# A PHASE III, RANDOMIZED, DOUBLE-BLIND, PLACEBO-CONTROLLED STUDY OF ATEZOLIZUMAB PLUS CARBOPLATIN AND ETOPOSIDE WITH OR WITHOUT TIRAGOLUMAB (ANTI-TIGIT ANTIBODY) IN PATIENTS WITH UNTREATED EXTENSIVE-STAGE SMALL CELL LUNG CANCER.

Published: 19-03-2020 Last updated: 08-04-2024

The objective for this study is to evaluate the efficacy of tiragolumab plus atezolizumab and carboplatin and etoposide (CE) compared with placebo plus atezolizumab and CE in patients with untreated extensive-stage small cell lung cancer (ES-SCLC)...

**Ethical review** Approved WMO **Status** Recruitment stopped

**Health condition type** Respiratory and mediastinal neoplasms malignant and unspecified

**Study type** Interventional

# **Summary**

#### ID

NL-OMON54967

Source

ToetsingOnline

**Brief title** 

GO41767 / SCYCRAPER2

## Condition

- Respiratory and mediastinal neoplasms malignant and unspecified
- Respiratory tract neoplasms

## **Synonym**

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lung cancer, Small cell lung cancer

Research involving

Human

Sponsors and support

**Primary sponsor:** Roche

Source(s) of monetary or material Support: Sponsor

Intervention

**Keyword:** Atezolizumab, Phase III, Small cell lung cancer, Tiragolumab

Outcome measures

**Primary outcome** 

-Progression-free survival (PFS) after randomization, defined as the time from

randomization to the first occurrence of disease progression or death from any

cause (whichever occurs first), as determined by the investigator according to

Response Evaluation Criteria in Solid Tumors (RECIST) v1.1. (in the PAS)

-Overall survival (OS) after randomization, defined as the time from

randomization to death from any cause. (in the PAS)

Up to 50 months

**Secondary outcome** 

-Confirmed objective response rate (ORR), defined as the proportion of patients

with a complete response (CR) or partial response (PR) on two consecutive

occasions => 4 weeks apart, as determined by the investigator according to

RECIST v1.1. (in the PAS and FAS)

-Duration of response (DOR) for patients with confirmed objective response,

defined as the time from the first occurrence of a documented objective

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response to disease progression or death from any cause (whichever occurs first), as determined by the investigator according to RECIST v1.1 (in the PAS and FAS)

- -PFS rates at 6 months and at 12 months (PAS and FAS)
- -OS rates at 12 months and 24 months (PAS and FAS)
- -Time to sustained deterioration (TTSD) in patient-reported physical functioning and global health status, as measured by the European Organisation for the Research and Treatment of Cancer (EORTC) Quality-of-Life Questionnaire Core (QLQ-C30)/ (PAS and FAS)

Up to 50 months

# **Study description**

## **Background summary**

The current standard first-line treatment for patients with ES-SCLC is chemotherapie. Despite the survival benefit observed with this regimen, median survival remains at approximately 8 months, leaving considerable room for improvement in outcomes.

Tumor-cell killing by cytotoxic chemotherapy can reasonably be expected to expose the immune system to high levels of tumor antigens. Therefore, invigorating tumor-specific T-cell immunity by inhibiting PD-L1/PD-1 signaling and TIGIT/PVR may result in deeper

and more durable responses compared with standard chemotherapy alone Evaluating the safety and efficacy of these treatment combinations in patients with SCLC will enable future tests of this hypothesis.

In light of these observations, this study (Study GO41767) is designed to evaluate whether the anti-tumor effect of the combination of atezolizumab plus CE (IMpower133 regimen) can be enhanced by adding tiragolumab in treating patients with

chemotherapy-naive ES-SCLC.

Refer to section 1 of the protocol for a more elaborate background and study rationale.

## Study objective

The objective for this study is to evaluate the efficacy of tiragolumab plus atezolizumab and carboplatin and etoposide (CE) compared with placebo plus atezolizumab and CE in patients with untreated extensive-stage small cell lung cancer (ES-SCLC) on the basis of progression free survival (PFS) and overall survival (OS) in primary analysis set (PAS), patients without presence or history of brain metastases at baseline.

