

Öffentlicher Titel	Randomisierte Studie zu ON 01910.Na in refraktärer MDS mit Blastenexzess
Wissenschaftl. Titel	Phase III MultiCenter Randomized Controlled Study to Assess Efficacy and Safety of ON 01910.Na 72-Hr Continuous IV Infusion in MDS Patients With Excess Blasts Relapsing After or Refractory to or Intolerant to Azacitidine or Decitabine
Kurztitel	ONO 1910
Studennummer KN/ELN	LN_NN_2010_473
Studiengruppe	NN
Studienart	multizentrisch, randomisiert, offen
Studienphase	Phase III
Erkrankung	Myelodysplastisches Syndrom (MDS) - Intermediär II und Hochrisiko
Leukämiestadium	.
Ziele	<ul style="list-style-type: none"> - Overall survival - Overall response (complete and partial remission) according to 2006 IWG criteria - Complete bone marrow response according to 2006 IWG criteria - Hematological improvements according to 2006 IWG criteria - Scores of Quality of Life Questionnaire - Adverse events - Change in Aneuploidy - Transition time to AML - Incidence of infections and bleeding episodes.
Einschlusskriterien	<ul style="list-style-type: none"> - MDS diagnosis confirmed within 6 weeks prior to entry according to WHO or FAB classification - MDS classified as follows, according to WHO and FAB classification: <ul style="list-style-type: none"> - a. RAEB-1 (5% - 9% BM blasts) - b. RAEB-2 (10% - 20% BM blasts) - c. CMML (10% - 20% BM blasts) and WBC < 13,000/L - d. RAEB-t (21% - 30% BM blasts), with following criteria: <ul style="list-style-type: none"> - aa. WBC < 25 x 10E9/L at entry - bb. Stable WBC at least 4 weeks prior to entry and not requiring intervention for WBC control with hydroxyurea, chemotherapy, or leukopheresis. - At least one cytopenia (ANC < 1800/µL or platelet count < 100,000/µL or hemoglobin <10 g/dL) - Progression according to 2006 International Working Group (IWG) criteria any time after start of azacitidine or decitabine during past 2 years; or failure to achieve complete or partial response or hematological improvement (according to 2006 IWG) after at least six 4-week cycles of azacitidine or four 6-week cycles of decitabine during past 2 years; or relapse after initial complete or partial response or hematological improvement (according to 2006 IWG criteria) observed after at least six 4-week cycles of azacitidine or four 6-week cycles of decitabine during past 2 years; or, intolerance to azacitidine or decitabine defined by drug-related Grade 3 liver or renal toxicity leading to discontinuation during the past 2 years. - Did not respond to, relapsed after, not eligible for, or opted not to do bone marrow transplantation - Off other MDS treatments for at least 4 weeks; Filgrastim (G-CSF) and erythropoietin allowed before and during the study as clinically indicated. - No need for induction chemotherapy - ECOG status 0, 1 or 2

Ausschlusskriterien

- Willing to adhere to protocol prohibitions and restrictions
- Patient (or a legally authorized representative) must sign informed consent form to indicate patient's understanding study's purpose and procedures and willingness to participate
- Anemia due to factors other than MDS (including hemolysis or gastrointestinal bleeding) unless stabilized for 1 week after RBC transfusion.
- Any active malignancy within the past year, except basal cell or squamous cell skin cancer or carcinoma in situ of the cervix or breast
- Uncontrolled intercurrent illness including, but not limited to, symptomatic congestive heart failure, unstable angina pectoris, or cardiac arrhythmia
- Active infection not adequately responding to appropriate therapy
- Total bilirubin ≥ 1.5 mg/dL not related to hemolysis or Gilbert's disease.
- Alanine transaminase (ALT)/aspartate transaminase (AST) ≥ 2.5 x upper limit of normal (ULN)
- Serum creatinine ≥ 2.0 mg/dL
- Ascites requiring active medical management including paracentesis, or hyponatremia (defined as serum sodium value of <130 mEq/L)
- Pregnant or lactating females
- Patients unwilling to follow strict contraception requirements (including condom use for males with sexual partners, and for females: prescription oral contraceptives [birth control pills], contraceptive injections, intrauterine device, double-barrier method [spermicidal jelly or foam with condoms or diaphragm], contraceptive patch, or surgical sterilization) before entry and throughout the study
- Females with reproductive potential who do not have a negative urine beta-human chorionic gonadotropin pregnancy test at screening
- Major surgery without full recovery or major surgery within 3 weeks of ON 01910.Na treatment start
- Uncontrolled hypertension (defined as systolic pressure 160 mmHg and/or diastolic pressure 110 mmHg)
- New onset seizures (within 3 months prior to first dose of ON 01910.Na) or poorly controlled seizures
- Any other concurrent investigational agent or chemotherapy, radiotherapy, or immunotherapy
- Prior treatment with low-dose cytarabine during past 2 years Investigational therapy within 4 weeks of starting ON 01910.Na
- Psychiatric illness or social situation that limits the patient's ability to tolerate and/or comply with study requirements

Alter ≥ 18 Jahre

Status Rekrutierung beendet

Beginn der Rekrutierung 01.11.2010

Fallzahl 270

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Sponsoren Onconova Therapeutics, Inc. (Hauptsponsor)

Förderer Onconova Therapeutics, Inc.

**Registrierung in anderen
Studienregistern**

ClinicalTrials.gov NCT01241500
European Clinical Trials Database - EUDRACT2010-019755-21