive or father children within the projected duration of the study, starting with the screening visit through 90 days from the date of last dose of study drug.
2. A diagnosis of other types of AIHA; CAD, cold agglutinin syndrome, mixed-type AIHA or paroxysmal cold hemoglobinuria.
3. Warm AIHA suspected to be secondary to a lymphoproliferative malignancy or secondary to an autoimmune disease (eg, systemic lupus erythematosus, Castleman's disease, Sjögren's syndrome, or other autoimmune diseases) or diagnosis of Evans syndrome.
4. A splenectomy less than 3 months before randomization

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:	Will not start
Enrollment:	2
Type:	Anticipated

Medical products/devices used

Product type:	Medicine
Brand name:	Parsaclisib
Generic name:	Parsaclisib

Ethics review

Approved WMO Date:	29-11-2021
Application type:	First submission
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO Date:	10-03-2022
Application type:	First submission
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO Date:	28-03-2022
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO Date:	21-04-2022
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO Date:	02-08-2022
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO Date:	20-09-2022
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

Approved WMO Date:	05-11-2022
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO Date:	06-12-2022
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO Date:	12-07-2023
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

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	EUCTR2021-002844-66-NL
CCMO	NL78438.078.21