## Study design

This is a randomized, Phase III, global, multicenter, double-blinded, placebo-controlled study designed to evaluate the safety and efficacy of tiragolumab in combination with atezolizumab and CE compared with treatment with placebo in combination with atezolizumab and CE in patients who have ES-SCLC and are chemotherapy naive for their extensive-stage disease. After screening, there are 3 phases in this study: induction, maintenance and follow-up.

The study design is elaborately described in figure 1 and appendix 1 of the protocol.

#### Intervention

Eligible patients will be randomized 1:1 to receive one of the following treatment regimens during the induction phase

-Arm A: tiragolumab plus atezolizumab and CE

-Arm B: placebo plus atezolizumab and CE

Induction treatment will be administered on a 21-day cycle for 4 cycles. Following the induction phase, patients will continue maintenance therapy with either atezolizumab plus tiragolumab (Arm A) or atezolizumab plus placebo (Arm B).

## Study burden and risks

The general burden on the patient consists, among other things, of blood samples (every cycle), possible tumor biopsy, the use of the investigational products (every cycle) with which various possible adverse effects are associated.

## **Contacts**

## **Public**

Roche

Beneluxlaan 2A Woerden 3446GR NL

**Scientific** 

Roche

Beneluxlaan 2A Woerden 3446GR NL

## **Trial sites**

## **Listed location countries**

**Netherlands** 

# **Eligibility criteria**

#### Age

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

## Inclusion criteria

- Age > 18 years
- Eastern Cooperative Oncology Group performance status of 0 or 1
- Histologically or cytologically confirmed ES-SCLC
- No prior systemic treatment for ES-SCLC
- For patients who have received prior chemoradiotherapy for limited-stage SCLC: must have had treatment with curative intent and a treatment-free interval of at least 6 months between the last dose/cycle of chemotherapy, thoracic radiotherapy, or chemoradiotherapy and the diagnosis of ES-SCLC
- Measurable disease, as defined by Response Evaluation Criteria in Solid Tumors version 1.1
- Submission of a pre-treatment tumor tissue sample

- Adequate hematologic and end-organ function

## **Exclusion criteria**

- Symptomatic or actively progressing CNS metastases
- Spinal cord compression not definitively treated with surgery and/or radiation, or previously diagnosed and treated spinal cord compression without evidence that disease has been clinically stable for > 1 week prior to randomization
- Leptomeningeal disease
- Uncontrolled pleural effusion, pericardial effusion, or ascites requiring recurrent drainage procedures, hypercalcemia
- Known clinically significant liver disease
- Malignancies other than SCLC within 5 years prior to randomization, with the exception of those with a negligible risk of metastasis or death treated with expected curative outcome
- Active or history of autoimmune disease or immune deficiency
- Treatment with any other investigational agent with therapeutic intent within 28 days prior to randomization
- Pregnancy or breastfeeding, or intention of becoming pregnant during study treatment or within 5 months after the final dose of atezolizumab or tiragolumab or for 6 months after the final dose of carboplatin or etoposide.

# 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): 27-08-2020

Enrollment: 15

Type: Actual

## Medical products/devices used

Product type: Medicine

Brand name: Tecentriq

Generic name: Atezolizumab

Registration: Yes - NL outside intended use

Product type: Medicine

Brand name: Tiragolumab

Generic name: Tiragolumab

# **Ethics review**

Approved WMO

Date: 19-03-2020

Application type: First submission

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 05-06-2020

Application type: First submission

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 05-08-2020

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 27-10-2020

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

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30-05-2025

Date: 16-12-2020

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 30-12-2020

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 26-01-2021

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 26-03-2021

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 08-06-2021

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 14-07-2021

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 24-09-2021

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 25-10-2021

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

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(Assen)

Approved WMO

Date: 09-12-2021

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 27-12-2021

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 01-06-2022

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 30-08-2022

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 10-11-2022

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 02-12-2022

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 14-01-2023

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 21-05-2023

Application type: Amendment

Review commission: BEBO: Stichting Beoordeling Ethiek Bio-Medisch Onderzoek

(Assen)

Approved WMO

Date: 10-08-2023

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

EudraCT EUCTR2019-003301-97-NL

ClinicalTrials.gov NCT04256421 CCMO NL72355.056.20