LONG-TERM FOLLOW-UP PROTOCOL FOR SUBJECTS TREATED WITH GENE-MODIFIED T CELLS

Published: 02-02-2018
Last updated: 19-09-2024

This study has been transitioned to CTIS with ID 2023-504201-36-00 check the CTIS register for the current data. Per Health Authority guidelines for gene therapy medicinal products that utilize integrating vectors (eg, lentiviral vectors), long-term...

Ethical review	Approved WMO
Status	Recruiting
Health condition type	Other condition
Study type	Observational invasive

Summary

ID

NL-OMON54564

Source
ToetsingOnline

Brief title
GC-LTFU-001 (0451/0266)

Condition

- Other condition
- Lymphomas non-Hodgkin's B-cell
- Lymphomas non-Hodgkin's unspecified histology

Synonym
Aggressive Non-Hodgkin B-Cell Lymphoma, cancer of the bone marrow that recurs or is resistant to treatment, fast growing B-cell cancer of the lymph nodes; Relapsed and Refractory Multiple Myeloma

Health condition

related to parent study bb2121-MM-003: blood and lymphatic system disorders -->plasma cell neoplasms; neoplasms, benign, malignant and unspecified (incl cysts and polyps) -->

haematopoetic neoplasm (excl leukaemias and lymphoma)

Research involving
Human

Sponsors and support

Primary sponsor: Celgene Corporation
Source(s) of monetary or material Support: the sponsor Celgene Corporation

Intervention

Keyword: Efficacy follow-up, Gene-modified T cells, Long-Term Follow-Up, Safety follow-up

Outcome measures

Primary outcome

Overview of Key Safety Assessments

For all subjects will include, a brief clinical history and physical

examination, screening for the emergence of potentially delayed AEs, and onset

of new

clinical conditions following exposure to GM T cells, including neurologic

disorders, hematologic disorders, rheumatic and autoimmune disorders, or

exacerbation of one of these pre--existing conditions. or occurrence of a

second primary malignancy (SPM; hematologic or solid). For pediatric subjects,

growth and sexual maturation will also be asses sed.

Overview of Key Efficacy Assessments

No study specific disease assessments will be conducted for the purposes of

this trial. However, disease status will be collected for subjects who have not

progressed in the parent treatment protocol.

Overview of Key HRQoL Assessments

Whenever applicable, subjects will be followed for the first 5 years from the date of the last GM T-cell infusion for HRQoL. Collection of the PRO instruments conducted in the parent treatment protocol will continue to be completed in the LTFU protocol. For subjects that do not complete the questionnaires at any given point, reasons for not collecting will be reported.

Secondary outcome

To assess long-term health-related quality-of-life following treatment with GM T-cells

Study description

Background summary

This is a study for the long-term follow-up (LTFU) of safety and efficacy for all pediatric and adult subjects exposed to GM T cell therapy in Celgene-sponsored, or Celgene alliance partner sponsored trials in accordance with Health Authorities* guidance for subjects treated with gene therapy products. The treatment trial is also referred to as the parent protocol. No investigational product will be administered in this LTFU study.

Production of GM T-cells such as CAR require autologous T cells to be genetically modified by ex vivo transduction using a recombinant viral vector containing the CAR ribonucleic acid sequence.

In the parent treatment protocols, subjects are treated with GM T-cell products that use or replication-incompetent, self-inactivating lentiviral vectors derived from retroviruses. There is a theoretical risk, through a rare recombination event for example, for the emergence of RCL. Late potential toxicities may arise from the presence of RCL, unexpected late autonomous proliferation of infused GM T cells, or insertional mutagenesis/oncogenesis by integration of the retroviral vector into gene or controlled elements in the host genome.

Subjects who received at least one infusion of GM T-cells in previous Celgene-sponsored or Celgene alliance partner sponsored studies will be asked

to participate in this LTFU protocol, upon either premature discontinuation from, or completion of the parent treatment protocol.

Study objective

This study has been transitioned to CTIS with ID 2023-504201-36-00 check the CTIS register for the current data.

Per Health Authority guidelines for gene therapy medicinal products that utilize integrating vectors (eg, lentiviral vectors), long-term safety and efficacy follow up of treated subjects is recommended.
The primary objectives of this study are as follows:
• To assess the risk of delayed adverse events following exposure to GM T-cells
• To monitor for long-term persistence of GM T cells, including analysis of vector integration sites, as appropriate.
• To monitor for generation of replication competent lentiviruses (RCL)
• To assess long-term efficacy following treatment with GM T-cells
• Describe growth, and sexual maturity status for subjects who were aged < 18 years at time of GM-T cell therapy

Study design

Subjects will be followed for up to 15 years from time of the last GM T cell infusion.
Pediatric subjects will be monitored for growth and development; this follow-up may exceed 15 years if Tanner Stage 5 is not achieved at the end of the 15-year follow-up period.
The End of Study (EOS) visit for each subject, is defined as the date of the subject*s last visit, which corresponds to the subject*s last planned evaluation, withdrawal of consent, lost to follow up, or death, whichever occurs first.
The End of Trial (EOT) is defined as either the date of the last visit of the last subject or the date of receipt of the last data point from the last subject that is required for primary analysis, as prespecified in the protocol, whichever is the later date.

Study burden and risks

The study procedures may cause complications or discomforts as described in the subject information sheet.
The EMA and FDA recommends monitoring and follow-up after gene therapy treatment, to gain information on long-term safety and efficacy after treatment with genetically modified cells . This LTFU protocol is being conducted to monitor for long-term safety and efficacy per recommendations. Pediatric subjects will also be monitored for growth and development within this LTFU study to assess reproduction and developmental outcomes for this population.

In addition this study will also allow for LTFU for collection of disease status in subjects who did not experience disease progression on the prior parent treatment protocol.

Contacts

Public
Celgene Corporation

Morris Avenue 86
Summit NJ 07901
US
Scientific
Celgene Corporation

Morris Avenue 86
Summit NJ 07901
US

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adolescents (12-15 years)
Adolescents (16-17 years)
Adults (18-64 years)
Children (2-11 years)
Elderly (65 years and older)
Babies and toddlers (28 days-23 months)

Inclusion criteria

1. All adult and pediatric subjects who received at least one GM T-cell infusion in a previous Celgene-sponsored or Celgene alliance partner sponsored study, and have discontinued, or completed the post-treatment follow-up period

in the parent treatment protocol, as applicable.
2. Subject (and, parental/legal representative, when applicable) must understand and voluntarily sign an Informed Consent Form (ICF)/ Informed Assent Form (IAF) prior to any study-related assessments/procedures being conducted.

Exclusion criteria

None

Study design

Design

Study phase:	2
Study type:	Observational invasive
Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Recruiting
Start date (anticipated):	15-01-2022
Enrollment:	18
Type:	Actual

Ethics review

Approved WMO

Date:	02-02-2018
Application type:	First submission
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)

Approved WMO

Date:	02-04-2019
Application type:	First submission
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	05-11-2019
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	06-11-2019
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	24-02-2020
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	19-03-2020
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	28-04-2020
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	25-05-2020
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	22-06-2020
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den

	Haag)
Approved WMO Date:	01-07-2020
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	10-08-2020
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	25-01-2021
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	17-03-2021
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	18-05-2021
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	08-06-2021
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	15-12-2021
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	08-02-2022

Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	23-03-2022
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	31-03-2022
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	28-04-2022
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	27-09-2022
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	27-10-2022
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	13-03-2023
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)
Approved WMO Date:	25-04-2023
Application type:	Amendment
Review commission:	CCMO: Centrale Commissie Mensgebonden Onderzoek (Den Haag)

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	CTIS2023-504201-36-00
EudraCT	EUCTR2017-001465-24-NL
ClinicalTrials.gov	NCT03435796;2017-001465-24
CCMO	NL64313.000.18