# A Phase 2, Randomized, Double-Blind, Placebo-Controlled, Dose-Ranging Study to Evaluate the Safety and Efficacy of ABBV-154 in Subjects with Polymyalgia Rheumatica (PMR) Dependent on Glucocorticoid Treatment

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To assess the safety and efficacy of ABBV-154 versus placebo in subjects with PMR, who are dependent on treatment with glucocorticoids withdoses of at least 5 mg/day prednisone equivalent (glucocorticoindependent PMR).

**Ethical review** Approved WMO **Status** Completed

**Health condition type** Autoimmune disorders

Study type Interventional

# **Summary**

### ID

NL-OMON54200

Source

**ToetsingOnline** 

**Brief title** M20-370

### Condition

Autoimmune disorders

### **Synonym**

PMR, polymyalgia rheumatica

### Research involving

Human

**Sponsors and support** 

**Primary sponsor:** AbbVie Deutschland GmbH & Co. KG

Source(s) of monetary or material Support: AbbVie

Intervention

**Keyword:** anti-TNF, Glucocorticoids, Polymyalgia Rheumatica

**Outcome measures** 

**Primary outcome** 

Time to flare, where flare is defined as follows:

Presence of clinical signs and symptoms of PMR

AND

Requirement to increase the glucocorticoid dose per investigator.

Clinical signs and symptoms of PMR are defined as shoulder and/or hip girdle

pain with inflammatory stiffness, neck pain with inflammatory stiffness, or new

or worsened limited range of motion of hips and/or shoulders that are not due

to other causes

Timepoint of evaluation: week 24

**Secondary outcome** 

Achievement of flare-free state up to Week 24

Cumulative glucocorticoid dose by 24 weeks

Change from Baseline in glucocorticoid dose at Week 24

# **Study description**

# **Background summary**

Polymyalgia rheumatica (PMR) is an inflammatory disease causing shoulder, hip, and neck pain and stiffness, in adults aged 50 years or older. This study evaluates how safe and effective ABBV-154 is in participants with glucocorticoid-dependent PMR. Adverse events and change in disease activity will be assessed.

# **Study objective**

To assess the safety and efficacy of ABBV-154 versus placebo in subjects with PMR, who are dependent on treatment with glucocorticoids with doses of at least 5 mg/day prednisone equivalent (glucocorticoindependent PMR).

### Study design

Randomized, Double-Blind, Placebo-Controlled, Dose-Ranging

### Intervention

The study is compromised of a 52 week double-blind, placebo-controlled period and a follow-up visit 70 days after the last dose of the study drug. All participants will receive a glucocorticoid taper along with the assigned dose of ABBV-154 or placebo, subcutaneously (SC) every other week (eow).

### Study burden and risks

There may be higher treatment burden for participants in this trial compared to their standard of care. Participants will attend regular visits during the study at a hospital or clinic. The effect of the treatment will be checked by medical assessments, blood tests, checking for side effects and completing questionnaires.

# **Contacts**

### **Public**

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### **Scientific**

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# **Trial sites**

### **Listed location countries**

**Netherlands** 

# **Eligibility criteria**

### Age

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

### **Inclusion criteria**

- 1. Adults at least 50 years of age with a clinical diagnosis of PMR and fulfillment of the 2012 EULAR/ACR provisional classification criteria for PMR.
- 2. Following a confirmed diagnosis of PMR, subject must have shown a clinical response to prednisone (or equivalent).
- 3. Subject must have had at least 2 episodes of unequivocal PMR flare while attempting to taper prednisone, with the dose of prednisone (or equivalent) at the time of flare >= 5 mg/day, prior to Baseline; the most recent flare must have been within 24 weeks of Baseline. Unequivocal PMR flare is defined as clinical signs and symptoms of PMR (shoulder and/or hip girdle pain with inflammatory stiffness, neck pain with inflammatory stiffness, or new or worsened limited range of motion of hips and/or shoulders) that resulted in an increase in glucocorticoid dose.
- 4. Subject must be on a stable prednisone (or equivalent) dose of 5 to 15 mg/day for >= 2 weeks prior to Baseline. Subjects may be on up to 25 mg/day at the Screening Visit provided that the subject is able to taper to 15 mg/day or less, with a stable dose >= 2 weeks prior to Baseline.
- 5. Subject must be willing to follow the protocol-defined glucocorticoid tapering regimen.

## **Exclusion criteria**

- 1. Subject must have discontinued use of immunomodulators other than prednisone (or equivalent) and hydroxychloroquine prior to Baseline.
- 2. Subjects requiring > 25 mg/day of prednisone to control confirmed PMR are excluded
- 3. Subject must not exhibit clinical signs and symptoms of PMR (shoulder and/or hip girdle pain with inflammatory stiffness, neck pain with inflammatory stiffness, or new or worsened limited range of motion of hips and/or shoulders) within 2 weeks of Baseline

# Study design

# **Design**

Study phase: 2

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Double blinded (masking used)

Control: Placebo

Primary purpose: Treatment

### Recruitment

NL

Recruitment status: Completed
Start date (anticipated): 18-10-2021

Enrollment: 15

Type: Actual

# Medical products/devices used

Product type: Medicine
Brand name: ABBV-154
Generic name: ABBV-154

Product type: Medicine

Brand name: Prednisolone

Generic name: Prednisolone

Registration: Yes - NL intended use

# **Ethics review**

Approved WMO

Date: 23-08-2021

Application type: First submission

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 10-11-2021

Application type: First submission

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 21-03-2022

Application type: Amendment

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 26-03-2022

Application type: Amendment

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 11-04-2022

Application type: Amendment

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 02-06-2022

Application type: Amendment

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 30-06-2022

Application type: Amendment

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 13-07-2022

Application type: Amendment

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 03-08-2022

Application type: Amendment

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 12-01-2023

Application type: Amendment

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 29-01-2023

Application type: Amendment

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 21-02-2023

Application type: Amendment

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 20-03-2023

Application type: Amendment

Review commission: METC Brabant (Tilburg)

# **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

EudraCT EUCTR2020-00533-39-NL

ClinicalTrials.gov NCT04972968 CCMO NL77653.028.21

# **Study results**

Date completed: 27-04-2023

Results posted: 06-08-2024

Actual enrolment: 3

**First publication** 

18-07-2024