Clinical trial results:
Molecular profiling of postmenopausal women with breast cancer on neoadjuvant exemestane or tamoxifen. MONET version 1

Summary

EudraCT number	2005-001698-89
Trial protocol	GB
Global end of trial date	05 June 2015

Results information

Result version number	v1 (current)
This version publication date	08 July 2016
First version publication date	31 July 2015

Trial information

Trial identification

Sponsor protocol code	Monet

Additional study identifiers

ISRCTN number	ISRCTN87408408
ClinicalTrials.gov id (NCT number)	-
WHO universal trial number (UTN)	-

Notes:

Sponsors

Sponsor organisation name	Cambridge University Hospitals NHS Foundation Trust
Sponsor organisation address	Hills Road, Cambridge University Hospitals NHS Foundation Trus, United Kingdom, CB2 0QQ
Public contact	Anne-Laure Vallier, Cambridge University Hospitals NHS Foundation Trust, +44 1223 348086, anne-laure.vallier@addenbrookes.nhs.uk
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Notes:

Paediatric regulatory details

Is trial part of an agreed paediatric investigation plan (PIP)	No
Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial?	No
Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial?	No

Notes:

Results analysis stage

Analysis stage	Interim
Date of interim/final analysis	05 June 2015
Is this the analysis of the primary completion data?	No

Global end of trial reached?	Yes
Global end of trial date	05 June 2015
Was the trial ended prematurely?	Yes

Notes:

General information about the trial

Main objective of the trial:

To perform prospective analysis of (i) gene expression profiles; (ii) previously identified candidate genes; and (iii) blood analysis, before, during, and after neoadjuvant therapy with exemestane or tamoxifen to identify genes, gene profiles and serum markers predictive of response and resistance.

PLEASE NOTE: No analysis was done for this study, hence we cannot provide interim/final analysis date. The "Date of interim/final analysis" field was checked in error, but there is no way to un-check it. Besides the field is also mandatory and is preventing us from posting the study. To enable us post the study result data we have therefore set the "Date of interim/final analysis" to the "Global end of trial date, i.e., 05-June-2015.

Protection of trial subjects:

"Protocol design: various exclusion criteria, screening, and on-treatment investigations conducted to ascertain and maintain knowledge of patients' fitness to receive the trial treatment; on-study toxicity management guidelines; and continuous monitoring and dissemination of the safety data for the treatments used throughout the trial, and of the patients themselves."

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	27 April 2007
Long term follow-up planned	Yes
Long term follow-up rationale	Efficacy
Long term follow-up duration	5 Years
Independent data monitoring committee (IDMC) involvement?	No

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	United Kingdom: 26
Worldwide total number of subjects	26
EEA total number of subjects	26

Notes:

Subjects enrolled per age group

In utero	0
Preterm newborn - gestational age < 37 wk	0
Newborns (0-27 days)	0
Infants and toddlers (28 days-23	0

months)	
Children (2-11 years)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	2
From 65 to 84 years	23
85 years and over	1

Subject disposition

Recruitment

Recruitment details:

"Patients were approached, consented, and recruited at hospital oncology clinics for recently-diagnosed, ER positive, early (non-metastatic) breast cancer. Recruitment period was from Apr 2007 – Mar 2010."

Pre-assignment

Screening details:

"Women with diagnosis of primary invasive breast cancer on core biopsy; not suitable for chemotherapy; Localised or locally advanced disease: tumour size >10mm on US or T4 tumour of any size with direct extension to chest wall or skin, Inflammatory carcinoma with tumour of any size, Other Locally Advanced disease, Clinical & radiological involvemen

Period 1

Period 1 title	Completion of recruitment (overall period)
Is this the baseline period?	Yes
Allocation method	Randomised - controlled
Blinding used	Not blinded

Arms

Are arms mutually exclusive?	Yes
Arm title	Control Arm

Arm description:

Tamoxifen

Arm type	Control arm

No investigational medicinal product assigned in this arm

Arm title	Research Arm

Arm description:

Exemestane

Arm type	Experimental
Investigational medicinal product name	Exemestane
Investigational medicinal product code	Exemestane
Other name	
Pharmaceutical forms	Tablet
Routes of administration	Oral use

Dosage and administration details:

25mg daily for 16 weeks

Investigational medicinal product name	Tamoxifen
Investigational medicinal product code	Tamoxifen
Other name	
Pharmaceutical forms	Tablet
Routes of administration	Oral use

Dosage and administration details:

20mg daily for 16 weeks

Number of subjects in period 1	Control Arm	Research Arm
Started	13	13
Completed	9	10
Not completed	4	3
Physician decision	2	1
Consent withdrawn by subject	-	1
Disease progression	2	1

