

## A Study of Avastin (Bevacizumab) in Combination With Chemotherapy in Patients With Primary Breast Cancer

This study has been completed.

Sponsor:	Hoffmann-La Roche
Collaborators:	
Information provided by (Responsible Party):	Hoffmann-La Roche
ClinicalTrials.gov Identifier:	NCT02005549

### Purpose

This study will evaluate the effect of Avastin (15mg/kg iv) in combination with Docetaxel and Xeloda, given as pre-operative therapy to patients with primary breast cancer. Avastin will be administered every 3 weeks, for the first 5 cycles of chemotherapy. The anticipated time on study treatment is 3-12 months.

Condition	Intervention	Phase
Breast Cancer	Drug: bevacizumab [Avastin] Drug: docetaxel Drug: capecitabine [Xeloda]	Phase 2

Study Type: Interventional

Study Design: Treatment, Single Group Assignment, Open Label, Non-Randomized, Safety/Efficacy Study

Official Title: A Phase II Study of Bevacizumab With Docetaxel and Capecitabine in the Neoadjuvant Setting for Breast Cancer Patients

Further study details as provided by Hoffmann-La Roche:

Primary Outcome Measure:

- Percentage of Participants With Pathological Complete Response (pCR) [Time Frame: Baseline, 20-24 weeks (final surgery, performed 2 to 4 weeks after the last chemotherapy cycle [Week 18])] [Designated as safety issue: No]  
pCR was defined as the absence of signs for invasive tumor in the final surgical sample as judged by the local pathologist. Surgery was performed 2 to 4 weeks after the last chemotherapy cycle.

#### Secondary Outcome Measures:

- Percentage of Participants With pCR, Clinical Complete Response (CR), or Clinical Partial Response (PR) [Time Frame: Baseline, 20-24 weeks (final surgery, performed 2 to 4 weeks after the last chemotherapy cycle [Week 18])] [Designated as safety issue: No]  
Percentage of participants with pCR plus the percentage of participants without pCR who achieved CR or PR as measured by the Response Evaluation Criteria in Solid Tumors (RECIST) criteria. CR was defined as complete disappearance of all target lesions and non-target disease, with the exception of nodal disease. All nodes, both target and non-target, must have decreased to normal (short axis less than [ $<$ ] 10 millimeters [mm]). No new lesions. PR was defined as greater than or equal to ( $\geq$ ) 30 percent (%) decrease under baseline of the sum of diameters of all target lesions. The short axis was used in the sum for target nodes, while the longest diameter was used in the sum for all other target lesions. No unequivocal progression of non-target disease. No new lesions.
- Percentage of Participants Undergoing Breast-Conserving Surgery [Time Frame: 20-24 weeks (final surgery, performed 2 to 4 weeks after the last chemotherapy cycle [Week 18])] [Designated as safety issue: No]  
Percentage of participants undergoing a breast-conserving procedure versus a modified radical mastectomy at final surgery, performed 2 to 4 weeks after the last chemotherapy cycle (Week 18)

Enrollment: 18

Study Start Date: February 2006

Primary Completion Date: April 2008

Study Completion Date: April 2008

Arms	Assigned Interventions
Experimental: Neoadjuvant Therapy	<p>Drug: bevacizumab [Avastin] 15 mg/kg iv on Day 1 of each 3-week cycle, 5 cycles</p> <p>Drug: docetaxel 75 mg/m<sup>2</sup> on Day 1 of each 3-week cycle, 6 cycles</p> <p>Drug: capecitabine [Xeloda] 950 mg/m<sup>2</sup>, orally twice daily, evening of Day 1 until morning of Day 15, followed by a 7 day rest period, every 3 weeks</p>

## Eligibility

Ages Eligible for Study: 18 Years to 70 Years

Genders Eligible for Study: Female

Accepts Healthy Volunteers: No

### Criteria

#### Inclusion Criteria:

- female patients, 18-70years of age;
- histologically-proven invasive breast cancer;
- no prior or current neoplasm except for non-melanoma skin cancer, or in situ cancer of the cervix;
- no distant disease/secondary cancer.

