

ClinicalTrials.gov Protocol Registration and Results System (PRS) Receipt
Release Date: 01/19/2016

ClinicalTrials.gov ID: NCT00595413

Study Identification

Unique Protocol ID: 27905

Brief Title: Atacicept in Anti-Tumor Necrosis Factor Alpha-naïve Subjects With Rheumatoid Arthritis (AUGUST II)

Official Title: A Randomised, Double-blind, Placebo Controlled, Multi-centre Phase II Study of Atacicept in Anti-TNFα-naïve Patients With Moderate to Severely Active Rheumatoid Arthritis and an Inadequate Response to Methotrexate

Secondary IDs: 2007-002536-29

Study Status

Record Verification: January 2016

Overall Status: Completed

Study Start: September 2007

Primary Completion: October 2009 [Actual]

Study Completion: October 2009 [Actual]

Sponsor/Collaborators

Sponsor: EMD Serono

Responsible Party: Sponsor

Collaborators: Merck KGaA

Oversight

FDA Regulated?: Yes

Applicable Trial?: Section 801 Clinical Trial? No

Delayed Posting? No

IND/IDE Protocol?: Yes

IND/IDE Information: Grantor: CBER
IND/IDE Number: 100321
Serial Number:
Has Expanded Access? No

Review Board: Approval Status: Approved
Approval Number: 06/26/2007
Board Name: Coast IRB, LLC
Board Affiliation: Coast Central IRB
Phone: 949 900 3900
Email:

Data Monitoring?: No

Plan to Share Data?:

Oversight Authorities: United States: Food and Drug Administration

Study Description

Brief Summary: The primary objective of this study is to evaluate the efficacy of atacicept compared to placebo in the treatment of signs and symptoms in a subject population with active rheumatoid arthritis (RA), inadequate response to methotrexate (MTX) and no previous exposure to anti-tumor necrosis factor alpha (anti-TNFalpha) therapy.

Detailed Description:

Conditions

Conditions: Rheumatoid Arthritis

Keywords: Rheumatoid arthritis
Atacicept
Adalimumab
Humira®

Study Design

Study Type: Interventional

Primary Purpose: Treatment

Study Phase: Phase 2

Intervention Model: Parallel Assignment

Number of Arms: 4

Masking: Double Blind (Subject, Investigator)

Allocation: Randomized

Endpoint Classification: Safety/Efficacy Study

Enrollment: 311 [Actual]

Arms and Interventions

Arms	Assigned Interventions
Experimental: Atacicept 150 mg with loading dose	Drug: Atacicept: with loading dose Atacicept will be administered subcutaneously at a dose of 150 milligram (mg) twice a week for initial 4 weeks as loading dose, followed by 150 mg once a week for subsequent 21 weeks.
Experimental: Atacicept 150 mg without loading dose	Drug: Atacicept Atacicept will be administered subcutaneously at a dose of 150 mg once a week for 25 weeks.
Active Comparator: Adalimumab	Biological/Vaccine: Adalimumab Adalimumab (Humira®) will be administered subcutaneously at a dose of 40 mg every other week for 25 weeks. Other Names: <ul style="list-style-type: none">• Humira®
Placebo Comparator: Placebo	Drug: Placebo matched to atacicept Placebo matched to atacicept will be administered subcutaneously twice a week for initial 4 weeks, followed by once a week for subsequent 21 weeks.

Outcome Measures

[See Results Section.]

Eligibility

Minimum Age: 18 Years

Maximum Age:

Gender: Both

Accepts Healthy Volunteers?: No

Criteria: Inclusion Criteria:

- Male or female subjects greater than or equal to (\geq) 18 years of age at the time of informed consent who have RA satisfying American College of Rheumatology (ACR) criteria with a disease history of at least 6 months
- Subjects must have active disease, defined by ≥ 8 swollen joints (out of 66), ≥ 8 tender joints (out of 68) and CRP ≥ 10 milligram per liter (mg/L) and/or erythrocyte sedimentation rate (ESR) ≥ 28 millimeter per hour (mm/hr), despite treatment with MTX at a dose of ≥ 15 milligram per week (mg/week) for greater than ($>$) 3 months
- Other protocol-defined inclusion criteria could apply

Exclusion Criteria:

