A Long-term Extension Study to Evaluate the Safety and Tolerability of TAK-861 in Participants With Selected Central Hypersomnia Conditions

Published: 22-12-2022
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This study has been transitioned to CTIS with ID 2023-508462-15-00 check the CTIS register for the current data. To evaluate the long-term safety and tolerability of TAK-861.

Ethical review	Approved WMO
Status	Recruiting
Health condition type	Sleep disturbances (incl subtypes)
Study type	Interventional

Summary

ID

NL-OMON53942

Source
ToetsingOnline

Brief title
TAK-861-2003

Condition

- Sleep disturbances (incl subtypes)

Synonym
Narcolepsy type 1 and 2, sleeping disorder

Research involving
Human

Sponsors and support

Primary sponsor: Takeda Development Center Americas, Inc.
Source(s) of monetary or material Support: The sponsor as completed in section B7.

Intervention

Keyword: Narcolepsy type 1, Narcolepsy type 2, Phase 2/3, TAK-861

Outcome measures

Primary outcome

Occurrence of at least 1 treatment-emergent adverse event (TEAE).

Secondary outcome

- Change from baseline in the parent study in MWT mean sleep latency.

- Change from baseline in the parent study in ESS total score.

- Change from baseline in the parent study in

- WCR using the patient-reported cataplexy diary (participants with NT1 only).

Study description

Background summary

The current study is a dose-blind, long-term extension (LTE) study to collect and evaluate long-term safety and tolerability data of TAK-861 in participants with narcolepsy type 1 (NT1) or narcolepsy type 2 (NT2) who were exposed to previously tested doses of TAK-861 and then treated for up to another 104 weeks (2 years).
Narcolepsy without cataplexy, or NT2, has been defined in the International Classification of Sleep Disorders, 3rd Edition (ICSD-3) criteria as having EDS with mean sleep latency of <=8 minutes and 2 or more sleep onset REM periods (SOREMPs) on Multiple Sleep Latency Test (MSLT) (or with 1 SOREMP on preceding polysomnography (PSG) replacing 1 SOREMP on MSLT). Patients with NT2 do not have cataplexy, and cerebrospinal fluid (CSF) levels of orexin (OX) are greater than 110 pg/mL, or greater than one-third of the normal average. The presumed pathophysiology of NT2 is unclear. However, as many as 30% of patients with narcolepsy without cataplexy are found to have CSF OX levels that are lower than normal.
TAK-861 is a selective agonist of OX2R that has demonstrated wake-promoting effects even in the absence of OX deficiency.
Nonclinical pharmacology studies showed wake-promoting effects of TAK-861 in a murine narcolepsy model and also in mice and nonhuman primates with no known OX deficiency. In TAK-861-1002, single doses of TAK 861 40 mg and 15 mg

demonstrated a significant improvement in the objective and subjective measures of wakefulness assessed in an acute sleep delayed paradigm model in healthy adults. Review of available nonclinical and clinical data, including the nonserious, mild TEAEs reported in ongoing Study TAK-861-1001 and TAK-861-1002, supports a favorable benefit-risk ratio for this study with TAK-861. Refer to the latest version of the TAK-861 Investigators Brochure for the overall benefit/risk assessment and the most current information regarding drug metabolism, PK, efficacy, and safety of TAK-861.

Study objective

This study has been transitioned to CTIS with ID 2023-508462-15-00 check the CTIS register for the current data.

To evaluate the long-term safety and tolerability of TAK-861.

Study design

This is a phase 2/3 multicenter, dose-blind, LTE study of TAK-861. Participants from controlled studies conducted with TAK-861, who have up to a 3-month dosing gap between the parent study and screening period for TAK-861-2003, will be eligible to participate in this study (eg,TAK-861-2001 and other studies).

Intervention

For participants with NT1:
- TAK-861 Dose Regimen 1: 0.5 mg twice daily (BID), approximately 3 hours apart.
- TAK-861 Dose Regimen 2: 2 mg twice daily, approximately 3 hours apart.
- TAK-861 Dose Regimen 3: 2 mg followed by 5 mg, approximately 3 hours apart.
- TAK-861 Dose Regimen 4: 7 mg once daily (QD).