#### Exclusion Criteria:

- pregnant or lactating women;
- pre-operative local treatment for breast cancer;
- prior or concurrent systemic antitumor therapy;
- clinically significant cardiac disease.

## ▶ Contacts and Locations

#### Locations

Austria

Salzburg, Austria, 5020

#### Investigators

Study Chair:

Clinical Trials

Hoffmann-La Roche

## ▶ More Information

Responsible Party: Hoffmann-La Roche

Study ID Numbers: ML19869

Health Authority: Austria: Austrian Federal Office for Safety in Health Care

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## Study Results

## ▶ Participant Flow

#### Reporting Groups

	Description
Bevacizumab+Docetaxel +Capecitabine	Participants received bevacizumab, 15 milligrams/kilogram (mg/kg) intravenously (IV), followed by docetaxel 75 mg per square meter (mg/m <sup>2</sup> ) IV on Day 1 and capecitabine 950 mg/m <sup>2</sup> orally (PO) twice daily (BID) within 30 minutes after the end of a meal, starting the evening of Day 1 and continuing until the morning of Day 15 (followed by a 7-day rest period) for a maximum of five 3-week cycles.

#### Overall Study

	Bevacizumab+Docetaxel+Capecitabine
Started	18
Completed	18
Not Completed	0

## Baseline Characteristics

### Analysis Population Description

Intent-to-treat (ITT) population. All participants who received at least one dose of study drug.

### Reporting Groups

	Description
Bevacizumab+Docetaxel +Capecitabine	Participants received bevacizumab, 15 mg/kg IV, followed by docetaxel 75 mg/m <sup>2</sup> IV on Day 1 and capecitabine 950 mg/m <sup>2</sup> PO BID within 30 minutes after the end of a meal, starting the evening of Day 1 and continuing until the morning of Day 15 (followed by a 7-day rest period) for a maximum of five 3-week cycles.

### Baseline Measures

	Bevacizumab+Docetaxel+Capecitabine
Number of Participants	18
Age, Continuous [units: years] Median (Full Range)	48 (34 to 69)
Gender, Male/Female [units: participants]	
Female	18
Male	0

## Outcome Measures

### 1. Primary Outcome Measure:

Measure Title	Percentage of Participants With Pathological Complete Response (pCR)
Measure Description	pCR was defined as the absence of signs for invasive tumor in the final surgical sample as judged by the local pathologist. Surgery was performed 2 to 4 weeks after the last chemotherapy cycle.
Time Frame	Baseline, 20-24 weeks (final surgery, performed 2 to 4 weeks after the last chemotherapy cycle [Week 18])
Safety Issue?	No

### Analysis Population Description

ITT population; participants evaluable for response included those participants who received a minimum of 3 cycles of treatment (9 weeks on study) with final surgery performed and the samples and reports available.

## Reporting Groups

	Description
Bevacizumab+Docetaxel +Capecitabine	Participants received bevacizumab, 15 mg/kg IV, followed by docetaxel 75 mg/m <sup>2</sup> IV on Day 1 and capecitabine 950 mg/m <sup>2</sup> PO BID within 30 minutes after the end of a meal, starting the evening of Day 1 and continuing until the morning of Day 15 (followed by a 7-day rest period) for a maximum of five 3-week cycles.

## Measured Values

	Bevacizumab+Docetaxel+Capecitabine
Number of Participants Analyzed	18
Percentage of Participants With Pathological Complete Response (pCR) [units: percentage of participants] Number (95% Confidence Interval)	22.22 (6.41 to 47.64)