- Inflammatory joint disease other than RA
- Previous or concurrent treatment with any approved or investigational biological compound for RA, including but not restricted to any anti-TNF α agents, rituximab, abatacept, tocilizumab, interleukin-1 receptor antagonist (IL-1Ra) and belimumab
- Treatment with disease-modifying anti-rheumatic drug (DMARDs) other than MTX
- Participation in any interventional clinical trial within 1 month before study Day 1
- MTX dose > 25 mg/week, prednisone dose > 10 mg/day (or equivalent), or change in steroid or non-steroidal anti-inflammatory drug (NSAID) dosing regimen within 28 days before study Day 1
- Immunization with live vaccine or immunoglobulin (Ig) treatment within 28 days before study Day 1 or need for such treatment during the study (including follow-up)
- Any history or presence of active or latent tuberculosis, major infection requiring hospitalization or intravenous anti-infectives within 28 days before study Day 1
- Other major concurrent illness or organ dysfunction as specified in the protocol
- Serum IgG below 6 gram per liter (g/L)
- Known hypersensitivity to ataccept or to any of the components of the formulated ataccept
- Other protocol-defined exclusion criteria could apply

Contacts/Locations

Study Officials: Medical Responsible
Study Director
Merck Serono International SA, an affiliate of Merck KGaA Darmstadt, Germany

Locations: United States, Massachusetts
Please Contact US Medical Information
Rockland, Massachusetts, United States

Germany
Please contact the Merck KGaA Communication Center
Darmstadt, Germany

References

Citations:

Links: URL: <https://b-com.mci-group.com/Abstract/Statistics/AbstractStatisticsViewPage.aspx?AbstractID=15688>
Description The European League Against Rheumatism (EULAR)

Study Data/Documents:

Study Results

Participant Flow

Reporting Groups

	Description
Placebo	Placebo matched to atacicept was administered subcutaneously twice a week for initial 4 weeks, followed by once a week for subsequent 21 weeks.
Atacicept 150 mg With Loading Dose	Atacicept was administered subcutaneously at a dose of 150 milligram (mg) twice a week for initial 4 weeks as loading dose, followed by 150 mg once a week for subsequent 21 weeks.
Atacicept 150 mg Without Loading Dose	Atacicept was administered subcutaneously at a dose of 150 mg once a week for 25 weeks. Participants also received placebo matched to atacicept subcutaneously once a week during initial 4 weeks for blinding purpose (placebo injections alternating with atacicept injections).
Adalimumab	Adalimumab (Humira®) was administered subcutaneously at a dose of 40 mg every other week for 25 weeks.

Overall Study

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
Started	76	78	78	79
Completed	69	73	70	75
Not Completed	7	5	8	4
Adverse Event	0	2	1	1
Lost to Follow-up	2	2	1	3
Death	0	0	1	0

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
Unspecified	5	1	5	0

Baseline Characteristics

Analysis Population Description

Intention-to-treat (ITT) population included all randomized participants who received at least 1 study treatment dose.

Reporting Groups

	Description
Placebo	Placebo matched to atacicept was administered subcutaneously twice a week for initial 4 weeks, followed by once a week for subsequent 21 weeks.
Atacicept 150 mg With Loading Dose	Atacicept was administered subcutaneously at a dose of 150 milligram (mg) twice a week for initial 4 weeks as loading dose, followed by 150 mg once a week for subsequent 21 weeks.
Atacicept 150 mg Without Loading Dose	Atacicept was administered subcutaneously at a dose of 150 mg once a week for 25 weeks. Participants also received placebo matched to atacicept subcutaneously once a week during initial 4 weeks for blinding purpose (placebo injections alternating with atacicept injections).
Adalimumab	Adalimumab (Humira®) was administered subcutaneously at a dose of 40 mg every other week for 25 weeks.

