# A randomized, open-label, multi-arm, two-part, phase II study to assess the efficacy and safety of multiple LXH254 combinations in patients with previously treated unresectable or metastatic BRAFV600 or NRAS mutant melanoma

Published: 28-09-2020 Last updated: 08-04-2024

Primary objective of this study: evaluate the efficacy of each combination arm, as measured by confirmed objective response rate (ORR) by local investigator's assessment per RECIST v1.1secondary objectives: - Safety & tolerability of each...

Ethical review Approved WMO

**Status** Recruitment stopped

**Health condition type** Skin neoplasms malignant and unspecified

**Study type** Interventional

# **Summary**

## ID

NL-OMON55115

Source

**ToetsingOnline** 

**Brief title** 

CLXH254C12201

#### Condition

Skin neoplasms malignant and unspecified

#### **Synonym**

BRAFV600 and NRAS mutant melanoma

#### Research involving

## **Sponsors and support**

**Primary sponsor:** Novartis

Source(s) of monetary or material Support: Farmaceutische industrie

## Intervention

Keyword: BRAFV600 mutation, Melanoma, NRAS mutation, Phase II

#### **Outcome measures**

#### **Primary outcome**

Objective response rate as determined by local assessment through (i)RECIST

v1.1

## **Secondary outcome**

Safety, tolerability, efficacy through duration of reponse, progression free survival, disease control rate and overall survival.

# **Study description**

## **Background summary**

Optimal treatment for irresectable and/or metastatic BRAFV600 and NRAS mutant melanoma is unknown, the proposed combination of therapy (LXH453 backbone with two combination drugs) is hoped to overcome intrinsic and / or acquired resistance to previous therapy.

## Study objective

Primary objective of this study: evaluate the efficacy of each combination arm, as measured by confirmed objective response rate (ORR) by local investigator's assessment per RECIST v1.1 secondary objectives:

- Safety & tolerability of each combination arm through incidence and severity of AE's icnluding changes in lab values, vital signs, cardic assessments dose interuptions, reductions and permanent discontinuation.
- Evaluation of efficiacy in each combination arm by duration of response,

progression free survival, and disease control rate using RECIST v1.1

- evaluation of overall survival of each combination arm.

## Study design

A randomized open label multi-center two-part phase II study, assessing two combinations of therapy.

Part 1: selection part, part 2: expansion.

#### Intervention

Three possible combination therapies:

LXH254, 400 mg BID in combination with LTT462, 200 mg QD LXH254, 400 mg BID in combination with trametinib, 0.5 mg QD => updated in PAM5 to: LXH254 200 mg BID in combination with trametinib 1 mg QD LXH254, 400 mg BiD in combination with ribociclib 400 mg QD => discontinued as of PAM5

Cycles of 28 days, all current study drug adiministered orally and continously.

## Study burden and risks

Risks and side-effects associated with the treatment provided.

Risks associated with the study assessments such as blooddraws, imaging and tumor biopsy.

Burdens: 4 week cycles. Cycle 1 and 2:3 visits.

From Cycle 3 onward: 1 visit.

Duration of visits: usually 1-2 hours unless additinol assessments (ECG/blooddraws) planned. Duration of a visit may extend from minimally 2 to max 6 ours.

Risks associated with assessments during visits, depending on combination therapy and type of visit: physical exam, blooddraws, ECG's / vital signs, imaging, pregnancy testing, tumor biopsy.

# **Contacts**

#### **Public**

**Novartis** 

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Scientific

**Novartis** 

Haaksbergweg 16 Amsterdam 1101 BX NL

# **Trial sites**

## **Listed location countries**

Netherlands

# **Eligibility criteria**

#### Age

Adults (18-64 years)

## Inclusion criteria

Protocol language states: Male or female must be >= 12 years, in the Netherlands only adults 18 years or older will be included.

- Histologically confirmed unresectable or metastatic cutaneous melanoma
- Previously treated for unresectable or metastatic melanoma:
- Participants with NRAS mutation:
- Pts must have received prior systemic therapy fo runresectable or metasttic melanoma with checkpoint inhibitors (CPIs) either an anti-PD-1/PD-L1 as as single agent or in combination with anti-CTLA-4, investigational agents, chemotherapy or locally directed anti-neoplastic agents.
- -Prior CPI therapy in the unresectable or metastatic setting is not required for participants who have progressed on or within 6 months of adj. therapy with a CPI
- -Prior therapy with T-VEC is allowed and will not be counted as a prior line of systematic therapy.
- -A maximum of two prior lines of systemic CPI-containing immunotherapy for unresectable or metastatic melanoma are allowed. Additional agents administered with a CPI are permitted.
- Particitpants must have documented confirmed progressive dissease as per iRecist v1.1 while on/after therapy with CPI. Confirmation is not required for

pts who remained on treatment > 6 months.

