



## Clinical trial results:

**A phase IV, open, randomized, controlled study to demonstrate the non-inferiority of co-administration of GSK Biologicals' live attenuated measles-mumps-rubella-varicella vaccine and Baxter's Neisseria meningitidis C conjugate vaccine versus separate administration of each of the vaccines in healthy children aged 12 through 23 months**

### Summary

EudraCT number	2008-003318-81
Trial protocol	DE
Global end of trial date	27 November 2012

### Results information

Result version number	v1 (current)
This version publication date	30 January 2019
First version publication date	30 January 2019
Summary attachment (see zip file)	Cancelled before Active Statement (Cancelled before Active Statement.pdf)

### Trial information

#### Trial identification

Sponsor protocol code	111846
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#### Additional study identifiers

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

Notes:

### Sponsors

Sponsor organisation name	GlaxoSmithKline Biologicals
Sponsor organisation address	Rue de l'Institut 89, Rixensart, Belgium, B-1330
Public contact	Clinical Disclosure Advisor, GlaxoSmithKline Biologicals, 44 2089904466, GSKClinicalSupportHD@gsk.com
Scientific contact	Clinical Disclosure Advisor, GlaxoSmithKline Biologicals, 44 2089904466, GSKClinicalSupportHD@gsk.com

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?	Yes

Notes:

## Results analysis stage

Analysis stage	Final
Date of interim/final analysis	27 November 2012
Is this the analysis of the primary completion data?	No
Global end of trial reached?	Yes
Global end of trial date	27 November 2012
Was the trial ended prematurely?	Yes

Notes:

## General information about the trial

Main objective of the trial:

To demonstrate the non-inferiority in terms of immunogenicity of the first dose of MMRV vaccine co administered with MenC conjugate vaccine compared to the first dose of MMRV vaccine alone with respect to anti-measles, anti-mumps, anti-rubella, and anti-varicella seroconversion rates.  
To demonstrate the non-inferiority of MenC conjugate vaccine co administered with MMRV compared to MenC conjugate vaccine alone in terms of serum bactericidal antibodies against *Neisseria meningitidis* serogroup C

Protection of trial subjects:

The study was cancelled before active (see attached statement). No patient entered the study, therefore no results/data are available.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	27 November 2012
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	No

Notes:

## Population of trial subjects

### Subjects enrolled per country

Country: Number of subjects enrolled	Poland: 50000
Country: Number of subjects enrolled	Germany: 49999
Worldwide total number of subjects	99999
EEA total number of subjects	99999

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 months)	99999
Children (2-11 years)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	0
From 65 to 84 years	0

85 years and over	0
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## Subject disposition

### Recruitment

Recruitment details:

99999 is "Not Applicable" value or '0' participants. The study was cancelled before active (see attached statement). No patient entered the study, therefore no results/data are available.

### Pre-assignment

Screening details:

The study was cancelled before active (see attached statement).

### Period 1

Period 1 title	Cancelled before active period (overall period)
Is this the baseline period?	Yes
Allocation method	Not applicable
Blinding used	Not blinded

### Arms

Arm title	No-Arm
Arm description: -	
Arm type	Experimental
Investigational medicinal product name	Priorix-Tetra
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Powder and solution for solution for injection
Routes of administration	Intramuscular use

Dosage and administration details:

The product was not administered as the study was cancelled before active.

Number of subjects in period 1	No-Arm
Started	99999
Completed	0
Not completed	99999
Study was cancelled before active	99999

## Baseline characteristics

## End points

### End points reporting groups

Reporting group title	No-Arm
Reporting group description: -	

### Primary: No end point results

End point title	No end point results <sup>[1]</sup>
End point description:	

End point type	Primary
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End point timeframe:

The study was cancelled before active (see attached statement).

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: The study was cancelled before active (see attached statement).

<b>End point values</b>	No-Arm			
Subject group type	Reporting group			
Number of subjects analysed	99999			
Units: Participants	0			

### Statistical analyses

No statistical analyses for this end point

## Adverse events

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### Adverse events information<sup>[1]</sup>

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Timeframe for reporting adverse events:

The study was cancelled before active (see attached statement).

Assessment type	Systematic
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### Dictionary used

Dictionary name	MedDRA
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Dictionary version	15.1
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Frequency threshold for reporting non-serious adverse events: 0 %

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### Notes:

[1] - There are no non-serious adverse events recorded for these results. It is expected that there will be at least one non-serious adverse event reported.

Justification: The study was cancelled before active (see attached statement).

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? No

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### Interruptions (globally)

Were there any global interruptions to the trial? Yes

Date	Interruption	Restart date
27 November 2012	The study was cancelled before active (see attached statement).	-

Notes:

### Limitations and caveats

None reported