

Clinical trial results:

A Long-Term, Open-Label, Safety and Efficacy Study of Cysteamine Bitartrate Delayed-release Capsules (RP103) in Patients with Nephropathic Cystinosis

Summary

EudraCT number	2010-018365-34	
Trial protocol	FR NL	
Global end of trial date	26 June 2017	
Results information		
Result version number	v1 (current)	
This version publication date	05 January 2018	
First version publication date	05 January 2018	

Trial information

Trial identification	
Sponsor protocol code	RP103-04
Additional study identifiers	
ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT01197378
WHO universal trial number (UTN)	-

Notes:

Sponsors	
Sponsor organisation name	Horizon Pharma USA, Inc.
Sponsor organisation address	150 S. Saunders Road, Lake Forest, United States, 60045
Public contact	Evelyn Olson, Horizon Pharma USA, Inc., clinicaltrials@horizonpharma.com
Scientific contact	Maria Pecoraro, MD, Horizon Pharma USA, Inc., clinicaltrials@horizonpharma.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	26 June 2017	
Is this the analysis of the primary completion data?	No	
Global end of trial reached?	Yes	
Global end of trial date	26 June 2017	
Was the trial ended prematurely?	No	

Notes:

General information about the trial

Main objective of the trial:

The primary objective was to assess the safety and tolerability of long-term repeat dosing of RP103 in patients with nephropathic cystinosis.

Protection of trial subjects:

The study was conducted in accordance with Good Clinical Practice (GCP).

The protocol, Informed Consent Form (ICF) and assents were reviewed and approved by the Institutional Review Board (IRB) or Ethics Committee (EC).

Written informed assent for the study was obtained from all pediatric subjects and from each pediatric subject's parent or legal guardian before protocol-specific procedures were carried out. For adults above the age of 18 years, written informed consent for the study was obtained before protocol-specific procedures were carried out.

Background therapy: -	
Evidence for comparator: -	
Actual start date of recruitment	27 August 2010
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	No

Notes:

Population of trial subjects

Subjects enrolled per country		
Netherlands: 4		
France: 23		
United States: 33		
60		
27		

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)	0
Children (2-11 years)	37
Adolescents (12-17 years)	17

Adults (18-64 years)	6
From 65 to 84 years	0
85 years and over	0

Subject disposition

Recruitment

Recruitment details:

Initially, only subjects who completed the previous Phase III Study RP103-03 were enrolled in this extension study. As of 27 September 2011, enrollment was opened up to additional subjects, including subjects who were less than 6 years of age and kidney transplant subjects who qualified based on the inclusion/exclusion criteria.

Pre-assignment

Screening details:

Of the 60 subjects who were screened for participation in the RP103-04 study, all 60 were eligible and subsequently enrolled.

Period 1		
Period 1 title	Overall Study (overall period)	
Is this the baseline period?	Yes	
Allocation method	Not applicable	
Blinding used	Not blinded	
Arms		
Arm title	Cysteamine bitartrate	
Arm description:		
Cysteamine bitartrate delayed-release capsules were administered twice daily.		
Arm type	Experimental	
Investigational medicinal product name	Cysteamine Bitartrate Delayed-Release	
Investigational medicinal product code	RP103	
Other name	mercaptamine bitartrate, PROCYSBI	
Pharmaceutical forms	Gastro-resistant capsule, hard	
Routes of administration	Oral use	

Dosage and administration details:

Subjects who entered the trial from the RP103-03 study continued treatment with RP103 Q12H at the last dose level prescribed during their participation in the study.

Subjects not entering the trial from RP103-03 study were started on twice a day administration of RP103, where the total daily RP103 dose was 70% of their pre-study total daily stable Cystagon® dose.

