

Phase II study on the feasibility and efficacy of consolidation with 90Y-ibritumomab tiuxetan in patients with relapsed or refractory aggressive B-cell non-Hodgkin's lymphoma having achieved partial or complete remission after induction with R-PECC chemotherapy.

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Addition of 90Y-ibritumomab tiuxetan after R-PECC is feasible and the efficacy meets expectations as described in the protocol.

Ethische beoordeling	Positief advies
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON24909

Bron

Nationaal Trial Register

Verkorte titel

HOVON 85 NHL

Aandoening

Aggressive B-cell NHL: FL grade 3b and DLBCL

Ondersteuning

Primaire sponsor: Stichting Hemato-Oncologie voor Volwassenen Nederland (HOVON)

P/a HOVON Data Center
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Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

- The incidence of grade ≥ 3 adverse events after treatment with 90Y-ibritumomab tiuxetan.
- Failure free survival measured from the start of 90Y-ibritumomab tiuxetan

Toelichting onderzoek

Achtergrond van het onderzoek

Study phase: II

Study objective:

Evaluation of feasibility and efficacy of consolidation with 90Y-ibritumomab tiuxetan in patients with relapsed or refractory aggressive B-cell non-Hodgkin's lymphoma (NHL) having achieved partial or complete remission after induction with R-PECC chemotherapy

Patient population:

Patients with histologically confirmed CD20 positive aggressive NHL (FL grade 3b, DLBCL) refractory or in first or second relapse, age > 18 years with WHO performance status 0-2, after / not eligible for autologous stem cell transplantation (ASCT)

Study design:

Prospective, multicenter, non-randomized

Duration of treatment:

Expected duration of treatment is about 5-6 months

Doel van het onderzoek

Addition of 90Y-ibritumomab tiuxetan after R-PECC is feasible and the efficacy meets expectations as described in the protocol.

Onderzoeksopzet

- prior to start treatment
- after 2 cycles of R-PECC

- after 4 cycles of R-PECC

- after 90 Y-ibritumomab tiuxetan treatment

- in follow-up every 2 months during the first year, every 4 months during the second year and every 6 months thereafter

Onderzoeksproduct en/of interventie

Patients will be treated with R-PECC (rituximab, lomustine, etoposide, chlorambucil, prednisone) and 90Y-ibritumomab tiuxetan.

All patients, who have not attained at least a stable disease after 2 cycles of R-PECC and a PR after 4 cycles of R-PECC, will go off protocol treatment.

Patients in PR or CR after 4 cycles of R-PECC will be treated with a single dose of 90Y-ibritumomab tiuxetan.

A cytoreductive pre-phase is permitted.

Contactpersonen

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Histologically confirmed aggressive B-cell NHL according to the World Health Organization (WHO) classification: Follicular lymphoma grade 3b or Diffuse large B-cell lymphoma
2. Refractory disease or histologically confirmed first or second relapse (Refractory is defined as no response or partial remission according to CT. Patients in partial response (PR) can only be included in case of positive PET scan or positive biopsy)
3. CD20 positive (assessed at 1st diagnosis or from fresh histology at confirmation of relapse or immunophenotyping of circulating CD20-positive NHL cells from peripheral blood)
4. Current measurable disease, i.e. measurable in two perpendicular dimensions on physical examination or computerized tomography (CT) scan using standardized response criteria for NHL (Cheson et al, 1999)
5. Age > 18 years
6. WHO performance status 0, 1 or 2
7. Life expectancy of at least 3 months
8. Absolute neutrophil count > 1.5 x 10⁹/l and platelet count > 100 x 10⁹/l (unless caused by NHL infiltration in the bone marrow)
9. Written informed consent

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Prior allogeneic stem cell transplantation-
2. Prior radioimmunotherapy
3. Patients who have received chemotherapy or radiotherapy within 6 weeks prior to study entry or who have not recovered from toxicities related to prior therapies
4. Eligibility for ASCT- ASCT within 12 months of study entry
5. Investigational drugs within 4 weeks prior to entry on this study or persistent toxic side effects of such therapy
6. Treatment with external-beam radiation therapy to more than 25% of active bone marrow
7. A history of intolerance to rituximab
8. Severe cardiac, pulmonary, neurological, psychiatric or metabolic disease which could compromise participation in the study, or serious underlying medical conditions which could impair the ability of the patient to participate in the trial
9. Hepatic dysfunction, bilirubin or transaminases ≥ 2.5 x upper normal limit (unless caused by the NHL)
10. Renal dysfunction, serum creatinine ≥ 180 mmol/l or clearance ≤ 40 ml/min (unless caused by the NHL)
11. Active uncontrolled infections
12. Patients known to be HIV-positive
13. Current or chronic hepatitis B or hepatitis C infection
14. Symptomatic NHL localization in the central nervous system (CNS). Lumbar puncture is not required unless CNS involvement with NHL is clinically suspected
15. Transformed indolent lymphoma
16. Post-transplant lymphoproliferative disorder
17. Pregnant or breast-feeding female patients. Negative serum pregnancy test at study is mandatory for female patients of childbearing potential

Onderzoeksopzet

Opzet

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

Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-08-2008
Aantal proefpersonen:	60
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies	
Datum:	15-07-2008
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	NL1330
NTR-old	NTR1380
Ander register	: H085
ISRCTN	ISRCTN wordt niet meer aangevraagd

Resultaten

Samenvatting resultaten

N/A