## 2. Secondary Outcome Measure:

Measure Title	Percentage of Participants With pCR, Clinical Complete Response (CR), or Clinical Partial Response (PR)
Measure Description	Percentage of participants with pCR plus the percentage of participants without pCR who achieved CR or PR as measured by the Response Evaluation Criteria in Solid Tumors (RECIST) criteria. CR was defined as complete disappearance of all target lesions and non-target disease, with the exception of nodal disease. All nodes, both target and non-target, must have decreased to normal (short axis less than [ $<$ ] 10 millimeters [mm]). No new lesions. PR was defined as greater than or equal to ( $\geq$ ) 30 percent (%) decrease under baseline of the sum of diameters of all target lesions. The short axis was used in the sum for target nodes, while the longest diameter was used in the sum for all other target lesions. No unequivocal progression of non-target disease. No new lesions.
Time Frame	Baseline, 20-24 weeks (final surgery, performed 2 to 4 weeks after the last chemotherapy cycle [Week 18])
Safety Issue?	No

## Analysis Population Description

ITT population; participants evaluable for response included those participants who received a minimum of 3 cycles of treatment (9 weeks on study) with final surgery performed and the samples and reports available.

## Reporting Groups

	Description
Bevacizumab+Docetaxel +Capecitabine	Participants received bevacizumab, 15 mg/kg IV, followed by docetaxel 75 mg/m <sup>2</sup> IV on Day 1 and capecitabine 950 mg/m <sup>2</sup> PO BID within 30 minutes after the end of a meal, starting the evening of Day 1 and continuing until the morning of Day 15 (followed by a 7-day rest period) for a maximum of five 3-week cycles.

### Measured Values

	Bevacizumab+Docetaxel+Capecitabine
Number of Participants Analyzed	18
Percentage of Participants With pCR, Clinical Complete Response (CR), or Clinical Partial Response (PR) [units: percentage of participants] Number (95% Confidence Interval)	72.22 (46.52 to 90.31)

### 3. Secondary Outcome Measure:

Measure Title	Percentage of Participants Undergoing Breast-Conserving Surgery
Measure Description	Percentage of participants undergoing a breast-conserving procedure versus a modified radical mastectomy at final surgery, performed 2 to 4 weeks after the last chemotherapy cycle (Week 18)
Time Frame	20-24 weeks (final surgery, performed 2 to 4 weeks after the last chemotherapy cycle [Week 18])
Safety Issue?	No

Analysis Population Description  
ITT population.

### Reporting Groups

	Description
Bevacizumab+Docetaxel +Capecitabine	Participants received bevacizumab, 15 mg/kg IV, followed by docetaxel 75 mg/m <sup>2</sup> IV on Day 1 and capecitabine 950 mg/m <sup>2</sup> PO BID within 30 minutes after the end of a meal, starting the evening of Day 1 and continuing until the morning of Day 15 (followed by a 7-day rest period) for a maximum of five 3-week cycles.

### Measured Values

	Bevacizumab+Docetaxel+Capecitabine
Number of Participants Analyzed	18
Percentage of Participants Undergoing Breast-Conserving Surgery [units: percentage of participants] Number (95% Confidence Interval)	83 (59 to 96)

## Reported Adverse Events

Time Frame	Baseline, every three weeks (Cycles 1 through 6), end-of-treatment, to 28 days after last dosage of study drug.
Additional Description	An adverse event is any undesirable event associated with the use of a drug, whether or not considered drug related, and includes any side effect, injury, toxicity, or sensitivity reactions. It also includes any undesirable clinical or laboratory event which is not normally observed in the participant.

### Reporting Groups

	Description
Bevacizumab+Docetaxel +Capecitabine	Participants received bevacizumab, 15 mg/kg IV, followed by docetaxel 75 mg/m <sup>2</sup> IV on Day 1 and capecitabine 950 mg/m <sup>2</sup> PO BID within 30 minutes after the end of a meal, starting the evening of Day 1 and continuing until the morning of Day 15 (followed by a 7-day rest period) for a maximum of five 3-week cycles.