Number of subjects in period 1	Cysteamine bitartrate
Started	60
Received treatment	59
Completed	53
Not completed	7
Physician decision	1
Consent withdrawn by subject	1
Adverse event, non-fatal	3
Other	2

Baseline characteristics

Reporting groups

Reporting group title	Overall Study
Reporting aroup title	TOVERALI STUDV
	10.0.0.0

Reporting group description: -

Reporting group values	Overall Study	Total	
Number of subjects	60	60	
Age categorical			
Units: Subjects			
Children (2-11 years)	37	37	
Adolescent (12-17 years)	17	17	
18-64 years	6	6	
Age continuous			
Units: years			
arithmetic mean	10.7		
standard deviation	± 6.10	-	
Gender categorical			
Units: Subjects			
Female	23	23	
Male	37	37	
Race			
Units: Subjects			
White	59	59	
Other	1	1	
Ethnicity			
Units: Subjects			
Hispanic/Latino	3	3	
Not Hispanic/Latino	57	57	

End points

End points reporting gro	ups
Reporting group title	Cysteamine bitartrate
Reporting group description:	
Cysteamine bitartrate delayed	-release capsules were administered twice daily.

Primary: Number of Participants with Treatment-emergent Adverse Events		
End point title	Number of Participants with Treatment-emergent Adverse Events ^[1]	

End point description:

Drug-related includes adverse events with investigator-assessed relation to drug of: 'possibly', 'probably' or 'definitely'.

The severity of AEs was categorized according to the Common Terminology Criteria for Adverse Events (CTCAE), Version 3.0 as follows:

- MILD (Grade 1): experience is minor and does not cause significant discomfort to subject or change in activities of daily living (ADL); subject is aware of symptoms but symptoms are easily tolerated;
- MODERATE (Grade 2): experience is an inconvenience or concern to the subject and causes interference with ADL, but the subject is able to continue with ADL.
- SEVERE (Grade 3): experience significantly interferes with ADL and the subject is incapacitated and/or unable to continue with ADL
- LIFE THREATENING (Grade 4): experience that, in the view of the Investigator, places the subject at immediate risk of death from the event as it occurred.

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End point timeframe:

From first dose of study drug to 7 days after the last dose; median duration of treatment was 1461 days.

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 statistical analyses were performed in this open-label extension study.

End point description:

Plasma cysteamine concentration was determined using methods employing Hydrophilic Interaction Liquid Chromatography (HILC) high pressure liquid chromatography (HPLC) tandem mass spectrometry (HPLC-MS/MS).

The Pharmacokinetic/Pharmacodynamic (PK/PD) Population includes all subjects who had at least one PK/PD measurement. Day 1 results only include subjects who did not complete Study RP103-03. Month 1 results only available for subjects who did complete Study RP103-03.

End point type	Secondary
Zna pome type	Decondary

End point timeframe:

Day 1 (predose) and Month 6, Years 1, 1.5, 2, 3, 4 and 5 at 0.5 hours post-dose

End point values	Cysteamine bitartrate		
Subject group type	Reporting group		
Number of subjects analysed	59 ^[3]		
Units: mg/L			
arithmetic mean (standard deviation)			
Day 1 (N = 19)	0.17 (± 0.093)		
Month 6 (N = 56)	0.29 (± 0.613)		
Year 1 (N = 56)	0.37 (± 0.513)		
Year 1.5 (N = 55)	0.48 (± 0.718)		
Year 2 (N = 45)	0.36 (± 0.412)		
Year 3 (N = 28)	0.34 (± 0.659)		
Year 4 (N = 38)	0.47 (± 0.708)		
Year 5 (N = 26)	0.40 (± 0.399)		

Notes:

[3] - PK/PD Population

Statistical analyses

No statistical analyses for this end point

Secondary: White Blood Cell Cystine Concentration		
End point title	White Blood Cell Cystine Concentration	

End point description:

White blood cell (WBC) cystine concentration was determined using high performance liquid chromatography-electrospray ionization tandem mass spectrometry (LC-ESI-MS/MS). The Pharmacokinetic/Pharmacodynamic (PK/PD) Population includes all subjects who had at least one PK/PD measurement. Day 1 results only include subjects who did not complete Study RP103-03. Month 1 results only available for subjects who did complete Study RP103-03.

