# A Phase 1, Single-Center, Open-Label, Dose Optimization Study of ABP-700 in Healthy, Adult Subjects

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This is a normal healthy volunteer study designed to assess the safety and tolerability of bolus doses of ABP-700 in the presence of pre-medications commonly used in the monitored anesthesia care (MAC) setting.

**Ethische beoordeling** Positief advies **Status** Werving gestart

Type aandoening

Onderzoekstype Interventie onderzoek

# Samenvatting

#### ID

NL-OMON25663

#### **Bron**

Nationaal Trial Register

#### **Aandoening**

Preliminary safety study

#### **Ondersteuning**

**Primaire sponsor:** Annovation Biopharma, a wholly owned subsidiary of The Medicines

Company

Overige ondersteuning: The Medicines Company

## Onderzoeksproduct en/of interventie

#### **Uitkomstmaten**

#### Primaire uitkomstmaten

Safety and Tolerability as assessed through: AEs, physical examination, safety laboratory tests (serum chemistry, hematology, urinalysis, and coagulation), vital signs (blood pressure,

1 - A Phase 1, Single-Center, Open-Label, Dose Optimization Study of ABP-700 in Heal ... 19-05-2025

heart rate, and body temperature), ECGs (12-lead ECG and 3-lead ECG), infusion site reaction monitoring, and respiratory function (respiratory pattern and occurrence of apnea).<br/>
Pharmacodynamic driven dose optimization as assessed by MOAA/S and BIS.

# **Toelichting onderzoek**

#### Achtergrond van het onderzoek

Background: The highly dynamic nature of surgical and procedural intervention, as well as the short duration of these procedures, demands the development of potent yet rapidly reversible anesthetic agents. Ideally, the pharmacokinetics (PK) and pharmacodynamics (PD) of these anesthetic agents should be better matched to both the procedures being performed. ABP-700 is a newly developed, potent, positive allosteric modulator of the GABAA receptor. Its mechanism of action is via potentiation of GABAA receptor activation produces its sedative and anesthetic effects. ABP-700 contains an ester bond that was precisely designed to undergo rapid hydrolysis in the body by nonspecific tissue esterases that produce an inactive carboxylic acid metabolite.

Purpose: To assess the safety and tolerability of bolus doses of ABP-700 in the presence of pre-medications commonly used in the monitored anesthesia care (MAC) setting. To optimize bolus dosing of ABP-700 in combination with pre-medications

Design: This study is an open-label, parallel, bolus dose study designed to assess the Safety, Tolerability, Pharmacokinetics, and Pharmacodynamics of ABP-700 in combination with premedications commonly used in the anesthesia setting. Safety and tolerability will be assessed through monitoring of AEs, physical examination, safety laboratory tests (serum chemistry, hematology, arterial blood gas, urinalysis, and coagulation), vital signs (blood pressure, heart rate, and body temperature), ECGs (12-lead ECG and 3-lead ECG), infusion site reaction monitoring, and respiratory function (respiratory pattern and occurrence of apnea). The PK properties of ABP-700 will also be evaluated.

#### Doel van het onderzoek

This is a normal healthy volunteer study designed to assess the safety and tolerability of bolus doses of ABP-700 in the presence of pre-medications commonly used in the monitored anesthesia care (MAC) setting.

#### Onderzoeksopzet

Screening (-28 days), Check-in (-1 day), Study Days (1-2), Follow-up (day 4-6)

#### Onderzoeksproduct en/of interventie

**ABP-700** 

2 - A Phase 1, Single-Center, Open-Label, Dose Optimization Study of ABP-700 in Heal ... 19-05-2025

# Contactpersonen

#### **Publiek**

Hazneplein 1 M.M.R.F. Struys Groningen 9713 EZ The Netherlands

#### Wetenschappelijk

Hazneplein 1 M.M.R.F. Struys Groningen 9713 EZ The Netherlands

#### **Deelname** eisen

# Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- 1. Healthy, adult, men and women, 18-55 years of age, inclusive.
- 2. Continuous non-smoker who has not used nicotine-containing products for at least 6 months prior to the first dose.
- 3. Body Mass Index (BMI)  $\geq$  17.5 and  $\leq$  30.0 kg/m2, inclusive, and a total body weight >50 kg, at screening and check-in.
- 4. Medically healthy with no clinically significant out of range laboratory findings, vital signs or ECGs, as deemed by the PI.
- 5. Women of non-childbearing potential, i.e., must have undergone one of the following sterilization procedures at least 6 months prior to the first dose:
- a. hysteroscopic sterilization;
- b. bilateral tubal ligation or bilateral salpingectomy;
- c. hysterectomy;
- d. bilateral oophorectomy;
  - 3 A Phase 1, Single-Center, Open-Label, Dose Optimization Study of ABP-700 in Heal ... 19-05-2025

or be postmenopausal with amenorrhea for at least 1 year prior to the first dose and FSH serum levels consistent with postmenopausal status (greater than 30 IU/L).