Baseline Measures

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab	Total
Number of Participants	76	78	78	79	311
Age, Continuous [units: years] Mean (Standard Deviation)	54.0 (10.3)	53.0 (11.3)	53.3 (13.2)	53.3 (11.5)	53.4 (11.6)
Gender, Male/Female [units: participants]					
Female	64	65	66	64	259
Male	12	13	12	15	52

Outcome Measures

1. Primary Outcome Measure:

Measure Title	Percentage of Participants Achieving American College of Rheumatology 20 Response Based on C-reactive Protein (ACR20-CRP) at Week 26
Measure Description	ACR20-CRP response is defined as greater than or equal to (\geq) 20 percent (%) improvement from Baseline in both tender joint counts (based on a total of 68 joints) and swollen joint counts (based on a total of 66 joints) together with \geq 20% improvement from Baseline in at least 3 of the following 5 measures: 1) participant's assessment of pain; 2) participant's global assessment of disease activity; 3) physician's global assessment of disease activity; 4) participant's assessment of physical function; and 5) acute-phase marker (CRP).
Time Frame	Week 26
Safety Issue?	No

Analysis Population Description

ITT population included all randomized participants who received at least 1 study treatment dose.

Reporting Groups

	Description
Placebo	Placebo matched to atacicept was administered subcutaneously twice a week for initial 4 weeks, followed by once a week for subsequent 21 weeks.
Atacicept 150 mg With Loading Dose	Atacicept was administered subcutaneously at a dose of 150 milligram (mg) twice a week for initial 4 weeks as loading dose, followed by 150 mg once a week for subsequent 21 weeks.
Atacicept 150 mg Without Loading Dose	Atacicept was administered subcutaneously at a dose of 150 mg once a week for 25 weeks. Participants also received placebo matched to atacicept subcutaneously once a week during initial 4 weeks for blinding purpose (placebo injections alternating with atacicept injections).
Adalimumab	Adalimumab (Humira®) was administered subcutaneously at a dose of 40 mg every other week for 25 weeks.

Measured Values

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
Number of Participants Analyzed	76	78	78	79
Percentage of Participants Achieving American College of Rheumatology 20 Response Based on C-reactive Protein (ACR20-CRP) at Week 26 [units: percentage of participants]	46.1	44.9	57.7	70.9

2. Secondary Outcome Measure:

Measure Title	Percentage of Participants Achieving American College of Rheumatology 50 Response Based on CRP (ACR50-CRP) at Week 26
Measure Description	ACR50-CRP response is defined as $\geq 50\%$ improvement from Baseline in both tender joint counts (based on a total of 68 joints) and swollen joint counts (based on a total of 66 joints) together with $\geq 50\%$ improvement from Baseline in at least 3 of the following 5 measures: 1) participant's assessment of pain; 2) participant's global assessment of disease activity; 3) physician's global assessment of disease activity; 4) participant's assessment of physical function; and 5) acute-phase marker (CRP).
Time Frame	Week 26
Safety Issue?	No

Analysis Population Description

ITT population included all randomized participants who received at least 1 study treatment dose.

Reporting Groups

	Description
Placebo	Placebo matched to atacicept was administered subcutaneously twice a week for initial 4 weeks, followed by once a week for subsequent 21 weeks.
Atacicept 150 mg With Loading Dose	Atacicept was administered subcutaneously at a dose of 150 milligram (mg) twice a week for initial 4 weeks as loading dose, followed by 150 mg once a week for subsequent 21 weeks.
Atacicept 150 mg Without Loading Dose	Atacicept was administered subcutaneously at a dose of 150 mg once a week for 25 weeks. Participants also received placebo matched to atacicept subcutaneously once a week during initial 4 weeks for blinding purpose (placebo injections alternating with atacicept injections).
Adalimumab	Adalimumab (Humira®) was administered subcutaneously at a dose of 40 mg every other week for 25 weeks.

Measured Values

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
Number of Participants Analyzed	76	78	78	79
Percentage of Participants Achieving American College of Rheumatology 50 Response Based on CRP (ACR50-CRP) at Week 26 [units: percentage of participants]	14.5	29.5	33.3	38.0

3. Secondary Outcome Measure:

Measure Title	Percentage of Participants Achieving American College of Rheumatology 70 Response Based on CRP (ACR70-CRP) at Week 26
Measure Description	ACR70-CRP response is defined as $\geq 70\%$ improvement from Baseline in both tender joint counts (based on a total of 68 joints) and swollen joint counts (based on a total of 66 joints) together with $\geq 70\%$ improvement from Baseline in at least 3 of the following 5 measures: 1) participant's assessment of pain; 2) participant's global assessment of disease activity; 3) physician's global assessment of disease activity; 4) participant's assessment of physical function; and 5) acute-phase marker (CRP).
Time Frame	Week 26
Safety Issue?	No

Analysis Population Description

ITT population included all randomized participants who received at least 1 study treatment dose.

Reporting Groups

	Description
Placebo	Placebo matched to atacicept was administered subcutaneously twice a week for initial 4 weeks, followed by once a week for subsequent 21 weeks.
Atacicept 150 mg With Loading Dose	Atacicept was administered subcutaneously at a dose of 150 milligram (mg) twice a week for initial 4 weeks as loading dose, followed by 150 mg once a week for subsequent 21 weeks.
Atacicept 150 mg Without Loading Dose	Atacicept was administered subcutaneously at a dose of 150 mg once a week for 25 weeks. Participants also received placebo matched to atacicept subcutaneously once a week during initial 4 weeks for blinding purpose (placebo injections alternating with atacicept injections).
Adalimumab	Adalimumab (Humira®) was administered subcutaneously at a dose of 40 mg every other week for 25 weeks.

Measured Values

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
Number of Participants Analyzed	76	78	78	79
Percentage of Participants Achieving American College of Rheumatology 70 Response Based on CRP (ACR70-CRP) at Week 26 [units: percentage of participants]	5.3	12.8	12.8	17.7

4. Secondary Outcome Measure:

Measure Title	Percentage of Participants With Good or Moderate European League Against Rheumatism (EULAR) Responses at Week 26
Measure Description	The EULAR response criteria evaluate change in DAS28 scores represented as “good response”, “moderate response”, or “no response” considering both the current DAS28 score and the observed improvement from baseline. Participants were considered to have “good” or “moderate” EULAR response if at the time of assessment, their DAS28 score was less than or equal to (\leq) 5.1 and the improvement from baseline in their DAS28 score was greater than ($>$) 0.6; or if at the time of assessment, their DAS28 score was >5.1 and improvement from baseline in their DAS28 score was >1.2 .
Time Frame	Week 26
Safety Issue?	No

Analysis Population Description

ITT population included all randomized participants who received at least 1 study treatment dose.

Reporting Groups

	Description
Placebo	Placebo matched to atacicept was administered subcutaneously twice a week for initial 4 weeks, followed by once a week for subsequent 21 weeks.
Atacicept 150 mg With Loading Dose	Atacicept was administered subcutaneously at a dose of 150 milligram (mg) twice a week for initial 4 weeks as loading dose, followed by 150 mg once a week for subsequent 21 weeks.
Atacicept 150 mg Without Loading Dose	Atacicept was administered subcutaneously at a dose of 150 mg once a week for 25 weeks. Participants also received placebo matched to atacicept subcutaneously once a week during initial 4 weeks for blinding purpose (placebo injections alternating with atacicept injections).
Adalimumab	Adalimumab (Humira®) was administered subcutaneously at a dose of 40 mg every other week for 25 weeks.

Measured Values

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
Number of Participants Analyzed	76	78	78	79
Percentage of Participants With Good or Moderate European League Against Rheumatism (EULAR) Responses at Week 26 [units: percentage of participants]	59.2	64.1	67.9	81.0

5. Secondary Outcome Measure:

Measure Title	Number of Participants With Treatment-Emergent Adverse Events (TEAEs) and Serious TEAEs
Measure Description	An adverse event (AE) was defined as any new untoward medical occurrences/worsening of pre-existing medical condition without regard to possibility of causal relationship. A serious adverse event (SAE) was an AE that resulted in any of the following outcomes: death; life threatening; persistent/significant disability/incapacity; initial or prolonged inpatient hospitalization; congenital anomaly/birth defect.
Time Frame	From the first dose of study drug up to 30 days after the last dose of study drug, assessed up to Week 38
Safety Issue?	Yes

Analysis Population Description

ITT population included all randomized participants who received at least 1 study treatment dose.

Reporting Groups

	Description
Placebo	Placebo matched to atacicept was administered subcutaneously twice a week for initial 4 weeks, followed by once a week for subsequent 21 weeks.
Atacicept 150 mg With Loading Dose	Atacicept was administered subcutaneously at a dose of 150 milligram (mg) twice a week for initial 4 weeks as loading dose, followed by 150 mg once a week for subsequent 21 weeks.
Atacicept 150 mg Without Loading Dose	Atacicept was administered subcutaneously at a dose of 150 mg once a week for 25 weeks. Participants also received placebo matched to atacicept subcutaneously once a week during initial 4 weeks for blinding purpose (placebo injections alternating with atacicept injections).
Adalimumab	Adalimumab (Humira®) was administered subcutaneously at a dose of 40 mg every other week for 25 weeks.