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End point type	Secondary

End point timeframe:

Day 1 (predose) and Month 6, Years 1, 1.5, 2, 3, 4 and 5 at 0.5 hours post-dose

End point values	Cysteamine bitartrate		
Subject group type	Reporting group		
Number of subjects analysed	59 ^[4]		
Units: nmol 1/2 Cystine/mg protein			
arithmetic mean (standard deviation)			
Day 1 (N = 18)	1.68 (± 1.275)		
Month 6 (N = 56)	0.93 (± 1.174)		
Year 1 (N = 55)	0.65 (± 0.569)		
Year 1.5 (N = 54)	0.75 (± 0.852)		
Year 2 (N = 44)	0.65 (± 0.851)		
Year 3 (N = 28)	0.66 (± 0.575)		
Year 4 (N = 28)	1.38 (± 1.672)		
Year 5 (N = 24)	1.17 (± 2.117)		

Notes:

[4] - PK/PD Population

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information Timeframe for reporting adverse events: From first dose of study drug to 7 days after last dose; median duration of treatment was 1461 days. Assessment type Systematic Dictionary used Dictionary name MedDRA Dictionary version 13.0 Reporting groups Reporting group title Cysteamine bitartrate Reporting group description: Cysteamine bitartrate delayed-release capsules were administered twice daily.

Serious adverse events	Cysteamine bitartrate	
Total subjects affected by serious adverse events		
subjects affected / exposed	32 / 59 (54.24%)	
number of deaths (all causes)	0	
number of deaths resulting from adverse events	0	
Vascular disorders		
Hypertension		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0 / 0	
Surgical and medical procedures		
Nephrectomy		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0 / 0	
Postoperative care		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 2	
deaths causally related to treatment / all	0 / 0	
Pregnancy, puerperium and perinatal conditions Abortion spontaneous		

subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
General disorders and administration site conditions			
Impaired healing			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Immune system disorders			
Kidney transplant rejection			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0/3		
deaths causally related to treatment / all	0 / 0		
Respiratory, thoracic and mediastinal disorders			
Tonsillar hypertrophy			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Psychiatric disorders			
Abnormal behaviour			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0/0		
Impaired self-care			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Mental disorder			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Investigations	T		
Biopsy kidney			
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subjects affected / exposed	2 / 50 /2 200/)	1	
	2 / 59 (3.39%)		
occurrences causally related to treatment / all	0/3		
deaths causally related to treatment / all	0 / 0		
Investigation			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Injury, poisoning and procedural			
complications Alcohol poisoning			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to			
treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Fracture			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Graft dysfunction			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Congenital, familial and genetic			
disorders Arnold-chiari malformation			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to			
treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Cryptorchism			
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Cardiac disorders			
Congestive cardiomyopathy			

occurrences causally related to treatment / all deaths causally rela	subjects affected / exposed	1 / 59 (1.69%)		
Nervous system disorders Convulsion subjects affected / exposed occurrences causally related to treatment / all deaths causally related to		0 / 1		
Convulsion subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all Diarrhoea subjects affected / exposed occurrences causally related to treatment / all deaths causally related to		0 / 0		
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occurrences causally related to treatment / all deaths causally related to treatment / all of treatment / al	Convulsion			
treatment / all deaths causally related to treatment / all Epilepsy subjects affected / exposed occurrences causally related to treatment / all deaths causally related to treatment / all deaths causally related to treatment / all Loss of consciousness subjects affected / exposed occurrences causally related to treatment / all deaths causally related to	subjects affected / exposed	1 / 59 (1.69%)		
Epilepsy subjects affected / exposed occurrences causally related to treatment / all deaths causally related to		0 / 2		
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treatment / all deaths causally related to treatment / all Diarrhoea subjects affected / exposed occurrences causally related to treatment / all deaths causally related to	subjects affected / exposed	4 / 59 (6.78%)		
treatment / all 0 / 0 Diarrhoea		2 / 4		
subjects affected / exposed occurrences causally related to treatment / all deaths causally related to		0 / 0		
subjects affected / exposed occurrences causally related to treatment / all deaths causally related to	Diarrhoea]	
occurrences causally related to 1 / 2 treatment / all deaths causally related to		2 / 59 (3.39%)		
deaths causally related to				
	deaths causally related to	0 / 0		

