

# A Randomized, Open-label, Phase 3 Study Comparing Once-weekly vs Twice-weekly Carfilzomib in Combination with Lenalidomide and Dexamethasone in Subjects With Relapsed or Refractory Multiple Myeloma (A.R.R.O.W.2)

Published: 08-01-2019

Last updated: 12-04-2024

Primary Objective: • To compare efficacy of once-weekly KRd (56 mg/m<sup>2</sup> ) to twice-weekly KRd (27 mg/m<sup>2</sup>) in subjects with RRMM with 1 to 3 prior lines of therapy  
Key Secondary Objectives: • To compare progression-free survival (PFS) between treatment...

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	Other condition
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON52761

### Source

ToetsingOnline

### Brief title

20180015

### Condition

- Other condition

### Synonym

A form of bone marrow cancer, cancer of plasma cells

### Health condition

bloodcell cancer

## **Research involving**

Human

## **Sponsors and support**

**Primary sponsor:** Amgen

**Source(s) of monetary or material Support:** Amgen

## **Intervention**

**Keyword:** Carfilzomib, One weekly vs Twice-weekly, Open-Label, Relapsed Multiple Myeloma

## **Outcome measures**

### **Primary outcome**

overall response, defined as the best overall response of stringent complete response [sCR], complete response [CR], very good partial response [VGPR], and partial response [PR] per International Myeloma Working Group Uniform Response Criteria [IMWG-URC]) over the duration of the study

### **Secondary outcome**

- PFS over the duration of the study
- convenience as measured by the Patient-reported Convenience With Carfilzomib-dosing Schedule Question after cycle 4 of treatment
- incidence of treatment-emergent adverse events
- time to response (TTR)
- duration of response (DOR)
- time to progression (TTP)
- MRD[-]CR , defined as achievement of CR or better by Independent Review Committee (IRC) per IMWG-URC and achievement of MRD negativity as assessed by next-generation sequencing method at a 10<sup>-5</sup> threshold over the duration of the

study

- MRD[-] status at 12 months, defined as achievement of MRD negativity at 12 months ( $\pm$  4 weeks) from randomization, as assessed by next-generation sequencing method at a  $10^{-5}$  threshold

- physical functioning and role functioning over time as measured by the Physical Functioning and Role Functioning scales of the European Organization for Research and Treatment of Cancer Quality-of-life Questionnaire Core 30 (EORTC QLQ-C30) over the duration of the study

- treatment satisfaction as measured by the Satisfaction With Therapy (SWT) scale of the Cancer Therapy Satisfaction Questionnaire (CTSQ) after cycle 4 of treatment

## Study description

### Background summary

Multiple myeloma, a clonal neoplastic proliferation of plasma cells, is the second most common hematologic malignancy and is responsible for approximately 80 000 annual deaths worldwide (1% of all cancer deaths). The estimated incidence of multiple myeloma worldwide was 114 000 patients, which represents 0.8% of all cancers. The 5-year prevalence of multiple myeloma worldwide was estimated 229 000 persons (Ferlay et al, 2015). Multiple myeloma is a disease of older adults, with a median age at diagnosis of 69 years (Noone et al, 2018). As the world's older population (age > 65 years) continues to grow (from 8.5% [617 million] of the world's population in 2013 to a projected 17% [1.6 billion] in 2015) (He et al, 2016), the incidence of multiple myeloma is expected to increase.

### Study objective

Primary Objective:

- To compare efficacy of once-weekly KRd (56 mg/m<sup>2</sup>) to twice-weekly KRd (27 mg/m<sup>2</sup>) in subjects with RRMM with 1 to 3 prior lines of therapy

### Key Secondary Objectives:

- To compare progression-free survival (PFS) between treatment arms
- To compare patient-reported convenience with carfilzomib dosing schedule between treatment arms

Kindly refer to protocol section 4 for more information on Objectives and additional secondary objectives and endpoints.

### Study design

The study will consist of a screening period of up to 28 days, a treatment duration of up to 12 cycles of 28 days, a 30-day safety follow-up period, and a long-term follow-up (every 28  $\pm$  7 days) period.

Subjects will receive the study drug(s) determined by randomization for a maximum of 12 cycles. No crossover between the treatment arms is allowed.

Upon discontinuation from the study treatment for any reason, a safety follow-up visit will be performed approximately 30 (+3) days after the last dose of all study drug(s). After discontinuation from study treatment, subjects who do not have confirmed PD are required to continue follow-up every 28  $\pm$  7 days for survival. After end of study, subjects may continue treatment per local standard of care at the discretion of the investigator.

Subjects will be randomized in a 1:1 ratio to 1 of 2 arms:

Arm 1: KRd using once-weekly carfilzomib 56 mg/m<sup>2</sup>

Arm 2: KRd using twice-weekly carfilzomib 27 mg/m<sup>2</sup>

The overall study design is outlined in the study schema in Section 2.1 of the protocol.

### Intervention

n/a

### Study burden and risks

See E9 and E9a

## Contacts

### Public

Amgen

Minervum 7061

Breda 4817 ZK  
NL  
**Scientific**  
Amgen

Minervum 7061  
Breda 4817 ZK  
NL

## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

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

### Inclusion criteria

- Subject has multiple myeloma with documented relapse or progression after most recent myeloma treatment.
- Subjects must have at least PR to at least 1 line of prior therapy
- Subjects must have received at least 1 but not more than 3 prior lines of therapy for multiple myeloma (induction therapy followed by stem cell transplant and consolidation maintenance therapy will be considered as 1 line of therapy).
- Prior therapy with a PI is allowed if the patient achieved at least a PR to most recent treatment with a PI, did not relapse within 60 days of discontinuation of the PI and the PI was not removed due to toxicity. A history of prior neuropathy is permitted if this was not grade 3, grade 4 or grade 2 with pain and if not resolved within the 14 days before enrollment, is less than or equal to grade 2 without pain.
- Eastern Cooperative Oncology Group Performance Status (ECOG PS) of  $< 2$

Please refer to section 6.1 of the protocol.

## Exclusion criteria

- Waldenström macroglobulinemia
- Multiple myeloma of IgM subtype
- Active congestive heart failure (New York Heart Association [NYHA] Class III to IV), symptomatic ischemia, uncontrolled arrhythmias, ECG abnormalities, pericardial disease, or myocardial infarction within 4 months prior to enrollment
- Uncontrolled hypertension

Please refer to section 6.2 of the protocol.

## Study design

### Design

Study phase:	3
Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Treatment

### Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	03-09-2019
Enrollment:	2
Type:	Actual

### Medical products/devices used

Product type:	Medicine
Brand name:	Kyprolis
Generic name:	Carfilzomib
Registration:	Yes - NL intended use

## Ethics review

Approved WMO	
Date:	08-01-2019
Application type:	First submission
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	09-05-2019
Application type:	First submission
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	12-12-2019
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	14-02-2020
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	23-04-2020
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	17-06-2020
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	14-07-2020
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	17-11-2020
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	15-12-2020

Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	17-06-2021
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	14-07-2021
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	09-10-2021
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	09-12-2021
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	28-12-2021
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	02-02-2022
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	24-06-2022
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	02-09-2022
Application type:	Amendment
Review commission:	METC Amsterdam UMC



## 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	EUCTR2018-000665-36-NL
ClinicalTrials.gov	NCT03859427
CCMO	NL68271.029.18

## Study results