Measured Values

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
Number of Participants Analyzed	76	78	78	79
Number of Participants With Treatment-Emergent Adverse Events (TEAEs) and Serious TEAEs [units: participants]				
TEAEs	38	49	49	50
Serious TEAEs	2	4	7	3

Reported Adverse Events

Time Frame	From the first dose of study drug up to 30 days after the last dose of study drug, assessed up to Week 38
Additional Description	An adverse event (AE) is defined as any untoward medical occurrence in the form of signs, symptoms, abnormal laboratory findings, or diseases that emerges or worsens relative to Baseline during a clinical study with an investigational medicinal product (IMP), regardless of causal relationship and even if no IMP has been administered.

Reporting Groups

	Description
Placebo	Placebo matched to atacicept was administered subcutaneously twice a week for initial 4 weeks, followed by once a week for subsequent 21 weeks.
Atacicept 150 mg With Loading Dose	Atacicept was administered subcutaneously at a dose of 150 milligram (mg) twice a week for initial 4 weeks as loading dose, followed by 150 mg once a week for subsequent 21 weeks.
Atacicept 150 mg Without Loading Dose	Atacicept was administered subcutaneously at a dose of 150 mg once a week for 25 weeks. Participants also received placebo matched to atacicept subcutaneously once a week during initial 4 weeks for blinding purpose (placebo injections alternating with atacicept injections).
Adalimumab	Adalimumab (Humira®) was administered subcutaneously at a dose of 40 mg every other week for 25 weeks.

Serious Adverse Events

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
	Affected/At Risk (%)	Affected/At Risk (%)	Affected/At Risk (%)	Affected/At Risk (%)
Total	2/76 (2.63%)	4/78 (5.13%)	7/78 (8.97%)	3/79 (3.8%)
Cardiac disorders				
Pericarditis ^{A *}	1/76 (1.32%)	0/78 (0%)	0/78 (0%)	0/79 (0%)
General disorders				
Pyrexia ^{A *}	0/76 (0%)	0/78 (0%)	1/78 (1.28%)	0/79 (0%)
Sudden cardiac death ^{A *}	0/76 (0%)	0/78 (0%)	1/78 (1.28%)	0/79 (0%)
Infections and infestations				

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
	Affected/At Risk (%)	Affected/At Risk (%)	Affected/At Risk (%)	Affected/At Risk (%)
Cellulitis ^{A *}	1/76 (1.32%)	0/78 (0%)	0/78 (0%)	0/79 (0%)
Disseminated tuberculosis ^{A *}	0/76 (0%)	0/78 (0%)	0/78 (0%)	1/79 (1.27%)
Pneumonia ^{A *}	0/76 (0%)	0/78 (0%)	0/78 (0%)	2/79 (2.53%)
Injury, poisoning and procedural complications				
Tendon rupture ^{A *}	1/76 (1.32%)	0/78 (0%)	0/78 (0%)	0/79 (0%)
Musculoskeletal and connective tissue disorders				
Osteoarthritis ^{A *}	0/76 (0%)	1/78 (1.28%)	0/78 (0%)	0/79 (0%)
Rheumatoid arthritis ^{A *}	0/76 (0%)	0/78 (0%)	1/78 (1.28%)	0/79 (0%)
Spinal osteoarthritis ^{A *}	0/76 (0%)	0/78 (0%)	1/78 (1.28%)	0/79 (0%)
Neoplasms benign, malignant and unspecified (incl cysts and polyps)				
Breast cancer female ^{A *}	0/76 (0%)	1/78 (1.28%)	0/78 (0%)	0/79 (0%)
Pregnancy, puerperium and perinatal conditions				
Abortion spontaneous ^{A *}	0/76 (0%)	1/78 (1.28%)	0/78 (0%)	0/79 (0%)
Pregnancy ^{A *}	0/76 (0%)	1/78 (1.28%)	0/78 (0%)	0/79 (0%)
Respiratory, thoracic and mediastinal disorders				
Dyspnoea ^{A *}	0/76 (0%)	0/78 (0%)	1/78 (1.28%)	0/79 (0%)
Laryngeal oedema ^{A *}	0/76 (0%)	1/78 (1.28%)	0/78 (0%)	0/79 (0%)
Obstructive airways disorder ^{A *}	0/76 (0%)	0/78 (0%)	1/78 (1.28%)	0/79 (0%)
Pulmonary embolism ^{A *}	0/76 (0%)	0/78 (0%)	1/78 (1.28%)	0/79 (0%)
Pulmonary hypertension ^{A *}	0/76 (0%)	0/78 (0%)	1/78 (1.28%)	0/79 (0%)
Surgical and medical procedures				
Knee arthroplasty ^{A *}	0/76 (0%)	0/78 (0%)	1/78 (1.28%)	0/79 (0%)