Constipation		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	1/1	
deaths causally related to treatment / all	0/0	
Gastric fistula]	
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0 / 0	
Gastrooesophageal reflux disease		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0 / 0	
Peritonitis		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0/0	
Renal and urinary disorders		
Renal failure chronic		
subjects affected / exposed	4 / 59 (6.78%)	
occurrences causally related to treatment / all	0 / 7	
deaths causally related to treatment / all	0 / 0	
Renal failure		
subjects affected / exposed	3 / 59 (5.08%)	
occurrences causally related to treatment / all	1 / 3	
deaths causally related to treatment / all	0 / 0	
Renal failure acute		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0/0	
Renal impairment		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0 / 0	
Renal tubular acidosis	j	
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subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Musculoskeletal and connective tissue disorders			
Knee deformity			
subjects affected / exposed	5 / 59 (8.47%)		
occurrences causally related to treatment / all	0 / 9		
deaths causally related to treatment / all	0 / 0		
Infections and infestations			
Appendicitis			
subjects affected / exposed	7 / 59 (11.86%)		
occurrences causally related to treatment / all	0 / 7		
deaths causally related to treatment / all	0 / 0		
Gastroenteritis			
subjects affected / exposed	6 / 59 (10.17%)		
occurrences causally related to treatment / all	1 / 15		
deaths causally related to treatment / all	0 / 0		
Appendicitis perforated	İ	· 	
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Bacterial diarrhoea	I		
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Otitis media chronic		· 	
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Pneumonia			' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
subjects affected / exposed	1 / 59 (1.69%)		
occurrences causally related to	0 / 1		
treatment / all deaths causally related to treatment / all	0 / 0		
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Pyelonephritis subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0 / 0	
Respiratory tract infection viral		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0/0	
Salpingitis		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0/0	
Tooth abscess		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0/0	
Urethritis	[
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0/0	
Metabolism and nutrition disorders		
Dehydration		
subjects affected / exposed	5 / 59 (8.47%)	
occurrences causally related to treatment / all	0 / 5	
deaths causally related to treatment / all	0 / 0	
Hypokalaemia		
subjects affected / exposed	4 / 59 (6.78%)	
occurrences causally related to treatment / all	0 / 5	
deaths causally related to treatment / all	0/0	
Acidosis	į i	
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0/0	
Electrolyte imbalance		
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subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 2	
deaths causally related to treatment / all	0 / 0	
Hypocalcaemia		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0/3	
deaths causally related to treatment / all	0 / 0	
Hyponatraemia		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 3	
deaths causally related to treatment / all	0 / 0	
Malnutrition		
subjects affected / exposed	1 / 59 (1.69%)	
occurrences causally related to treatment / all	0 / 1	
deaths causally related to treatment / all	0 / 0	

Frequency threshold for reporting non-serious adverse events: 5 %

Non-serious adverse events	Cysteamine bitartrate	
Total subjects affected by non-serious adverse events		
subjects affected / exposed	58 / 59 (98.31%)	
Vascular disorders		
Hypertension		
subjects affected / exposed	7 / 59 (11.86%)	
occurrences (all)	7	
General disorders and administration site conditions		
Fatigue		
subjects affected / exposed	10 / 59 (16.95%)	
occurrences (all)	11	
Pyrexia		
subjects affected / exposed	8 / 59 (13.56%)	
occurrences (all)	14	
Asthenia		