Baseline characteristics

Reporting groups	
Reporting group title	Control Arm
Reporting group description: Tamoxifen	
Reporting group title	Research Arm
Reporting group description: Exemestane	

Reporting group values	Control Arm	Research Arm	Total
Number of subjects	13	13	26
Age categorical			
Tamoxifen			
Units: Subjects			
In utero	0	0	0
Preterm newborn infants (gestational age < 37 wks)	0	0	0
Newborns (0-27 days)	0	0	0
Infants and toddlers (28 days-23 months)	0	0	0
Children (2-11 years)	0	0	0
Adolescents (12-17 years)	0	0	0
Adults (18-64 years)	1	0	1
From 65-84 years	12	12	24
85 years and over	0	1	1
Gender categorical Units: Subjects			
Female	13	13	26
Male	0	0	0

End points

End points reporting groups

Reporting group title	Control Arm
Reporting group description: Tamoxifen	
Reporting group title	Research Arm
Reporting group description: Exemestane	

Primary: Response

End point title	Response[1]
End point description:	
End point type	Primary
End point timeframe: No data was collected as the study stopped early.	

Notes:

[1] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.
Justification: No data was collected as the study stopped early. No analysis was performed

End point values	Control Arm	Research Arm		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	13[2]	13[3]		
Units: People	0	0		

Notes:

[2] - No data was collected as the study stopped early

[3] - No data was collected as the study stopped early

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

From day of randomisation of first patient to end of treatment of final patient

Assessment type	Systematic

Dictionary used

Dictionary name	CTCAE
Dictionary version	3

Reporting groups

Reporting group title	All patients

Reporting group description:

All patients randomised into the trial

Serious adverse events	All patients		
Total subjects affected by serious adverse events			
subjects affected / exposed	2 / 26 (7.69%)		
number of deaths (all causes)	8		
number of deaths resulting from adverse events	0		
Gastrointestinal disorders			
Obstruction GI: Gallbladder (10017636)	Additional description: Investigation for Gall Stones Note: CTCAE v3.0 (medDRA 10.0) were used in coding		
alternative dictionary used: MedDRA 10			
subjects affected / exposed	1 / 26 (3.85%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0 / 0		
Musculoskeletal and connective tissue disorders			
Other: dislocation: hip (10048592)	Additional description: Dislocation of right hip joint Note: CTCAE v3.0 (medDRA 10.0) were used for coding		
alternative dictionary used: MedDRA 10			
subjects affected / exposed	1 / 26 (3.85%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

Frequency threshold for reporting non-serious adverse events: 0 %

Non-serious adverse events	All patients		
Total subjects affected by non-serious adverse events			
subjects affected / exposed	23 / 26 (88.46%)		
Nervous system disorders			
Pain: headache [10019211]			
subjects affected / exposed	1 / 26 (3.85%)		
occurrences (all)	2		
restlessness [10015832]			
subjects affected / exposed	2 / 26 (7.69%)		
occurrences (all)	2		
General disorders and administration site conditions			
fatigue [10016256]			
subjects affected / exposed	12 / 26 (46.15%)		
occurrences (all)	27		
muscle / joint pain [10028411]			
subjects affected / exposed	11 / 26 (42.31%)		
occurrences (all)	25		
Eye disorders			
haemorrhage/bleeding (eye) [10019524]			
subjects affected / exposed	1 / 26 (3.85%)		
occurrences (all)	1		
Gastrointestinal disorders			
nausea [10028813]			
subjects affected / exposed	3 / 26 (11.54%)		
occurrences (all)	3		
constipation [10010774]			
subjects affected / exposed	4 / 26 (15.38%)		
occurrences (all)	6		
diarrhoea [10012727]			
subjects affected / exposed	4 / 26 (15.38%)		
occurrences (all)	5		
Respiratory, thoracic and mediastinal disorders			
cough [10011224]			
subjects affected / exposed	3 / 26 (11.54%)		
occurrences (all)	5		
dyspnoea [10013963]			

subjects affected / exposed occurrences (all)	1 / 26 (3.85%) 1		
Skin and subcutaneous tissue disorders rash [10037853] subjects affected / exposed occurrences (all)	 1 / 26 (3.85%) 2		
Endocrine disorders hot flushes [10020407] subjects affected / exposed occurrences (all)	 Additional description: CTCAE v3.0 (medDRA 10.0) 14 / 26 (53.85%) 33		
Infections and infestations infection: UTI [10046571] subjects affected / exposed occurrences (all)	 2 / 26 (7.69%) 2		

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
14 November 2006	Clarification of eligibility and Protocol update. Correction of oversight in Patient Information Sheet.
26 January 2007	Introduction of standard practice treatment post surgery. Updates to the Protocol, Patient Information Sheet, and GP letter.

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported