

Randomized phase III study in elderly patients with a multiple myeloma on the value of Thalidomide added to Melphalan plus Prednisone.

Gepubliceerd: 06-09-2005 Laatst bijgewerkt: 18-08-2022

The hypothesis to be tested is that the outcome in arm B is better than in arm A.

Ethische beoordeling Positief advies

Status Werving gestopt

Type aandoening -

Onderzoekstype Interventie onderzoek

Samenvatting

ID

NL-OMON25578

Bron

NTR

Verkorte titel

HOVON 49 MM

Aandoening

Multiple myeloma

Ondersteuning

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

P/a HOVON Data Center

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Overige ondersteuning: Stichting Hemato-Oncologie voor Volwassenen Nederland (HOVON)

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

1. Event free survival (i.e. time from registration to induction failure, death, progression or relapse whichever occurs first);

2. Response rate (CR or PR).

Toelichting onderzoek

Achtergrond van het onderzoek

Study phase:

phase III.

Study objectives:

evaluation of the effect of Thalidomide added to the standard induction therapy with Melphalan and Prednisone in myeloma patients.

Patient population:

patients with multiple myeloma, previously untreated, Salmon & Durie stage IB, II and III, age > 65 years.

Study design:

prospective, multicenter, randomized.

Duration of treatment:

expected duration of 8 chemotherapy cycles is 8 months.

Doel van het onderzoek

The hypothesis to be tested is that the outcome in arm B is better than in arm A.

Onderzoeksopzet

N/A

Onderzoeksproduct en/of interventie

Patients will be randomized on entry between:

Arm A:

8 cycles of Melphalan + Prednisone.

Arm B:

8 cycles of Melphalan + Prednisone + Thalidomide.

Non responders will be taken off protocol treatment after 3 cycles of therapy. If after 8 cycles a plateau-phase is reached therapy can be stopped. If after 8 cycles a patient still shows improvement of the disease, therapy will be continued until a plateau phase has been reached.

Thalidomide (50 mg/day) in arm B will be continued until disease progression.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Patients with a confirmed diagnosis of multiple myeloma stage Ib, II or III according to the Salmon & Durie criteria;
2. Age > 65 years;
3. WHO performance status 0-3;
4. Measurable tumorparameter (M-protein or Bence Jones proteinuria);
5. Written informed consent.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Known intolerance to Thalidomide;
2. Systemic AL amyloidosis;
3. Polyneuropathy;
4. Severe cardiac dysfunction (NYHA classification II-IV);
5. Severe pulmonary dysfunction;
6. Significant hepatic dysfunction (serum bilirubin \geq 30 mmol/l or transaminases \geq 2.5 times normal level), unless related to myeloma;
7. Renal failure with dependency on dialysis;
8. Patients with active, uncontrolled infections;

9. Pre-treatment with cytostatic drug or alpha interferon;
10. Patients known to be HIV-positive;
11. Patients with a history of active malignancy during the past 5 years with the exception of basal carcinoma of the skin or stage 0 cervical carcinoma.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Geneesmiddel

Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	01-08-2002
Aantal proefpersonen:	420
Type:	Werkelijke startdatum

Ethische beoordeling

Positief advies	
Datum:	06-09-2005
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	NL195
NTR-old	NTR232
Ander register	: Ho49
ISRCTN	ISRCTN90692740

Resultaten

Samenvatting resultaten

N/A