

Hypothesis generating study to identify the changes in synovial tissue early after initiation of infliximab therapy

Gepubliceerd: 02-07-2007 Laatst bijgewerkt: 13-12-2022

Exploratory study to investigate the effects of TNF targeted therapy with infliximab on the synovial cell infiltrate, and the induction of apoptosis.

Ethische beoordeling	Positief advies
Status	Werving gestopt
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON20080

Bron

NTR

Verkorte titel

N/A

Aandoening

Rheumatoid arthritis

Ondersteuning

Primaire sponsor: Principal investigator: Prof. Dr. P.P. Tak

Academic Medical Center (AMC), Division of Clinical Immunology and Rheumatology

Overige ondersteuning: Supported by Centocor

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

1. Primary immunohistologic outcome: detection of apoptosis in synovial tissue within 1 or 24 hours after initiation of treatment. Analysis by immunohistochemical staining and electronmicroscopy.

2. Primairy serological outcome: To determine whether TNF targeted therapy with infliximab results in apoptosis of peripheral blood mononuclear cells within 1 or 24 hours after initiation of treatment.

Toelichting onderzoek

Achtergrond van het onderzoek

To provide more insight into the mechanism of action of anti-TNF therapy in RA, we investigated whether early apoptosis induction is an important mechanism of action of infliximab therapy. This was studied in both peripheral blood and the inflamed knee joint before 1 or 24 hours after infusion in patients with active RA.

Doel van het onderzoek

Exploratory study to investigate the effects of TNF targeted therapy with infliximab on the synovial cell infiltrate, and the induction of apoptosis.

Onderzoeksopzet

N/A

Onderzoeksproduct en/of interventie

Infliximab therapy (3mg/kg i.v.) according to the normal regimen. At baseline and 1 (n=5) hour or 24 hours (n=5) after the first infliximab infusion synovial biopsies were obtained from an inflamed knee joint. Peripheral blood mononuclear cells were obtained before and 1 and 24 hours after infliximab infusion in 20 patients (10 only blood, 10 with paired synovial biopsies). Serum was drawn at similar timepoints.

Contactpersonen

Publiek

Academic Medical Center (AMC), Department of Medicine, Division of Clinical Immunology and Rheumatology, F4-218,
P.O. Box 22660

C.A. Wijbrandts
Meibergdreef 9
Amsterdam 1100 DD
The Netherlands
+31 (0)20 5662171

Wetenschappelijk

Academic Medical Center (AMC), Department of Medicine, Division of Clinical Immunology and Rheumatology, F4-218,
P.O. Box 22660
C.A. Wijbrandts
Meibergdreef 9
Amsterdam 1100 DD
The Netherlands
+31 (0)20 5662171

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. RA patients with active disease at baseline assessed by the DAS28;
2. Be =>18 years of age;
3. Use concurrent methotrexate treatment (7.5-30 mg/week; stable since =>28 days before initiation) during the study. Subjects may be taking nonsteroidal anti-inflammatory drugs, provided the dose and frequency have been stable for at least 28 days. Subjects may be receiving prednisone therapy <=10 mg/day provided that the dosage has been stable for at least a months prior to entry.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Pregnancy;
2. Breastfeeding;
3. A history of or acute inflammatory joint disease of different origin e.g. mixed connective tissue disease, seronegative spondyloarthropathy, psoriatic arthritis, Reiter's syndrome, systemic lupus erythematosus or any arthritis with onset prior to age 16 years;

4. Acute major trauma;
5. Previous therapy at any time with:
 - a. TNF-directed monoclonal antibodies
p75 TNF receptor fusion protein;
6. Therapy within the previous 45 days with:
 - a. any experimental drug;
 - b. alkylating agents, e.g. cyclophosphamide, chlorambucil;
 - c. anti metabolites;
 - d. monoclonal antibodies;
 - e. growth factors;
 - f. other cytokines;
7. Therapy within the previous 28 days with:
 - a. parenteral or intraarticular corticoid injections;
 - b. oral corticosteroid therapy exceeding a prednisone equivalent of 10 mg daily;
 - c. present use of DMARDs other than methotrexate;
8. Fever (orally measured $> 38^{\circ}\text{C}$), chronic infections or infections requiring anti-microbial therapy;
9. Manifest cardiac failure (stage III or IV according to NYHA classification);
10. Progressive fatal disease/terminal illness;
11. A hematopoietic disease;
12. Body weight of less than 45 kg.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Anders
Toewijzing:	N.v.t. / één studie arm
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	01-10-2003
Aantal proefpersonen:	20
Type:	Werkelijke startdatum

Ethische beoordeling

Positief advies	
Datum:	02-07-2007
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL983

Register

NTR-old
Ander register
ISRCTN

ID

NTR1011
:
ISRCTN20710193

Resultaten

Samenvatting resultaten

Manuscripts in progress.

