A Phase II, multicenter, randomized, open label two arm study comparing the effect of crizanlizumab + standard of care to standard of care alone on renal function in sickle cell disease patients * 16 years with chronic kidney disease due to sickle cell nephropathy

Published: 29-10-2019 Last updated: 10-04-2024

To evaluate the effect of crizanlizumab + standard of care compared to standard of care alone on albuminuria (ACR) decrease at 12 months

Ethical review Approved WMO

Status Recruitment stopped **Health condition type** Haemoglobinopathies

Study type Interventional

Summary

ID

NL-OMON55208

Source

ToetsingOnline

Brief title

CSEG101A2203 -STEADFAST

Condition

Haemoglobinopathies

Synonym

sickle cell anemia, sickle cell disease

Research involving

Human

Sponsors and support

Primary sponsor: Novartis

Source(s) of monetary or material Support: Novartis Pharma

Intervention

Keyword: crizanlizumab, renal, sickle cell disease

Outcome measures

Primary outcome

Proportion of patients with * 30% decrease in ACR at 12 months compared to baseline

Secondary outcome

Mean change in ACR from baseline to 3, 6, 9, and 12 months of treatment

Proportion of patients with * 30% decrease in ACR at 6 months compared to

baseline

Proportion of patients with * 20% improvement of PCR at 12 months compared to baseline

Proportion of patients with a stable (within \pm 20% change) PCR at 12 months compared to baseline

Percentage change in eGFR from baseline to 3, 6, 9, and 12 months of treatment

Study description

Background summary

Sickle cell disease is a genetic blood disorder, which early on progresses into a systemic disease. Vaso-occlusion is

the hallmark of SCD and can lead to serious acute and chronic complications.

Vascular dysfunction, inflammation, and

P-selectin mediated cell-to-cell and cell-to-endothelium adhesion play an important role in the pathophysiology of SCD.

Vaso-occlusive crisis (VOC) is the most common clinical manifestation of SCD.

Every VOC increases morbidity and

can result in organ damage/failure and/or death .

Preventive treatments to reduce the number of VOCs are limited. HU/HC is approved to reduce the frequency of painful crises and the need for transfusions

Kidney injury is a common problem in sickle cell patients and causes complications. Of crizanlizumab there are indications that it can help to prevent injury of the kidneys.

Study objective

To evaluate the effect of crizanlizumab + standard of care compared to standard of care alone on albuminuria (ACR) decrease at 12 months

Study design

multicenter, randomized, open label, 2-arm phase 2 study randomized 1:1

Intervention

crizanlizumab infusion over 30 minutes, every 4 weeks.

Study burden and risks

RISK : adverse events due to treatment with crizanlizumab of placebo burden: cycles of 4 weeks during 5 years of study participation

during monthly visits: physical examinations, blooddraws, administration of

study medication

Contacts

Public

Novartis

Haaksbergweg 16 Amsterdam 1101 BX NI

Scientific

Novartis

Haaksbergweg 16 Amsterdam 1101 BX NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

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

Inclusion criteria

- 1. Male and female patients * 16 years on the day that signed informed consent is obtained
- 2. Confirmed diagnosis of SCD. Homozygous HbS and HbS*0-thal SCD genotypes are eligible
- 3. eGFR * 45 to * 140 mL/min/1.73 m2 based on CKD-EPI formula (patients * 18) or the Creatinine-based *Bedside Schwartz* equation (patients < 18)
- 4. ACR of * 100 to < 2000 mg/g (taken as an average of the three screening ACR values to determine eligibility)
- 5. Receiving standard of care drug(s) for SCD and/or CKD.
- 6. Hb * 4.0 g/dL, ANC * 1.0 x 109/L, and platelet count * 75 x 109/L
- 7. ECOG performance status * 2.0

Exclusion criteria

- 1. History of stem cell transplant
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- 2. Patients with evidence of AKI within 3 months of study entry (can decrease interval to within 6 weeks of study entry only if renal function has returned to pre-AKI values prior to study entry)
- 3. Blood pressure > 140/90 mmHg despite treatment
- 4.Patients undergoing renal replacement therapy (i.e. hemodialysis, peritoneal dialysis, hemofiltration and kidney transplantation)
- 5. Participating in a chronic transfusion program
- 6. History of kidney transplant
- 7. Patients with hypoalbuminemia
- 8. Patient has received crizanlizumab and/or other selectin inhibitor or plans to receive it during the duration of the study
- 9. History of or current diagnosis of ECG abnormalities indicating significant risk of safety
- 10. Current drug or alcohol abuse:
- 11. Pregnant or nursing (lactating) women

Study design

Design

Study phase: 2

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Open (masking not used)

Primary purpose: Treatment

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 01-09-2020

Enrollment: 4

Type: Actual

Medical products/devices used

Product type: Medicine

Brand name: ADAKVEO

Generic name: crizanlizumab

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Ethics review

Approved WMO

Date: 29-10-2019

Application type: First submission

Review commission: METC Amsterdam UMC

Approved WMO

Date: 29-11-2019

Application type: First submission

Review commission: METC Amsterdam UMC

Approved WMO

Date: 24-06-2020

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 17-08-2020

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 18-11-2020

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 18-01-2021

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 19-02-2021

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 01-03-2021

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 15-04-2021

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 24-06-2021

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 12-10-2021

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 04-02-2022

Application type: Amendment

Review commission: METC Amsterdam UMC

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 EUCTR2018-003608-38-NL

ClinicalTrials.gov NCT04053764
CCMO NL71644.018.19