### Serious Adverse Events

	Bevacizumab+Docetaxel+Capecitabine
	Affected/At Risk (%)
Total	5/18 (27.78%)
Gastrointestinal disorders	
Intestinal perforation <sup>A *</sup>	1/18 (5.56%)
General disorders	
General physical health deterioration <sup>A *</sup>	1/18 (5.56%)
Impaired healing <sup>A *</sup>	1/18 (5.56%)
Infections and infestations	
Neutropenic infection <sup>A *</sup>	1/18 (5.56%)
Neoplasms benign, malignant and unspecified (incl cysts and polyps)	
Contralateral breast cancer <sup>A *</sup>	1/18 (5.56%)
Reproductive system and breast disorders	
Menorrhagia <sup>A *</sup>	1/18 (5.56%)
Vascular disorders	
Deep vein thrombosis <sup>A *</sup>	2/18 (11.11%)

\* Indicates events were collected by non-systematic methods.

A Term from vocabulary, MedDRA

# Other Adverse Events

Frequency Threshold Above Which Other Adverse Events are Reported: 0%

	Bevacizumab+Docetaxel+Capecitabine
	Affected/At Risk (%)
Total	18/18 (100%)
Blood and lymphatic system disorders	
Anaemia <sup>A *</sup>	5/18 (27.78%)
Leukopenia <sup>A *</sup>	3/18 (16.67%)
Lymphopenia <sup>A *</sup>	8/18 (44.44%)
Neutropenia <sup>A *</sup>	3/18 (16.67%)
Cardiac disorders	
Cardiovascular disorder <sup>A *</sup>	1/18 (5.56%)
Pericardial effusion <sup>A *</sup>	1/18 (5.56%)
Ear and labyrinth disorders	
Vertigo <sup>A *</sup>	2/18 (11.11%)
Eye disorders	
Conjunctivitis <sup>A *</sup>	2/18 (11.11%)
Visual acuity reduced <sup>A *</sup>	1/18 (5.56%)
Gastrointestinal disorders	
Abdominal pain <sup>A *</sup>	4/18 (22.22%)
Abdominal pain upper <sup>A *</sup>	1/18 (5.56%)
Constipation <sup>A *</sup>	8/18 (44.44%)
Diarrhoea <sup>A *</sup>	4/18 (22.22%)
Dry mouth <sup>A *</sup>	1/18 (5.56%)



	Bevacizumab+Docetaxel+Capecitabine
	Affected/At Risk (%)
Duodenitis <sup>A *</sup>	1/18 (5.56%)
Dyspepsia <sup>A *</sup>	1/18 (5.56%)
Eructation <sup>A *</sup>	1/18 (5.56%)
Gastritis <sup>A *</sup>	1/18 (5.56%)
Intestinal perforation <sup>A *</sup>	1/18 (5.56%)
Melaena <sup>A *</sup>	1/18 (5.56%)
Nausea <sup>A *</sup>	3/18 (16.67%)
Oral pain <sup>A *</sup>	1/18 (5.56%)
Stomatitis <sup>A *</sup>	5/18 (27.78%)
Vomiting <sup>A *</sup>	1/18 (5.56%)
General disorders	
Asthenia <sup>A *</sup>	1/18 (5.56%)
Fatigue <sup>A *</sup>	6/18 (33.33%)
General physical health deterioration <sup>A *</sup>	1/18 (5.56%)
Impaired healing <sup>A *</sup>	1/18 (5.56%)
Mucosal inflammation <sup>A *</sup>	1/18 (5.56%)
Oedema peripheral <sup>A *</sup>	1/18 (5.56%)
Pyrexia <sup>A *</sup>	1/18 (5.56%)
Infections and infestations	
Laryngitis <sup>A *</sup>	1/18 (5.56%)
Nasopharyngitis <sup>A *</sup>	1/18 (5.56%)
Neutropenic infection <sup>A *</sup>	1/18 (5.56%)