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
	Affected/At Risk (%)	Affected/At Risk (%)	Affected/At Risk (%)	Affected/At Risk (%)
Vascular disorders				
Hypertension ^{A *}	0/76 (0%)	1/78 (1.28%)	0/78 (0%)	0/79 (0%)

* Indicates events were collected by non-systematic methods.

A Term from vocabulary, MedDRA 11.1

Other Adverse Events

Frequency Threshold Above Which Other Adverse Events are Reported: 5%

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
	Affected/At Risk (%)	Affected/At Risk (%)	Affected/At Risk (%)	Affected/At Risk (%)
Total	23/76 (30.26%)	27/78 (34.62%)	24/78 (30.77%)	22/79 (27.85%)
Blood and lymphatic system disorders				
Leukopenia ^{A *}	4/76 (5.26%)	1/78 (1.28%)	1/78 (1.28%)	3/79 (3.8%)
General disorders				
Fatigue ^{A *}	1/76 (1.32%)	2/78 (2.56%)	1/78 (1.28%)	4/79 (5.06%)
Fatigue ^{A *}	1/76 (1.32%)	2/78 (2.56%)	1/78 (1.28%)	4/79 (5.06%)
Infections and infestations				
Bronchitis ^{A *}	4/76 (5.26%)	5/78 (6.41%)	6/78 (7.69%)	3/79 (3.8%)
Nasopharyngitis ^{A *}	6/76 (7.89%)	2/78 (2.56%)	4/78 (5.13%)	5/79 (6.33%)
Pharyngitis ^{A *}	1/76 (1.32%)	3/78 (3.85%)	4/78 (5.13%)	3/79 (3.8%)
Sinusitis ^{A *}	0/76 (0%)	5/78 (6.41%)	1/78 (1.28%)	0/79 (0%)
Upper respiratory tract infection ^{A *}	2/76 (2.63%)	4/78 (5.13%)	4/78 (5.13%)	6/79 (7.59%)
Urinary tract infection ^{A *}	3/76 (3.95%)	4/78 (5.13%)	4/78 (5.13%)	2/79 (2.53%)
Nervous system disorders				
Headache ^{A *}	3/76 (3.95%)	4/78 (5.13%)	4/78 (5.13%)	2/79 (2.53%)

	Placebo	Atacicept 150 mg With Loading Dose	Atacicept 150 mg Without Loading Dose	Adalimumab
	Affected/At Risk (%)	Affected/At Risk (%)	Affected/At Risk (%)	Affected/At Risk (%)
Respiratory, thoracic and mediastinal disorders				
Cough ^{A *}	2/76 (2.63%)	3/78 (3.85%)	4/78 (5.13%)	2/79 (2.53%)
Vascular disorders				
Hypertension ^{A *}	4/76 (5.26%)	3/78 (3.85%)	2/78 (2.56%)	1/79 (1.27%)

* Indicates events were collected by non-systematic methods.

A Term from vocabulary, MedDRA 11.1

▶ Limitations and Caveats

[Not specified]

▶ 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.

Prior to publishing results, Institution and Principal Investigator (PI) must first provide Sponsor with a copy of proposed publication for review at least 30 days prior to submission. If Institution and PI do not agree to modification, they shall so notify Sponsor and postpone submission for additional 60 days to allow Sponsor to seek legal remedies or file patent applications. There is a need for coordinated approach to any publication of results from sites for any multi-site study.

Results Point of Contact:

Name/Official Title: Merck KGaA Communication Center

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