A phase III, 52 week, randomized, double-blind, 3-arm parallel group study, comparing the efficacy, safety and tolerability of the fixed dose triple combination FF/UMEC/VI with the fixed dose dual combinations of FF/VI and UMEC/VI, all administered once-daily in the morning via a dry powder inhaler in subjects with chronic obstructive pulmonary disease

Published: 03-06-2014 Last updated: 20-04-2024

Primary: To evaluate the efficacy of FF/UMEC/VI to reduce the annual rate of moderate and severe exacerbations compared with dual therapy of FF/VI or UMEC/VI in subjects with COPD.

Secondary: Long term safety and other efficacy parameters.

Ethical review Approved WMO
Status Recruitment stopped

No. 14b condition turns

Respiratory disorders N

Health condition type Respiratory disorders NEC

Study type Interventional

Summary

ID

NL-OMON45240

Source

ToetsingOnline

Brief title CTT116855

Condition

Respiratory disorders NEC

Synonym

COPD; chronic obstructive pulmonary disease

Research involving

Human

Sponsors and support

Primary sponsor: GlaxoSmithKline

Source(s) of monetary or material Support: GlaxoSmithKline BV

Intervention

Keyword: COPD, fluticasone furoate, umeclidinium, vilanterol

Outcome measures

Primary outcome

Rate of exacerbations.

Secondary outcome

FEV1, St George guestionnaire, time to first exacerbation. Adverse events.

Study description

Background summary

Inhaled corticosteroids, long-acting ß2-agonists (LABA) and long-acting muscarinic receptor antagonists (LAMA) are essential drugs for the treatment of COPD. This triple therapy is widely used; in the US in over 25% of COPD patients. Various clinical trials have shown the benefits of the addition of a third drug (LABA or LAMA).

Fluticasone furoate (FF) is an inhaled corticosteroid, umeclidinium (UMEC) is a LAMA and vilanterol is a LABA. The sponsor is currently developing these three drugs in a once daily fixed combination as a dry powder for inhalation for the treatment of more severe COPD (Gold D).

Study objective

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Primary: To evaluate the efficacy of FF/UMEC/VI to reduce the annual rate of moderate and severe exacerbations compared with dual therapy of FF/VI or UMEC/VI in subjects with COPD.

Secondary: Long term safety and other efficacy parameters.

Study design

Multicenter randomized double blind phase III parallel group study. Run-in period of 2 weeks.

Randomization (2:2:1) to treatment with:

- * FF/UMEC/VI (100/62,5/25 mcg) once daily
- * FF/VI (100/25 mcg) once daily
- * UMEC/VI (62.5/25 mcg) once daily

administration as inhaled dry powder formulation.

Treatment duration 52 weeks.

Safety follow-up of 1 week.

Approx 10.000 randomized patients.

Intervention

Treatment with FF/UMEC/VI, FF/VI or UMEC/VI.

Study burden and risks

Risk: Adverse effects of study medication. Worsening COPD due to discontinuation of current medication.

Burden:

7 visits and 1 phone call in 1 year. Duration 3-4 hours.

Physical examination: 3 times.

Blood draw 15 ml 5 times.

ECG 4 times.

Pulmonary function test + reversibility every visit.

Chest X-ray (if not performed in past 3 months) once.

Pregnancy test (if relevant) 6 times.

Questionnaires (4) 4-5 times.

Daily completion of electronic and paper diary.

Optional pharmacogenetic research (6 ml blood once.

Contacts

Public

GlaxoSmithKline

Huis ter Heideweg 62

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Zeist 3705LZ NL

Scientific

GlaxoSmithKline

Huis ter Heideweg 62 Zeist 3705LZ NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

- * COPD patients *40 years of age.
- * (Ex) smokers, at least 10 pack years.
- * Post salbutamol FEV1/FVC ratio < 0,70.
- * A score of *10 on the COPD Assessment Test (CAT).
- * Post-bronchodilator FEV1 < 50% predicted normal and a documented history of * 1 moderate or severe COPD exacerbation in the previous 12 months OR a post-bronchodilator 50% *FEV1 < 80% predicted normal and a documented history of * 2 moderate exacerbations or a documented history of *1 severe COPD exacerbation (hospitalized) in the previous 12 months.
- * Safe contraception for women of childbearing potential.

Exclusion criteria

- * Pregnancy, lactation.
- * Risk factors for pneumonia (see protocol page 33 for details).
- * Abnormal Chest x-ray (see protocol page 33 for details).

Study design

Design

Study phase: 3

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Double blinded (masking used)

Control: Active

Primary purpose: Treatment

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 30-06-2014

Enrollment: 225

Type: Actual

Medical products/devices used

Product type: Medicine

Brand name: Anoro

Generic name: umeclidinium/vilanterol

Registration: Yes - NL intended use

Product type: Medicine

Brand name: fluticasone furoaat/umeclidinium/vilanterol

Generic name: fluticasone furoaat/umeclidinium/vilanterol

Product type: Medicine

Brand name: Relvar

Generic name: fluticasone furoaat/vilanterol

Registration: Yes - NL intended use

Ethics review

Approved WMO

Date: 03-06-2014

Application type: First submission

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 24-07-2014

Application type: First submission

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 29-05-2015

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 15-06-2015

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 10-07-2015

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 21-10-2015

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 27-10-2015

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 04-02-2016

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 18-02-2016

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 01-03-2016

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 22-03-2016

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 13-03-2017

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 28-03-2017

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 24-04-2017

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 26-04-2017

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register ID

Other clinicaltrials.gov, registratienummer n.n.b.

EudraCT EUCTR2013-003075-35-NL

CCMO NL48046.060.14