

# A randomized, double-blind, placebo-controlled, phase III study comparing the combination of PDR001, dabrafenib and trametinib versus placebo, dabrafenib and trametinib in previously untreated patients with unresectable or metastatic BRAF V600 mutant melanoma

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\* Safety Run inTo determine the recommended regimen of PDR001 in combination with dabrafenib and trametinib for the randomized part (part 3)\* Biomarker cohortTo evaluate changes in the immune microenvironment and biomarker modulations upon treatment...

**Ethical review**

Approved WMO

**Status**

Recruitment stopped

**Health condition type**

Miscellaneous and site unspecified neoplasms benign

**Study type**

Interventional

## Summary

### ID

NL-OMON54792

### Source

ToetsingOnline

### Brief title

CPDR001F2301

### Condition

- Miscellaneous and site unspecified neoplasms benign
- Skin neoplasms malignant and unspecified

### Synonym

Melanoma

**Research involving**  
Human

## Sponsors and support

**Primary sponsor:** Novartis

**Source(s) of monetary or material Support:** Novartis Pharma

## Intervention

**Keyword:** dabrafenib, Melanoma, PDR001, trametinib

## Outcome measures

### Primary outcome

Safety Run in Part

- Incidence of DLTs during the first 8 weeks of treatment for each dose level associated with administration of PDR001 in combination of dabrafenib and trametinib.

Biomarker:

- Descriptive statistics of immune microenvironment and biomarker modulation values and changes from baseline by visit

Randomized part:

- Investigator assessed PFS (according to RECIST 1.1)

### Secondary outcome

part 1

- Safety: Incidence and severity of AEs and SAEs, including changes in

laboratory values, ECOG PS, vital signs, liver and cardiac parameters.

- Tolerability: Dose interruptions, reductions, and dose intensity
- PFS, OS, ORR, DOR, DCR by investigator\*s assessment according to RECIST 1.1

Part 2:

none

Part 3

- ORR, DOR and DCR by investigator\*s assessment according to RECIST 1.1
- Safety: Incidence and severity of AEs and SAEs, including changes in

laboratory values, ECOG PS, vital signs, liver assessments and cardiac assessments.

- Tolerability: Dose interruptions, reductions, and dose intensity
- Change from baseline in EORTC QLQ-C30, EQ-5D, and FACT-M melanoma subscale

## Study description

### Background summary

PDR001 is a high-affinity, ligand-blocking, humanized anti-PD-1 IgG4 antibody that blocks the binding of PD-L1 and PD-L2 to PD-1. PDR001 shows functional activity in vitro/ex vivo. The first in human study is ongoing. By the end of December 2015, a total of 58 patients had been treated in the study at the dose levels of 1, 3 and 10 mg/kg every 2 weeks and 3 and 5 mg/kg every 4 weeks. No patient experienced a dose limiting toxicity and the toxicity profile appears to be similar to that of marketed inhibitors of PD-1. The PK data support the use of flat dosing for PDR001 of 400 mg every 4 weeks.

Agents that enhance anti-tumor immunity are not effective in all cancer types, responses are often not durable, and many patients receive little or no benefit from treatment. Inhibitors of the PD-1/PD-L1 interaction are well tolerated and active across a range of cancer types, and will likely be one component of

combination therapies that increase the response rate and durability of treatment.

## **Study objective**

### **\* Safety Run in**

To determine the recommended regimen of PDR001 in combination with dabrafenib and trametinib for the randomized part (part 3)

### **\* Biomarker cohort**

To evaluate changes in the immune microenvironment and biomarker modulations upon treatment with PDR001 in combination with dabrafenib and trametinib

### **\* Randomized, placebo-controlled (part 3)**

To compare the anti-tumor activity of PDR001 in combination with dabrafenib and trametinib versus placebo plus dabrafenib and trametinib as measured by PFS per investigator's assessment according to RECIST 1.1

## **Study design**

This study has been designed as a phase III, multi-center study consisting of 3 parts.

- Part 1: Safety run-in part (Figure 4-1)
- Part 2: Biomarker cohort (Figure 4-2)
- Part 3: Double-blind, randomized, placebo-controlled part (Figure 4-3)

Netherlands is not participating in Part 1.

## **Intervention**

All participant will be treated with :

Dabrafenib, oral, 150mg BID

Trametinib, oral, 2 mg QD

### **Biomarker part**

Combination with dabrafenib and trametinib and PDR001 infusion 400mg. Depending of the recommended dose in the safety part, it is expected that this infusion will be either once every 4 weeks, or once every 8 weeks.

### **randomized part**

- > Arm 1: PDR001 infusion in combination with trametinib and dabrafenib
- > Arm 2: placebo in combination with dabrafenib and trametinib

## **Study burden and risks**

RISK: adverse events of treatment with dabrafenib and trametinib, with placebo or PDR001

Burden: Cycles of 4 weeks, Cycle 1,2,3: 2 visits, from cycle 4 onwards one visit

Infusion with PDR001, approx. 30 minutes

Physical examination: once per cycle.