- Participants with BRAFV600 mutant disease:
- Pts must have received prior systemic therapy for unresectable or metatstic melanoma with a checkpoint inhibitor (CPI) either an anti-PD-1/PD-L1 as single agent or in combination with anti-CTLA-4, investigational agents, chemotherapy or locally directed anti-neoplastic agents. additionall pts must have receied targeted therapy with a RAFi as a single agent or in combination with a MEKi (+/- CPI allowed) as the last prior therapy.
- Prior CPI therapy in the unresectable or metastatic setting is not required for participants who have progresssed on or within 6 months of adjuvant CPI.
- Prior therapy with T-VEC is allowed and will not be counted as a prior line of systemic therapy.
- A maximum of two lines of CPI-containing therapy systemic immunotherapy for unresectable or metatstatic melanoma are allowed, additional agents with CPI are permitted.
- A maximum of one line of targeted therapy is allowed, and it must be the most recent line of therapy.
- If a participant discontinued targeted therapy for reasons other than disease progression, a switch to another targeted therapy regimen is allowed.
- Pts must have documented progressive disease as per recist v1.1 while on/after treatment with targeted therapy.

Other protocol-defined inclusion criteria may apply.

## **Exclusion criteria**

Treatment with any of the following anti-cancer therapies prior to the first dose of study treatment within the stated timeframes:

- \* <= 4 weeks for radiation therapy or <= 2 weeks for limited field radiation for palliation prior to the first dose of study treatment.
- \* <= 2 weeks for small molecule therapeutics.
- \* <= 4 weeks for any immunotherapy treatment including immune checkpoint inhibitors.
- \* <= 4 weeks for chemotherapy agents, locally directed anti-neoplastic agents or other investigational agents.
- \* <= 6 weeks for cytotoxic agents with major delayed toxicities, such as neitrosourea and mitomycin C.
- Participants participating in additional parallel investigational drug or medical device studies.
- All primary central nervous system (CNS) tumors or symptomatic CNS metastases that are neurologically unstable,
- History or current evidence of retinal vein occlusion (RVO) or current risk factors for RVO (e.g. uncontrolled glaucoma or ocular hypertension, history of hyperviscosity or hypercoagulability syndromes).
- Patients receiving proton pump inhibitors (PPI) which cannot be discontinued

3 days prior to the start study treatment and for the duration of the study.

- Any medical condition that would, in the investigator's judgment, prevent the patient's participation in the clinical study due to safety concerns or compliance with clinical study procedures.
- -Other protocol-defined inclusion/exclusion criteria may apply

# Study design

# **Design**

Study phase: 2

Study type: Interventional

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Treatment

## Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 06-04-2021

Enrollment: 18

Type: Actual

# Medical products/devices used

Product type: Medicine

Brand name: Kisqali

Generic name: Ribociclib

Registration: Yes - NL outside intended use

Product type: Medicine

Brand name: Mekinist

Generic name: Trametinib

Registration: Yes - NL outside intended use

# **Ethics review**

Approved WMO

Date: 28-09-2020

Application type: First submission

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

(Assen)

Approved WMO

Date: 23-11-2020

Application type: First submission

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

(Assen)

Approved WMO

Date: 01-12-2020

Application type: Amendment

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

(Assen)

Approved WMO

Date: 20-01-2021

Application type: Amendment

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

(Assen)

Approved WMO

Date: 29-03-2021

Application type: Amendment

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

(Assen)

Approved WMO

Date: 28-05-2021

Application type: Amendment

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

(Assen)

Approved WMO

Date: 17-06-2021

Application type: Amendment

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

(Assen)

Approved WMO

Date: 19-07-2021

Application type: Amendment

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

(Assen)

Approved WMO

Date: 13-10-2021

Application type: Amendment

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

(Assen)

Approved WMO

Date: 20-10-2021

Application type: Amendment

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

(Assen)

Approved WMO

Date: 02-11-2021

Application type: Amendment

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

(Assen)

Approved WMO

Date: 23-02-2022

Application type: Amendment

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

(Assen)

Approved WMO

Date: 10-06-2022

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: 28-12-2022

Application type: Amendment

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

(Assen)

Approved WMO

Date: 20-01-2023

Application type: Amendment

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

(Assen)

Approved WMO

Date: 04-03-2023

Application type: Amendment

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

(Assen)

Approved WMO

Date: 14-09-2023

Application type: Amendment

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

(Assen)

Approved WMO

Date: 13-10-2023

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

EudraCT EUCTR2020-000873-26-NL

Register

ClinicalTrials.gov CCMO ID

NCT04417621 NL74783.056.20