- 6. Women of child bearing potential must agree to use one or more of the following forms of contraception from the time of signing the informed consent form through 90 days following the last administration of study medication: hormonal (i.e., oral, transdermal, implant, or injection); double barrier (i.e., condom, diaphragm with spermicide); intrauterine device (IUD); vasectomized partner (six months minimum); or abstinence.
- 7. Non-vasectomized men must agree to use a condom with spermicide or abstain from sexual intercourse during the study until 90 days beyond the last dose of study medication. Men who have been vasectomized less than 4 months prior to study start must follow the same restrictions as non-vasectomized men.
- 8. Men must agree not to donate sperm from the first dose until 90 days after dosing.
- 9. Obtain a score of I or II using the Modified Mallampati Scoring.
- 10. Understand the study procedures in the informed consent form(s) (ICF(s)), and be willing and able to comply with the protocol.
- 11. Agree not to make any public disclosure of personal medical data related to the study or other information related to the study, including posting on any website or social media site (e.g., Facebook, Twitter, etc.).

# Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- 1. History or presence of significant cardiovascular disease, or cardiovascular disease risk factors, hyperlipidemia, coronary artery disease, or any known genetic pre disposition to cardiac arrhythmia (including long QT syndrome).
- 2. History or presence of significant pulmonary, hepatic, renal, hematological, gastrointestinal, endocrine, immunologic, dermatologic, neurological (inclusive of any seizure disorder), or psychiatric disease.
- 3. History of any illness that, in the opinion of the PI, might confound the results of the study or pose an additional risk to the subject by their participation in the study.
- 4. Surgery within the past 90 days prior to dosing judged by the PI to be clinically relevant.
- 5. History of febrile illness within 5 days prior to dosing.
- 6. History or presence of alcoholism, drug abuse or illicit drug use within the past 2 years.
  - 4 A Phase 1, Single-Center, Open-Label, Dose Optimization Study of ABP-700 in Heal ... 19-05-2025

- 7. History of regular alcohol consumption exceeding 7 drinks/week for women or 14 drinks/week for men [1 drink = 5 ounces (150 mL) of wine or 12 ounces (360 mL) of beer or 1.5 ounces (45 mL) of hard liquor] within 6 months of screening.
- 8. Hypersensitivity or idiosyncratic reaction to components of ABP-700 (meglumine and/or sulfobutylether-beta-cyclodextrin), fentanyl, sufentanil, remifentanil, midazolam, egg, egg products, soybeans, soy, or to compounds related to the study medications.
- 9. Women who are pregnant or lactating.
- 10. Positive results for the urine drug screen and alcohol breath test at screening or check-in (Day -1).
- 11. Positive urine cotinine at screening.
- 12. Positive results at screening for human immunodeficiency virus (HIV), hepatitis B surface antigen (HBsAg), or hepatitis C antibodies (HCV).
- 13. Single 12-lead ECG demonstrating QTcF interval >450 msec at screening and/or Day -1.
- 14. Unable to refrain from or anticipates the use of any drug, including prescription and non-prescription medications, herbal remedies, or vitamin supplements beginning approximately 14 days prior to dosing and throughout the study, with the exception of oral contraceptives. Ibuprofen (1.2 g per 24 hour period) may be permitted during the study at the PI's discretion.
- 15. Use of any drugs known to be hormonal replacement therapy, inducers of cytochrome P450 (CYP) enzymes, including St. John's Wort, within 28 days prior to the first dose of study medication. Appropriate sources will be consulted by the PI to confirm lack of PK/PD interaction with study medication(s).
- 16. Have a diet incompatible with the clinic diet, in the opinion of the PI, within the 28 days prior to the first dose of study medication(s), and throughout the study.
- 17. Blood donation or significant blood loss within 90 days prior to dosing.
- 18. Plasma donation within 7 days prior to dosing.
- 19. Participation in another clinical trial within 90 days prior to dosing. The 90-day window will be derived from the date of the last study procedure (such as last blood collection or dosing) in the previous study to Day 1 of the current study.
- 20. Subjects who previously received ABP-700.

# **Onderzoeksopzet**

#### **Opzet**

Type: Interventie onderzoek

Onderzoeksmodel: Parallel

Toewijzing: Niet-gerandomiseerd

Blindering: Open / niet geblindeerd

Controle: N.v.t. / onbekend

#### **Deelname**

Nederland

Status: Werving gestart

(Verwachte) startdatum: 19-05-2015

Aantal proefpersonen: 80

Type: Verwachte startdatum

# **Ethische beoordeling**

Positief advies

Datum: 30-04-2015

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 NL5027 NTR-old NTR5173

Ander register : 150098-CS0240

# Resultaten