

## **KURZPROTOKOLL GAZAI**

<b>Öffentlicher Titel</b>	Phase II Studie zu Obinutuzumab bei follikulärem Lymphom in der frühen Phase
<b>Wissenschaftl. Titel</b>	Therapy of Nodal Follicular Lymphoma (WHO Grade 1/2) in Clinical Stage I/II Using Response Adapted Involved Site Radiotherapy in Combination With Gazyvaro
<b>Kurztitel</b>	GAZAI
<b>Studienart</b>	multizentrisch, Therapiestudie, offen/unverblindet, einarmig
<b>Studienphase</b>	Phase II
<b>Erkrankung</b>	Blut: Non-Hodgkin-Lymphome (NHL), niedrig-maligne: andere NHL - neu diagnostiziert / de novo
<b>Einschlusskriterien</b>	<ul style="list-style-type: none"><li>- Centrally reviewed CD20-positive follicular lymphoma grade 1/2 based on WHO classification (2016)</li><li>- Untreated (radiation-, chemo- or immunotherapy) nodal lymphoma (including involvement of Waldeyer's ring)</li><li>- ECOG: 0-2</li><li>- Stage: clinical stage I or II (Ann Arbor classification)</li><li>- Risk profile: Largest diameter of the lymphoma * 7 cm (sectional images)</li><li>- Written informed consent and willingness to cooperate during the course of the trial</li><li>- Adequate hematologic function (unless abnormalities are related to NHL), defined as follows: Hemoglobin 9.0 g/dL; absolute neutrophil count <math>1.5 \times 10^9/L</math>, Platelet count <math>75 \times 10^9/L</math></li><li>- Capability to understand the intention and the consequences of the clinical trial</li><li>- Adequate contraception for men and women of child-bearing age during therapy and 18 months thereafter</li><li>- Patients with non-active hepatitis B infection (HBsAg neg/HBcAB pos/HBV DNA neg) under 1-year require prophylactic anti-viral therapy (e.g. Entecavir®) possible (see also 5.6. Prior and Concomitant Disease)</li></ul>
<b>Ausschlusskriterien</b>	<ul style="list-style-type: none"><li>- Extra nodal manifestation</li><li>- Secondary cancer in the patient's medical history (exclusion: basalioma, spinalioma, melanoma in situ, bladder cancer T1a, non-metastasized solid tumor in constant remission, which was diagnosed &gt;3 years ago)</li><li>- Concomitant diseases: congenital or acquired immune-deficiency syndromes, active infections including viral hepatitis (serology positive for HBsAg or HBcAb in combination positive HBV DNA), uncontrolled concomitant diseases including significant cardiovascular or pulmonary disease (see also 5.6. Prior and Concomitant Disease)</li><li>- Severe psychiatric disease</li><li>- Pregnancy / lactation</li><li>- Known hypersensitivity against Gazyvaro (Obinutuzumab) or drugs with similar chemical structure or any other additive of the pharmaceutical formula of the study drug</li><li>- Participation in another interventional trial or follow-up period of a competing trial which can influence the results of this current trial</li><li>- Creatinine &gt; 1.5 times the upper limit of normal (ULN) (unless creatinine clearance normal), or calculated creatinine clearance &lt; 40 mL/min</li><li>- AST or ALT &gt; 2.5 x ULN</li><li>- Total bilirubin <math>\geq 1.5 \times ULN</math></li><li>- INR &gt; 1.5 x ULN</li><li>- PTT or aPTT &gt; 1.5 x the ULN</li></ul>
<b>Alter</b>	18 Jahre und älter

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<b>Sponsor</b>	Universität Heidelberg (Hauptsponsor)
<b>Förderer</b>	Roche Pharma AG
<b>Registrierung in anderen Studienregistern</b>	ClinicalTrials.gov NCT03341520 EudraCT 2016-002059-89 (primäres Register)
<b>Links</b>	<a href="#">Studiendokumente zum Download (roXtra)</a>