KURZPROTOKOLL
ENDURE-CML-IX

Öffentlicher Titel	Phase II Studie zu AOP2014 bei CML nach Absetzen der TKI-Therapie
Wissenschaftl. Titel	Efficacy and Safety of Pegylated Proline Interferon Alpha 2b (AOP2014) in Maintaining Deep Molecular Remissions in Patients With Chronic Myeloid Leukemia (CML) Who Discontinue ABL-Kinase Inhibitor Therapy - a Randomized Phase II, Multicenter Trial With Post-study Follow-up
Kurztitel	ENDURE-CML-IX
Studienart	multizentrisch, prospektiv, Therapiestudie, randomisiert, zweiarmig, Investigator Initiated Trial (IIT), einfach verblindet
Studienphase	Phase II
Erkrankung	Blut: Myeloische Neoplasien/Dysplasien: Chronische myeloische Leukämie (CML)
Einschlusskriterien	- Signed written informed consent form - Capability and willingness to comply with study procedures and ability to self-administration of the study drug - Male or female aged >= 18 years - At least three years of TKI therapy - BCR-ABL-positive, chronic phase CML patients with a transcript level according to the international scale (IS) of at least MR4, or better (MR4.5, MR5). MR4 is defined as (i) detectable disease <=0.01% BCR-ABL IS or (ii) undetectable disease in cDNA with >=10,000 ABL or >=24,000 GUS transcripts for at least one year. There have to be at least three documented PCR-results with MR4 or better within the last year (+/- 2 months) before study entry. One of these PCR´s must be a confirmatory MR4 measurement prior to randomization by an EUTOS-certified laboratory at the Universities of Mannheim or Jena. No PCR-results in the last year before randomisation can be worse than MR4 - Patients who had failed to discontinue TKI in a prior discontinuation attempt are eligible for this protocol, if they fulfil criterion 5 after retreatment with TKI. A prior TKI discontinuation failure must be specifically indicated at inclusion and documented - Adequate organ function: especially total bilirubin, lactate dehydrogenase [LDH], aspartate aminotransferase [AST], alanine aminotransferase [ALT] and coagulation parameters <= 2 x upper limit of normal (ULN) - Adequate hematological parameters: absolute neutrophil count >= 1.2 x 10^9/L; platelet count >= 100 x 10^9/L; leukocyte count >= 2.5 x 10^9/L; lymphocytes >= 1.0 x 10^9/L; hemoglobin >= 9.0 g/dL or 5.59 mmol/L - Female patients with reproductive potential must agree to maintain highly effective methods of contraception by practicing abstinence or by using at least two methods of birth control from the date of consent through the end of the study. If abstinence could not be practiced, a combination of hormonal contraceptive (oral, injectable, or implants) and a barrier method (condom, diaphragm with a vaginal spermicidal agent) has to be used. Also male patients must agree to use condoms during study participation. - Negative serum pregnancy test in women of childbearing potential. Urine pregnancy test would also be accepted - Date of diagnosis must be known - The following parameters from diagnosis must be known: palpable spleen size enlargement in cm below costal margin, platelet count, percentages of blasts, basophils, and eosinophils in peripheral blood. These values must have been recorded. The values of the Sokal, the EURO, the EUTOS, and the ELTS score would be desirable - Tested HIV sero-negativity and tested negative against hepatitis B or C
Ausschlusskriterien	- History of autoimmune disease - Immunosuppressive treatment of any kind

- Prior allogeneic stem cell Transplantation
- Prior pegylated IFN therapy. Prior low dose conventional IFN treatment with <= 3 x 3 Mio I.E. / week for less than 1 year is acceptable
- Prior history of TKI resistance, accelerated phase or blast crisis
- Hypersensitivity/allergy to the active substance or excipients of the formulation
- Severe hepatic dysfunction or decompensated cirrhosis
- Intake of Telbivudin
- Thyroid disease that cannot be controlled by conventional therapy
- Epilepsy or other disorders of the central nervous system
- Severe cardiac disease history including unstable or uncontrolled cardiac disease in the previous 6 months
- Any history of retinopathy e.g. retinal detachment, degeneration or thromboembolic events
- Clinically significant concomitant diseases or conditions, which, in the opinion of the investigator, would lead to an unacceptable risk for the patient to participate in the study (please refer also to the actual Investigator Brochure)
- Other malignancy, except adequately treated superficial bladder cancer, basal or squamous cell carcinoma of the skin, or other cancer(s) for which the patient has been disease free for more than 3 years
- Active or uncontrolled infections at the time of randomization
- Pregnant and/or nursing women
- Use of antibiotic therapy within the last 2 weeks prior to randomization
- Concurrent use of molecular targeted therapy
- Known HIV sero-positivity or known active hepatitis B or C infection
- Participation in another clinical study with other investigational drugs within 14 days prior to randomization
- Vaccination within 1 month prior to randomization
- Any medical, mental, psychological or psychiatric condition (particularly severe depression, suicidal ideation or suicide attempt) that in the opinion of the investigator would not permit the patient to complete the study or comply to study procedures
- Drug and/or alcohol abuse

Alter	18 Jahre und älter
Molekularer Marker	BCR-ABL1
Prüfzentren	**Innere Medizin 2** (Nachbeobachtung) Hämatologie / Medizinische Onkologie Theodor-Stern-Kai 7 60590 Frankfurt am Main Verena Schäfer Tel: 069 6301-6367 Fax: 069 6301-83655 vschaefer@em.uni-frankfurt.de
Sponsor	Philipps-Universität Marburg
Förderer	AOP Orphan Pharmaceuticals AG
Registrierung in anderen Studienregistern	EudraCT 2016-001030-94 ClinicalTrials.gov NCT03117816
Links	Studiendokumente zum Download (roXtra)