Blooddraws : at least once per cycle, on PK days more frequent (max 3)

ECG: every cycle up to cycle 3. Cycle 1 2 12leadECGs, 1 ECG 12lead during cycle 2 and 3 and every 3rd cycle afterwards

MUGA scan during screening, cycle 1 and every 12 weeks afterwards

0-3 tumor biopsies: depending on the study part. optional additional biopsies are possible.

CT-/MRI-scan: during screening, cycle 4, every 8 weeks during first 6 months and every 12 weeks thereafter.

Skin photographs in case of skin lesions.

Questionnaires EORTC QLQ-C30, EQ-5D-5L, FACT-M : screening, cycle 3, every 8 weeks afterwards during first year, afterwards every 3 months.

ophthalmological assessments: on screening and cycle 2 day 1

## Contacts

### Public

Novartis

Haaksbergweg 16  
Amsterdam 1101 BX  
NL

### Scientific

Novartis

Haaksbergweg 16  
Amsterdam 1101 BX  
NL

## Trial sites

### Listed location countries

Netherlands

# Eligibility criteria

## Age

Adults (18-64 years)

## Inclusion criteria

### Part 1: Safety run-in

- Histologically confirmed, unresectable or metastatic melanoma with BRAF V600 mutation
- Aspartate transaminase (AST) < 2.5× ULN and Alanine transaminase (ALT) < 2.5× ULN
- ECOG performance status ≤ 1

### Part 2: Biomarker cohort

- Histologically confirmed, unresectable or metastatic melanoma with BRAF V600 mutation
- At least two cutaneous or subcutaneous or nodal lesions for tumor sample collection
- ECOG performance status ≤ 2

### Part 3: Double-blind, randomized, placebo-controlled part

- Histologically confirmed, unresectable or metastatic melanoma with BRAF V600 mutation
- ECOG performance status ≤ 2

## Exclusion criteria

### Part 1: Safety run-in

- Subjects with uveal or mucosal melanoma
- Any history of CNS metastases
- Prior systemic anti-cancer treatment for unresectable or metastatic melanoma
- Prior loco-regional treatment for unresectable or metastatic melanoma in the last 6 months
- Prior neoadjuvant and/or adjuvant therapy for melanoma completed less than 6 months
- Radiation therapy within 4 weeks prior to start of study treatment
- Active, known, suspected or a documented history of autoimmune disease, Parts 2 & 3: Biomarker cohort & double-blind, randomized, placebocontrolled part
- Subjects with uveal or mucosal melanoma
- Clinically active cerebral melanoma metastasis
- Prior systemic anti-cancer treatment for unresectable or metastatic melanoma
- Prior loco-regional treatment for unresectable or metastatic melanoma

in the last 6 month

- Prior neoadjuvant and/or adjuvant therapy for melanoma completed less than 6 months
- Radiation therapy within 4 weeks prior to start of study treatment
- Active, known, suspected or a documented history of autoimmune disease

## 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:	Recruitment stopped
Start date (anticipated):	13-12-2017
Enrollment:	8
Type:	Actual

### Medical products/devices used

Product type:	Medicine
Brand name:	Mekinist
Generic name:	Trametinib
Registration:	Yes - NL intended use
Product type:	Medicine
Brand name:	PDR001
Generic name:	PDR001
Product type:	Medicine

Brand name:	Tafinlar
Generic name:	Dabrafenib
Registration:	Yes - NL intended use

## Ethics review

Approved WMO	
Date:	20-12-2016
Application type:	First submission
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	26-04-2017
Application type:	First submission
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	09-05-2017
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	24-05-2017
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	04-07-2017
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	26-07-2017
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	09-10-2017
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	11-10-2017



Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	24-10-2017
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	20-11-2017
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	15-01-2018
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	06-02-2018
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	22-03-2018
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	26-03-2018
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	28-05-2018
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	21-06-2018
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	05-07-2018

Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	06-07-2018
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	26-07-2018
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	21-08-2018
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	21-12-2018
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	09-01-2019
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	17-01-2019
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	04-04-2019
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	11-04-2019
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	08-05-2019

Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	24-09-2019
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	18-10-2019
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	02-12-2019
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	23-06-2020
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	28-07-2020
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	07-09-2020
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	10-09-2020
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	09-04-2021
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	19-04-2021

Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	07-10-2021
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	19-10-2021
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	15-03-2022
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	18-03-2022
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	04-04-2022
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	02-09-2022
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	21-09-2022
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	12-01-2023
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	21-01-2023

Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	28-01-2023
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	06-02-2023
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	12-04-2023
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	09-05-2023
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	29-09-2023
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)
Approved WMO	
Date:	01-11-2023
Application type:	Amendment
Review commission:	METC Brabant (Tilburg)

## 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	EUCTR2016-002794-35-NL
ClinicalTrials.gov	NCT02967692
CCMO	NL59819.028.16