For participants with NT2:
- TAK-861 Dose Regimen 1: 2 mg twice daily, approximately 3 hours apart.
- TAK-861 Dose Regimen 2: 2 mg followed by 5 mg, approximately 3 hours apart.

Study burden and risks

Section E of this ABR form describes the burden and risks of participation as well as the (possible) benefit.
Review of available nonclinical and clinical data, including the nonserious, mild TEAEs reported in ongoing Study TAK-861-1001 and TAK-861-1002, supports a favorable benefit-risk ratio for this study with TAK 861. Refer to the latest version of the TAK-861 Investigators Brochure for the overall benefit/risk assessment and the most current information regarding drug metabolism, PK, efficacy, and safety of TAK 861.
Please refer to protocol section 2.3 for a detailed benefit/risk assessment.

Contacts

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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. Participant with a diagnosis of narcolepsy who has completed a controlled study with TAK-861 (including participants diagnosed with NT1 or NT2) and for whom the investigator has no clinical objection to their enrollment.

Exclusion criteria

1. Participant has a moderate or severe ongoing treatment emergent adverse event (TEAE) related to the study drug from the parent study or discontinued because of TEAEs in the parent study.
2. Participant has a positive urine screen for drugs of abuse (findings confirmed) and/or positive alcohol test during any visit in their prior TAK-861

study, or during the screening period for participants with a dosing gap.
3. Participant has a risk of suicide according to endorsement of item 4 or 5 on the Columbia Suicide Severity Rating Scale (C-SSRS) on any visit in the parent TAK-861 study, or has positive answers on item 4 or 5 on the Screening/Baseline C-SSRS Lifetime (based on the past year) during the screening assessment for participants with a dosing gap.
4. Participant has alanine aminotransferase (ALT) and aspartate aminotransferase (AST) >1.5 times the upper limit of normal (ULN) at multiple visits in the parent study and the findings are of clinical significance, per investigator or sponsor opinion, or ALT/AST >1.5 times ULN during the screening period for participants with a dosing gap.
5. Participant has a current medical disorder, other than narcolepsy with or without cataplexy, associated with excessive daytime sleepiness (EDS).
6. Participant has current active major depressive episode (MDE) or has had an active MDE in the past 6 months.
7. Participant has developed (within the last 6 months) gastrointestinal disease that is expected to influence the absorption of drugs (i.e., a history of malabsorption, esophageal reflux, peptic ulcer disease, erosive esophagitis, frequent [more than once per week] occurrence of heartburn, or any surgical intervention).
8. Participant has epilepsy or history of seizure.
9. Participant has any other medical condition, such as anxiety, depression, heart disease, or significant hepatic, pulmonary, or renal disease, that requires them to take excluded medications.
10. Participant has a history of cerebral ischemia, transient ischemic attack (<5 years ago), or cerebral hemorrhage.
11. Participant has a history of myocardial infarction, clinically significant coronary artery disease, clinically significant angina, clinically significant cardiac rhythm abnormality, or heart failure.
12. Participant has a history of cancer in the past 5 years (does not apply to participants with carcinoma in situ that has been resolved without further treatment, or basal cell skin cancer.

Study design

Design

Study phase:	2
Study type:	Interventional
Masking:	Double blinded (masking used)
Control:	Uncontrolled
Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Recruiting
Start date (anticipated):	28-06-2023
Enrollment:	2
Type:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	Not Yet available
Generic name:	Not Yet Available

Ethics review

Approved WMO Date:	22-12-2022
Application type:	First submission
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	10-02-2023
Application type:	First submission
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	30-03-2023
Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	05-05-2023
Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	07-08-2023

Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)
Approved WMO Date:	05-10-2023
Application type:	Amendment
Review commission:	BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek (Assen)

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
EU-CTR	CTIS2023-508462-15-00
EudraCT	EUCTR2022-002965-13-NL
CCMO	NL83126.056.22