	Bevacizumab+Docetaxel+Capecitabine
	Affected/At Risk (%)
Oral herpes <sup>A *</sup>	1/18 (5.56%)
Rhinitis <sup>A *</sup>	3/18 (16.67%)
Urinary tract infection <sup>A *</sup>	1/18 (5.56%)
Injury, poisoning and procedural complications	
Procedural pain <sup>A *</sup>	1/18 (5.56%)
Wound complications <sup>A *</sup>	1/18 (5.56%)
Investigations	
Alanine aminotransferased increased <sup>A *</sup>	1/18 (5.56%)
Blood lactate dehydrogenase increased <sup>A *</sup>	8/18 (44.44%)
C-reactive protein increased <sup>A *</sup>	1/18 (5.56%)
Pulse abnormal <sup>A *</sup>	1/18 (5.56%)
Weight decreased <sup>A *</sup>	5/18 (27.78%)
Metabolism and nutrition disorders	
Anorexia <sup>A *</sup>	3/18 (16.67%)
Hyperglycaemia <sup>A *</sup>	8/18 (44.44%)
Hypokalaemia <sup>A *</sup>	2/18 (11.11%)
Musculoskeletal and connective tissue disorders	
Bone pain <sup>A *</sup>	1/18 (5.56%)
Myalgia <sup>A *</sup>	1/18 (5.56%)
Neck pain <sup>A *</sup>	1/18 (5.56%)
Pain in extremity <sup>A *</sup>	6/18 (33.33%)
Neoplasms benign, malignant and unspecified (incl cysts and polyps)	
Contralateral breast cancer <sup>A *</sup>	1/18 (5.56%)

	Bevacizumab+Docetaxel+Capecitabine
	Affected/At Risk (%)
Nervous system disorders	
Dysgeusia <sup>A *</sup>	4/18 (22.22%)
Headache <sup>A *</sup>	3/18 (16.67%)
Polyneuropathy <sup>A *</sup>	4/18 (22.22%)
Psychiatric disorders	
Anxiety <sup>A *</sup>	1/18 (5.56%)
Depression <sup>A *</sup>	2/18 (11.11%)
Insomnia <sup>A *</sup>	2/18 (11.11%)
Panic attack <sup>A *</sup>	1/18 (5.56%)
Sleep disorder <sup>A *</sup>	2/18 (11.11%)
Reproductive system and breast disorders	
Menorrhagia <sup>A *</sup>	2/18 (11.11%)
Pelvic pain <sup>A *</sup>	1/18 (5.56%)
Vaginal haemorrhage <sup>A *</sup>	1/18 (5.56%)
Respiratory, thoracic and mediastinal disorders	
Dysphonia <sup>A *</sup>	2/18 (11.11%)
Epistaxis <sup>A *</sup>	3/18 (16.67%)
Skin and subcutaneous tissue disorders	
Alopecia <sup>A *</sup>	17/18 (94.44%)
Dry skin <sup>A *</sup>	1/18 (5.56%)
Erythema <sup>A *</sup>	1/18 (5.56%)
Nail disorder <sup>A *</sup>	12/18 (66.67%)

	Bevacizumab+Docetaxel+Capecitabine
	Affected/At Risk (%)
Palmar-plantar erythrodysaesthesia syndrome <sup>A *</sup>	3/18 (16.67%)
Pruritus <sup>A *</sup>	1/18 (5.56%)
Rash <sup>A *</sup>	3/18 (16.67%)
Vascular disorders	
Deep vein thrombosis <sup>A *</sup>	2/18 (11.11%)
Hot flush <sup>A *</sup>	3/18 (16.67%)
Thrombophlebitis <sup>A *</sup>	1/18 (5.56%)

\* Indicates events were collected by non-systematic methods.

A Term from vocabulary, MedDRA

## Limitations and Caveats

Nonserious adverse events presented in this record include all adverse events reported during the study, not just nonserious events.

## More Information

Certain Agreements:

Principal Investigators are NOT employed by the organization sponsoring the study.

There IS an agreement between the Principal Investigator and the Sponsor (or its agents) that restricts the PI's rights to discuss or publish trial results after the trial is completed.

The Study being conducted under this agreement is part of the Overall Study. Investigator is free to publish in reputable journals or to present at professional conferences the results of the Study, but only after the first publication or presentation that involves the Overall Study. The Sponsor may request the Confidential Information be deleted and/or the publication be postponed in order to protect the Sponsor's intellectual property rights.

Results Point of Contact:

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