A Phase 3, Multicenter, Randomized, Double-Blind, Parallel-Arm, Placebo-Controlled Maintenance Study of Mirikizumab in Patients with Moderately to Severely Active Ulcerative Colitis

Published: 14-05-2018
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To test the hypothesis that mirikizumab is superior to placebo in maintaining clinical remission at Week 40 (Week 52 of continuous therapy) among patients induced into clinical remission with mirikizumab

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Gastrointestinal inflammatory conditions
Study type	Interventional

Summary

ID

NL-OMON55664

Source
ToetsingOnline

Brief title
LUCENT 2 - I6T-MC-AMBG

Condition

- Gastrointestinal inflammatory conditions

Synonym
Inflamatory bowel, Ulcerative Colitis

Research involving
Human

Sponsors and support

Primary sponsor: Eli Lilly
Source(s) of monetary or material Support: pharmaceutical industry

Intervention

Keyword: Maintenance, Mirikizumab, Treatment failed, Ulcerative Colitis

Outcome measures

Primary outcome

The primary endpoint is clinical remission at Week 40 among patients induced into clinical remission with mirikizumab induction treatment (Study AMAN). Clinical remission is based on the MMS and is defined in protocol.

Secondary outcome

- Clinical remission at Week 40, among patients induced into clinical response (that is, demonstrating clinical response or clinical remission) with mirikizumab at Week 12 of induction study (Study AMAN)
- Endoscopic remission at Week 40, among patients induced into clinical response with mirikizumab at Week 12 of the induction study
- Corticosteroid-free remission without surgery at Week 40, among patients induced into clinical response with mirikizumab during the induction study and who were receiving corticosteroids at induction baseline. For Week 40, this endpoint is defined as:

o Clinical remission at Week 40, and

o Symptomatic remission at Week 28, and

o No corticosteroid use for *12 weeks prior to Week 40

- Evaluate, in the subgroup of patients in whom biologic agents have failed or

caused intolerance, clinical remission at Week 40 among patients induced into clinical response with mirikizumab

- Evaluate, in the subgroup of patients in whom biologic agents have failed or caused intolerance, endoscopic remission at Week 40 among patients induced into clinical response with mirikizumab

- Histologic remission at Week 40, among patients induced into clinical response with mirikizumab

Study description

Background summary

Ulcerative colitis is a chronic disease of unknown etiology that is characterized by inflammation of the rectum and colon. Symptoms include diarrhea, rectal bleeding (RB), urgency, and tenesmus (a feeling of incomplete evacuation of the rectum after defecation). Ulcerative colitis has a relapsing* remitting course, meaning that many patients have intermittent disease flares that are interspersed with periods of remission. Treatment goals in UC include induction of remission (typically within a 6 to 12 week time frame) and maintenance of remission in the longer term (assessed over 52 weeks of continuous treatment in clinical trials). In both clinical practice and in clinical trials, clinical response and clinical remission are assessed by a combination of endoscopy (improvement in the endoscopic appearance of the mucosa and healing of ulcers) and patient-reported outcomes, including a reduction in stool frequency (SF) and a resolution of RB. Control of intestinal inflammation in UC is also associated with a reduction in the risk of hospitalization, colectomy, and in the longer term, UCassociated dysplasia and colorectal cancer.

Study objective

To test the hypothesis that mirikizumab is superior to placebo in maintaining clinical remission at Week 40 (Week 52 of continuous therapy) among patients induced into clinical remission with mirikizumab

Study design

Study AMBG is a phase 3, multicenter, randomized, double-blind, parallel-arm,

placebo-controlled study designed to evaluate the safety and efficacy of mirikizumab every 4 weeks (Q4W) subcutaneous (SC) in maintaining treatment response at Week 40 (that is, at Week 52 of continuous study drug treatment).

Intervention

Patients who achieved clinical response with blinded mirikizumab treatment during Study AMAN will be randomized 2:1 to blinded mirikizumab Q4W SC or blinded placebo.
Patients who responded to blinded placebo in their induction study will remain on blinded placebo in Study AMBG. Open-label rescue therapy with mirikizumab Q4W intravenous (IV) will be administered for 3 doses if these patients lose response.

Study burden and risks

At the time of this benefit/risk assessment, evaluation of unblinded safety data from the completed or ongoing clinical studies, including the unblinded period of the Study AMAC, which tests mirikizumab IV every 4 weeks (Q4W), have not revealed any dose-related safety or tolerability concerns. In addition, evaluation of blinded safety data in ongoing studies in psoriasis, UC and Crohn*s disease (CD) with mirikizumab SC Q4W administered up to 92 weeks, and IV Q4W for up to 52 weeks have not revealed safety or tolerability concerns. Across ongoing studies, immediate hypersensitivity reactions, including serious nonfatal anaphylaxis, have been reported at the onset or during IV infusion of mirikizumab. As noted in the IB, such reactions are considered by the sponsor to be related to mirikizumab and hence have been identified as adverse drug reactions (ADRs) .
Consult the most current IB for information regarding ADRs and potential risks with mirikizumab.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

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

Inclusion criteria

1. Have completed Study AMAN, with at least 1 study drug administration, without early termination of study drug, and underwent a Visit 5 (Week 12) endoscopy.
2. Are willing and able to complete the scheduled study assessments, including endoscopy and daily diary entry.
3. If female, must meet the contraception requirements.

Exclusion criteria

1. Participants diagnosed with Crohn's disease or inflammatory bowel disease-unclassified (indeterminate colitis) during the induction study AMAN.
2. Participants with a bowel resection or other surgery for the treatment of UC during the previous induction study AMAN, or are likely to require surgery for the treatment of UC during study AMBG.
3. Participants with evidence of colonic dysplasia or have been diagnosed with cancer of the gastrointestinal tract during study AMAN.
4. Participants diagnosed with clinically important infection including, but not limited to, hepatitis B, hepatitis C, HIV/AIDS, and active tuberculosis (TB) during the induction study AMAN.
5. Participants who initiate a new prohibited medication during the induction study AMAN.
6. Participants with certain laboratory abnormalities prior to start of AMBG that would require permanent discontinuation from study drug.

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):	16-08-2019
Enrollment:	12
Type:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	Mirikizumab
Generic name:	LY3074828

Ethics review

Approved WMO Date:	14-05-2018
Application type:	First submission
Review commission:	METC Amsterdam UMC
Approved WMO Date:	24-07-2018
Application type:	First submission
Review commission:	METC Amsterdam UMC
Approved WMO	

Date:	25-10-2018
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	26-02-2019
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	01-03-2019
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	21-08-2019
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	15-10-2019
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	16-12-2019
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	17-03-2020
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	10-03-2021
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO Date:	15-03-2021
Application type:	Amendment
Review commission:	METC Amsterdam UMC

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	EUCTR2017-003238-96-NL
CCMO	NL65501.018.18