subjects affected / exposed	4 / 50 / 6 300/ 3
	4 / 59 (6.78%)
occurrences (all)	4
Influenza like illness	
subjects affected / exposed	4 / 59 (6.78%)
occurrences (all)	6
Oedema peripheral	
subjects affected / exposed	3 / 59 (5.08%)
occurrences (all)	3
Pain	
subjects affected / exposed	3 / 59 (5.08%)
occurrences (all)	
occurrences (un)	7
Immune system disorders	1
Seasonal allergy	
subjects affected / exposed	3 / 59 (5.08%)
occurrences (all)	5
Reproductive system and breast	
disorders Dysmenorrhoea	
subjects affected / exposed	3 / 59 (5.08%)
occurrences (all)	39
Respiratory, thoracic and mediastinal	
disorders	
Cough	
subjects affected / exposed	10 / 59 (16.95%)
occurrences (all)	14
Epistaxis	
subjects affected / exposed	5 / 59 (8.47%)
occurrences (all)	7
Oronham (need today	
Oropharyngeal pain	
subjects affected / exposed	5 / 59 (8.47%)
occurrences (all)	8
Psychiatric disorders	1
Depression	
subjects affected / exposed	5 / 59 (8.47%)
occurrences (all)	
occurrences (dii)	5
Investigations	†
Blood creatinine increased	

subjects affected / exposed	5 / 59 (8.47%)	
occurrences (all)	5	
	_	
Injury, poisoning and procedural complications		
Joint sprain		
subjects affected / exposed	4 / 59 (6.78%)	
occurrences (all)	4	
Arthropod bite		
subjects affected / exposed	3 / 59 (5.08%)	
occurrences (all)	3	
Cardiac disorders		
Left ventricular hypertrophy		
subjects affected / exposed	4 / 59 (6.78%)	
occurrences (all)		
decarrences (un)	4	
Nervous system disorders		
Headache		
subjects affected / exposed	22 / 59 (37.29%)	
occurrences (all)	69	
Syncope		
subjects affected / exposed	5 / 59 (8.47%)	
occurrences (all)		
occurrences (air)	5	
Lethargy		
subjects affected / exposed	3 / 59 (5.08%)	
occurrences (all)	3	
Blood and lymphatic system disorders		
Anaemia Anaemia		
subjects affected / exposed	4 / 59 (6.78%)	
occurrences (all)	4	
Eye disorders		
Conjunctivitis		
subjects affected / exposed	14 / 59 (23.73%)	
occurrences (all)	16	
Photophobia		
subjects affected / exposed	3 / 59 (5.08%)	
occurrences (all)		
Joed Tellers (ull)	3	
Gastrointestinal disorders		

Vomiting subjects affected / exposed occurrences (all)	40 / 59 (67.80%) 129	
Diarrhoea subjects affected / exposed occurrences (all)	17 / 59 (28.81%) 32	
Nausea subjects affected / exposed occurrences (all)	16 / 59 (27.12%) 21	
Abdominal pain		

subjects affected / exposed	6 / 59 (10.17%)	
occurrences (all)	6	
Acne		
subjects affected / exposed	3 / 59 (5.08%)	
occurrences (all)	5	
Rash		
subjects affected / exposed	3 / 59 (5.08%)	
occurrences (all)	4	
		ļ
Musculoskeletal and connective tissue disorders		
Arthralgia		
subjects affected / exposed	10 / 59 (16.95%)	
occurrences (all)	13	
Batta ta auto ai		
Pain in extremity subjects affected / exposed	0 / 50 / 45 250/)	
	9 / 59 (15.25%)	
occurrences (all)	15	
Back pain		
subjects affected / exposed	4 / 59 (6.78%)	
occurrences (all)	8	
Muscle spasms		
subjects affected / exposed	3 / 59 (5.08%)	
occurrences (all)	3	
Infections and infestations		t
Influenza		
subjects affected / exposed	14 / 59 (23.73%)	
occurrences (all)	22	
Nasopharyngitis		
subjects affected / exposed	13 / 59 (22.03%)	
occurrences (all)		
occurrences (un)	19	
Gastroenteritis		
subjects affected / exposed	11 / 59 (18.64%)	
occurrences (all)	25	
For infaction		
Ear infection subjects affected / exposed	10 / 50 /16 050/	
	10 / 59 (16.95%)	
occurrences (all)	10	
Upper respiratory tract infection		

subjects affected / exposed	10 / 59 (16.95%)
occurrences (all)	24
Cinnellia	
Sinusitis subjects affected / exposed	6 / 59 (10.17%)
occurrences (all)	9
, ,	
Urinary tract infection	
subjects affected / exposed	6 / 59 (10.17%)
occurrences (all)	7
Bronchitis	
subjects affected / exposed	5 / 59 (8.47%)
occurrences (all)	8
Otitis media	
subjects affected / exposed	5 / 59 (8.47%)
occurrences (all)	6
. ,	
Molluscum contagiosum	
subjects affected / exposed	3 / 59 (5.08%)
occurrences (all)	3
Pharyngitis	
subjects affected / exposed	3 / 59 (5.08%)
occurrences (all)	4
Pharyngitis streptococcal	
subjects affected / exposed	3 / 59 (5.08%)
occurrences (all)	3
	-
Rhinitis subjects affected / exposed	2 / 50 /5 000/ \
occurrences (all)	3 / 59 (5.08%)
occurrences (an)	5
Tonsillitis	
subjects affected / exposed	3 / 59 (5.08%)
occurrences (all)	3
Varicella	
subjects affected / exposed	3 / 59 (5.08%)
occurrences (all)	4
Viral infection subjects affected / exposed	2 / 52 /5 222/
	3 / 59 (5.08%)
occurrences (all)	3
Metabolism and nutrition disorders	

Dehydration subjects affected / exposed occurrences (all)	6 / 59 (10.17%)	
Decreased appetite subjects affected / exposed occurrences (all)	5 / 59 (8.47%) 6	
Hypokalaemia subjects affected / exposed occurrences (all)	3 / 59 (5.08%) 4	

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
11 March 2010	The objectives for Amendment 1 were: 1. To update the Background Information based on the final results obtained from the RP103-01 pilot study. 2. To revise the protocol design of version 1.1 to incorporate the following changes: - Monthly visits for at least six (6) months for each subject followed by synchronized quarterly visits. - Modify and clarify inclusion and exclusion criteria. - Eliminate the GSRS from the study. - Utilize the self-report PedsQL QoL instrument instead of the parent proxy report. - Addition of safety and PK/PD data reviews, during or prior to, each study visit to allow for greater subject oversight for dose adjustments. 3. To update the bioanalytical laboratory information. - Provide specific information concerning where samples are to be sent in the US and Europe. - To update the plasma cysteamine and WBC processing instructions. 4. To update the list of abbreviations. 5. To clarify statements and instructions concerning protocol specified procedures. 6. To update administrative information. 7. To update the reference list. 8. To correct typographical and formatting errors.
20 May 2010	The objectives for Amendment 2 were: 1. To update the protocol to synchronize with changes incorporated in the precursor pivotal study RP103-03 Amendment 2, which included: - Allowance for subjects that are receiving Cystagon® at the conclusion of study RP103-03 to roll over into this study without the need for a Day 1 study visit. - Clarification that WBC cystine values <1 nmol ½ cystine/mg protein represented a meaningful reduction in WBC cystine levels. - Changing the time for RP103 trough sampling (i.e., 1 hour changed to 0.5 hours post RP103 dose administration). 2. To update and correct the inclusion and exclusion criteria. 3. To update the list of abbreviations. 4. To correct and update the total amount of blood collected over the study duration. 5. To correct typographical and formatting errors.
09 August 2010	The objectives for Amendment 3 were: 1. To revise the protocol to restrict enrollment for subjects that did not participate in the precursor study (RP103-03) to occur only after all subjects enrolled in Study RP103-03 have completed their participation in that study and the data analyzed. 2. To add stopping criteria consistent with Study no. RP103-03. 3. To correct the list of safety endpoints. 4. To update the list of abbreviations. 5. To update the responsible party for medical monitoring. 6. To clarify inclusion criteria language. 7. To make language consistency changes between protocols RP103-03 and RP103-04. 8. To correct typographical and formatting errors.

02 May 2011

The objectives for Amendment 4 were:

- 1. To change the regular daily dose of Cystagon® to 80% (instead of 70% previously)and a dose adjustment to 100% of their regular daily dose of Cystagon® (instead of 20to 25% of the dose of RP103).
- 2. To clarify instructions for subjects not entering the RP103-04 trial from Study RP103-03.
- 3. To describe a food effect on cysteamine absorption.
- 4. To include total protein test method comparison and describe the correction factor.
- 5. To include the updated prefigured guideline for the dosage of the subjects.
- 6. To update one table and include two new figures.
- 7. To update the List of Abbreviations.
- 8. To clarify statements and instructions.
- 9. To correct formatting errors.

27 September 2011

The objectives for Amendment 5 were:

- 1. To include published results of recently completed clinical trials:
- Bioequivalence studies RP103-02 and RP103-05, in healthy volunteers.
- Pivotal Phase 3 study RP103-03, in cystinosis subjects.
- 2. To provide final data and guidance in the following areas, which in the previous protocol amendment were based on interim results of the recently completed clinical trials:
- Starting total daily dose of RP103 changed to 70% of the stable baseline
- Cystagon® dose and subsequent dose adjustment increased to 100% of that stable Cystagon® dose.
- Food effect on cysteamine absorption has been detailed.
- RP103 dosing recommendations with respect to food intake and timing have been updated.
- 3. To expand enrollment to subjects unable or unwilling to take intact capsules, the following areas were revised:
- Total number of expected study participants has been increased.
- Inclusion and Exclusion criteria were updated to permit enrollment of subjects who do not receive their cysteamine dose as intact capsules, and those who receive it via gastric tube.
- 4. To change the Schedule of Events for subjects not entering the trial from Study RP103-03, adding a Dose Confirmation Period which includes study visits on Day 4 and Day 5.
- 5. To change all references to "nephropathic cystinosis" to simply "cystinosis"
- 6. To clarify statements and instructions.
- 7. To correct formatting and typographical errors.

26 September 2012

The objectives for Amendment 6 were:

- 1. To insert a minimum required age for study participants;
- 2. To increase maximum study duration from 24 to 36 months;
- 3. To revise investigational product description to reflect currently manufactured lots;
- 4. To revise maximum blood volume to be collected from subjects, reflecting the change in maximum study duration to 36 months and to include the optional PK substudy;
- 5. To insert an optional PK substudy visit for all subjects 6 years old and younger;
- 6. To insert a newly published reference (previously reported as "submitted for publication");
- 7. To update the bioanalytical laboratory contact details to reflect that all PK-PD samples were to be shipped to the US location (because the EU laboratory had closed);
- 8. To clarify statements and instructions, specifically pertaining to RP103 dosing;
- 9. To correct formatting and typographical errors.

04 November 2013	The objectives for Amendment 7 were: 1. To insert changes to Sponsor company name and contact details; 2. To insert a change in Institution and contact details for the Lead Investigator; 3. To increase the maximum study duration to 48 months; 4. To provide updated information regarding the acceptable storage temperature of the investigational product, RP103; 5. To revise maximum blood volume to be collected from subjects, reflecting the change in maximum study duration to 48 months; 6. To remove references to the specific central bioanalytical laboratory "BASi" in the event that a different laboratory would be utilized in future (in which case the site laboratory instructions would be updated); 7. To clarify statements and instructions, specifically pertaining to RP103 dosing; 8. To correct minor formatting and typographical errors.
25 November 2014	The objectives for Amendment 8 were: 1. To document a change in Sponsor Medical Officer; 2. To document a change in the Sponsor medical representative responsible for receipt of serious adverse event (SAE) reports; 3. To insert changes to Sponsor physical address; 4. To increase the maximum study duration to 60 months; 5. To insert the EudraCT number associated with the trial; 6. To revise maximum blood volume to be collected from subjects, reflecting the change in maximum study duration to 60 months; 7. To correct minor formatting and typographical errors.
18 November 2015	The purpose of RP103-04 Protocol Amendment 9 were as follows: - To update Raptor Chief Medical Officer; - To clarify study duration; - To update anticipated blood collection volumes for the entire study based on clarification to study duration; - To clarify Adverse Event reporting; - Update reference to Storage Conditions and Identity of Investigational Product (RP103); - To correct formatting and typographical errors.

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported