

Basket of Baskets: A Modular, Open-label, Phase II, Multicentre Study To Evaluate Targeted Agents in Molecularly Selected Populations With Advanced Solid Tumours

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This study has been transitioned to CTIS with ID 2024-514238-19-00 check the CTIS register for the current data. The general purpose of the study is to find personalized cancer treatment based on genetic analysis of tumors.

Ethical review	Approved WMO
Status	Recruiting
Health condition type	Other condition
Study type	Interventional

Summary

ID

NL-OMON54705

Source

ToetsingOnline

Brief title

VHIO17002

Condition

- Other condition

Synonym

Advanced Solid Tumors, Cancer

Health condition

advanced solid tumor

Research involving

Human

Sponsors and support

Primary sponsor: Vall d'Hebron Institute of Oncology

Source(s) of monetary or material Support: Sponsor

Intervention

Keyword: Advanced Solid Tumours, Basket, Open label, Targeted therapy

Outcome measures

Primary outcome

Module 1 & 2: • Overall response rate (ORR) or complete response (CR) by RECIST 1.1 of different targeted agents in molecularly selected small patient populations. No specific primary endpoint in iProfiler (Part A) protocol.

Secondary outcome

Specific Secondary Endpoints for iProfiler part

- To determine the prevalence of genetic alterations in the iPROFILER screened population

- Progression free survival (PFS by RECIST 1.1) of the patients treated with each investigational agent evaluated at the end of the module.

- Progression Free Survival (PFS by RECIST 1.1) at 6 months of subjects treated with targeted therapy with each investigational agent.

- Overall survival (OS) of subjects treated with each investigational agent evaluated at the end of the module.

- Incidence and severity of adverse events (AEs) in subjects receiving each investigational agent.

Specific Secondary Endpoints for Module 2:

- Duration of response (CR or PR), calculated from the date of initial documentation of a response to the date of first documented evidence of progressive disease (or relapse for subjects who experience CR during the study) or death. Data from subjects who are progression-free and alive or have unknown status will be censored at the last tumour assessment.

Study description

Background summary

Basket studies are a new sort of medical scientific studies to identify subjects with the same kind of mutations and treat them with the same drug, irrespective of their specific cancer type. In basket studies, depending on the mutation types, subjects are classified into *baskets*. Therapies that block that mutation (targeted therapies) are then identified and those therapies are assigned to subjects in the different groups.

Study objective

This study has been transitioned to CTIS with ID 2024-514238-19-00 check the CTIS register for the current data.

The general purpose of the study is to find personalized cancer treatment based on genetic analysis of tumors.

Study design

Basket of Baskets is a medical scientific study that has two parts.

Part A (I-Profiler) is the portion of the study in which the tumour tissue is analysed for the mutations associated with the tumour. This will be performed through a laboratory test to find out if the tumour carries any mutation(s) that could be a target for specific drug therapy.

Part B (I-Basket) is the therapeutic part. In this part, we will study the effect of a specific treatment for patients with the same kind of mutation found in their tumours.

Intervention

Atezolizumab will be given by slow intravenous infusion (1200mg), every 3 weeks.

All subjects in the iBasket Module 2 study will be given an oral dose of 20 mg of futibatinib once daily (five tablets a day).

Study burden and risks

Atezolizumab has been tested in people with various forms of cancer and is generally well tolerated. Side effects can vary from mild to very severe and can vary from person to person. Everyone who participates in the study is closely monitored for any side effects. Atezolizumab may cause side effects.

The following side effects are very common (occur in more than 1 in 10 people or more): Fatigue, Joint pain (arthralgia), Lack of energy (asthenia), Decreased appetite, Diarrhea, Shortness of breath (dyspnea), Urinary tract infection, Cough, Itching of the skin, Nausea, Fever, Rash, Vomiting, Muscle and bone pain (myalgia, musculoskeletal pain and bone pain), and headache. In rare situations, an activation of immune system can occur with administration of atezolizumab.

The following side effects associated with futibatinib are very common (occurs in more than 10% of subjects):

- Increased blood levels of phosphate. This may result in muscle cramps, numbness, or tingling around the mouth, but most subjects have no symptoms
- Nail disorders. These might include: separation of the nail from the skin below, shedding of the nails, change in nail color, infection of the soft tissue around a fingernail or pain in the nail.
- Diarrhea
- Tiredness and lack of energy
- Hair loss
- Increased blood level of liver enzymes. This can be a possible sign of inflammation or damage to the liver
- Dry mouth
- Dry skin
- Inflammation of the mouth
- Nausea
- Swelling and redness of the skin on the palms of the hands and soles of the feet
- Constipation
- Reduced desire to eat
- Changes in taste
- Dry eye

Contacts

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Scientific

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

Part A: 1. Subjects must have histologically or cytologically confirmed malignancy that is metastatic or unresectable, who have progressed to standard therapy, who are receiving a standard anticancer treatment but no subsequent approved treatment would be available upon progression, who are unable to receive standard therapy, or for whom standard therapy does not exist. 2. Subjects must have ECOG performance status of 0 or 1. 3. Subjects must be 18 year-old or older. 4. Subjects must have measurable disease according to RECIST 1.1. 5. Subjects must have enough tumour tissue for molecular analysis • Subjects providing formalin-fixed paraffin embedded tissue (FFPE) must provide a minimum amount of tissue ranging from 20 to 28 slides depending on the sample tumour cellularity. If there is not enough archival tissue to meet this criterion, the subject must undergo a tumour biopsy. • Subjects providing fresh frozen tissue (FFT) must provide 4 core biopsies or equivalent. FFT must be preferentially collected from a tumour biopsy; hence, patients must have disease

amenable to be biopsied. Otherwise, the subject should have FFT stored in a biobank or biorepository. • Efforts will be made to provide FFT in at least one quarter of the participating subjects. The proportion of subjects that might provide FFT might change based on the results from the molecular analysis. • Since some of the tests are performed in FFPE tissue, patients providing FFT from a recent biopsy will have part of the sample processed in FFPE tissue as per Laboratory manual. 6. Subjects must have adequate hematological function: absolute granulocyte count $\geq 1.5 \times 10^9/L$, platelet count $\geq 100 \times 10^9/L$. 7. Subject must have adequate renal and hepatic function: creatinine clearance $\geq 30\text{ml/min}$, serum bilirubin $\leq 1.5 \times \text{ULN}$; unless due to Gilbert's syndrome, AST/ALT $\leq 5 \times \text{ULN}$ if liver metastases are present or AST/ALT $\leq 3 \times \text{ULN}$ if the subject has no liver involvement. 8. For subjects requiring a tumor biopsy: patients must have adequate coagulation function quick time $\geq 60\%$ or INR ≤ 1.5 . 9. Subjects must be willing to participate in a clinical trial with a matched therapy according to the molecular profile of his/her tumor. 10. Ability to understand and the willingness to sign a written informed consent document. Part B: Inclusion criterion 2/3/4/6/8/9/10/12 from part A. 1. Subjects must have metastatic or unresectable malignant tumour histologically or cytological confirmed and progressing to current therapy. Tumours must be refractory to standard therapy or tumours for which standard therapy does not exist, or subjects may be unable to receive standard therapy. 2. Subjects must have adequate renal and hepatic function: • Serum creatinine $\leq 1.5 \times \text{ULN}$ or creatinine clearance $\geq 30\text{ mL/min}$ on the basis of the Cockcroft-Gault glomerular filtration rate estimation: $(140 * \text{age}) \times (\text{weight in kg}) \times (0.85 \text{ if female}) / 72 \times (\text{serum creatinine in mg/dL})$ • Serum bilirubin $\leq 1.5 \times \text{ULN}$; with the following exception: subjects with known Gilbert disease who have serum bilirubin level $\leq 3 \times \text{ULN}$ may be enrolled • AST, ALT, and alkaline phosphatase $< 2.5 \times \text{ULN}$, with the following exceptions: oPatients with documented liver metastases: AST and ALT $< 5 \times \text{ULN}$ oPatients with documented liver or bone metastases: alkaline phosphatase $< 5 \times \text{ULN}$. 3. Subjects receiving therapeutic anticoagulation (such as low-molecular weight heparin or warfarin) should be on a stable dose. 4. For women of childbearing potential: agreement to remain abstinent (refrain from heterosexual intercourse) or use contraceptive methods with a failure rate of $< 1\%$ per year (when used consistently and correctly) during the treatment period and for at least 5 months after the last dose of atezolizumab / 6 months after the last dose of Futibatinib, in case of being included in Part B of the study. Please see protocol for more details. 5. For men: agreement to remain abstinent (refrain from heterosexual intercourse) or use contraceptive measures, and agreement to refrain from donating sperm, as defined in the protocol. (Please refer to section 3.1 Inclusion Criteria of iProfiler, Module 1 and 2 for full list)

Exclusion criteria

Part A: 1. Subjects with leptomeningeal disease. 2. Subjects with known unstable brain metastases should be excluded from this clinical trial. • Exception: Subjects who have undergone surgery and/or radiotherapy and in which brain metastases remain stable or decrease in size for six months after having completed therapy. 3. Subjects with spinal cord compression not definitively treated with surgery and/or radiation. 4. Subjects with uncontrolled intercurrent illness. 5. Subjects with inability to swallow tablets or capsules. 6. Subjects with known HIV, hepatitis B or hepatitis C infection. 7. Subjects with known history

of malabsorption Part B: 1.Pregnant or breastfeeding women. Females of childbearing potential must have a negative serum pregnancy test within 14 days prior to Day 1. This negative test will be valid for Cycle 1 day 1. In subsequent cycles, serum pregnancy test will be performed on day 1 of each cycle, with a +/- 3 day window, and prior to drug administration. 2.Any approved anticancer therapy within 3 weeks prior to initiation of study treatment. Exception: hormone-replacement therapy or oral contraceptives; Somatostatin analogues for the treatment of symptoms related with neuroendocrine tumours, gonadotropin-releasing hormone agonists or antiandrogens for prostate cancer. - Palliative radiotherapy for bone metastases > 2 weeks prior to Cycle 1, Day 1. 3.Major surgical procedure within 28 days prior to Cycle 1, Day 1 or anticipation of need for a major surgical procedure during the study 4.Treatment with an investigational agent within 4 weeks prior to Cycle 1, Day 1 (or within five half-lives of the investigational product, whichever is longer), with the exception of monoclonal antibodies (4 week wash-out period) 5.Subjects with known unstable brain metastases. Exception: treated brain metastasis which remain stable or responding 6 weeks after completing radiotherapy 6.Uncontrolled intercurrent illness that would limit compliance with study requirements 7.Subjects with active hepatitis B (HBV) or hepatitis C (HCV). Subjects with past HBV infection or resolved HBV infection are eligible. Subjects positive for HCV antibody are eligible only if polymerase chain reaction is negative for HCV RNA 8.Significant cardiovascular disease within 3 months prior to Cycle 1, Day 1, unstable arrhythmias or unstable angina. 9.Another primary malignancy other than disease under study within 2 years prior to Cycle 1 Day 1, unless consider at low risk of relapse at Investigator discretion. 10.History of severe allergic, anaphylactic, or other hypersensitivity reactions to chimeric or humanized antibodies or fusion proteins, fusion proteins or any excipient of the experimental product. 11.Prior allogeneic bone marrow transplantation or prior solid organ transplantation 13.Administration of a live, attenuated vaccine within 4 weeks prior to Cycle 1, Day 1 or anticipation that such a live attenuated vaccine will be required during the study. Influenza vaccination can be given during influenza season only but patients must not receive live, attenuated influenza vaccine within 4 weeks prior to Cycle 1, Day 1 or at any time during the study 14.History of active tuberculosis 15.Contraindications included in the product information of the drugs used in the study. Please refer to section 3.2 Exclusion Criteria for full list of iProfiler, Module 1 and 2.

Study design

Design

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

Recruitment

NL
Recruitment status: Recruiting
Start date (anticipated): 19-03-2019
Enrollment: 17
Type: Actual

Medical products/devices used

Product type: Medicine
Brand name: na
Generic name: futibatinib
Product type: Medicine
Brand name: Tecentriq
Generic name: atezolizumab
Registration: Yes - NL outside intended use

Ethics review

Approved WMO
Date: 12-06-2018
Application type: First submission
Review commission: METC NedMec
Approved WMO
Date: 25-01-2019
Application type: First submission
Review commission: METC NedMec
Approved WMO
Date: 24-03-2020
Application type: Amendment
Review commission: METC NedMec
Approved WMO
Date: 03-04-2020
Application type: Amendment
Review commission: METC NedMec
Approved WMO

Date:	28-04-2020
Application type:	Amendment
Review commission:	METC NedMec
Approved WMO	
Date:	11-06-2021
Application type:	Amendment
Review commission:	METC NedMec
Approved WMO	
Date:	22-11-2021
Application type:	Amendment
Review commission:	METC NedMec
Approved WMO	
Date:	11-02-2023
Application type:	Amendment
Review commission:	METC NedMec
Not approved	
Date:	12-05-2023
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO	
Date:	05-06-2023
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO	
Date:	14-06-2023
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)

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	CTIS2024-514238-19-00
EudraCT	EUCTR2017-005108-89-NL
CCMO	NL65937.031.18