



Clinical trial results:

A Phase 3b Multicenter, Open-label Abiraterone Acetate Long-term Safety Study

Summary

EudraCT number	2011-005243-28
Trial protocol	BE HU ES AT GB DE SE
Global end of trial date	22 April 2021

Results information

Result version number	v1 (current)
This version publication date	05 May 2022
First version publication date	05 May 2022

Trial information

Trial identification

Sponsor protocol code	212082PCR3010
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Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT01517802
WHO universal trial number (UTN)	-

Notes:

Sponsors

Sponsor organisation name	Janssen Research & Development, LLC
Sponsor organisation address	920 Route 202, Raritan, United States, 08869
Public contact	Clinical Registry group, Janssen Research & Development, LLC, ClinicalTrialsEU@its.jnj.com
Scientific contact	Clinical Registry group, Janssen Research & Development, LLC, ClinicalTrialsEU@its.jnj.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?	No

Notes:

Results analysis stage

Analysis stage	Final
Date of interim/final analysis	22 April 2021
Is this the analysis of the primary completion data?	No
Global end of trial reached?	Yes
Global end of trial date	22 April 2021
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

The main objective of the trial was to provide abiraterone acetate and collect long-term follow-up safety data from subjects who completed abiraterone acetate studies for a maximum duration of 9 years from the study protocol INT-1 issue date (9 April 2012).

Protection of trial subjects:

This study was conducted in accordance with the ethical principles that have their origin in the Declaration of Helsinki and that are consistent with Good Clinical Practice (GCP) and applicable regulatory requirements. Safety assessment included monitoring of serious adverse events.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	12 February 2013
Long term follow-up planned	Yes
Long term follow-up rationale	Safety
Long term follow-up duration	9 Years
Independent data monitoring committee (IDMC) involvement?	No

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	Australia: 4
Country: Number of subjects enrolled	Belgium: 2
Country: Number of subjects enrolled	Germany: 1
Country: Number of subjects enrolled	Spain: 1
Country: Number of subjects enrolled	United Kingdom: 6
Country: Number of subjects enrolled	United States: 16
Country: Number of subjects enrolled	Sweden: 1
Worldwide total number of subjects	31
EEA total number of subjects	5

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)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	2
From 65 to 84 years	12
85 years and over	17

Subject disposition

Recruitment

Recruitment details: -

Pre-assignment

Screening details:

Out of 32 enrolled subjects, 1 subject did not receive any dose of drug and hence was excluded from all the analyses.

Period 1

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

Arms

Arm title	Abiraterone Acetate + Prednisone/Prednisolone
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Arm description:

Subjects who received at least 3 months of abiraterone acetate treatment in previously completed abiraterone acetate studies (COU-AA-001 [NCT00473512], COU-AA-002 [NCT00473746], COU-AA-006 [NCT00910754], COU-AA-206 [NCT01400555], COU-AA-301 [NCT00638690], COU-AA-302 [NCT00887198], COU-AA-BMA [NCT00544440]) continued to receive abiraterone acetate 1000 milligrams (mg) (four 250 mg tablets) along with low dose corticosteroid (prednisone/prednisolone) 5 mg tablet orally twice daily starting Day 1 Cycle 1 (each cycle was of 28 days) according to dosing regimen established in the previously completed study until the investigator determined that the subject no longer received benefit or the sponsor terminated the study or the subject had continued the treatment in this study and were followed-up for safety for up to 9 years.

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

Dosage and administration details:

Prednisone/Prednisolone 5 mg tablet was administered orally twice daily.

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

Dosage and administration details:

Abiraterone Acetate 1000 mg (four 250 mg tablets) was administered orally once daily.

Number of subjects in period 1	Abiraterone Acetate + Prednisone/Prednisolone
Started	31
Completed	30
Not completed	1
Adverse event, serious fatal	1

Baseline characteristics

Reporting groups

Reporting group title	Abiraterone Acetate + Prednisone/Prednisolone
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Reporting group description:

Subjects who received at least 3 months of abiraterone acetate treatment in previously completed abiraterone acetate studies (COU-AA-001 [NCT00473512], COU-AA-002 [NCT00473746], COU-AA-006 [NCT00910754], COU-AA-206 [NCT01400555], COU-AA-301 [NCT00638690], COU-AA-302 [NCT00887198], COU-AA-BMA [NCT00544440]) continued to receive abiraterone acetate 1000 milligrams (mg) (four 250 mg tablets) along with low dose corticosteroid (prednisone/prednisolone) 5 mg tablet orally twice daily starting Day 1 Cycle 1 (each cycle was of 28 days) according to dosing regimen established in the previously completed study until the investigator determined that the subject no longer received benefit or the sponsor terminated the study or the subject had continued the treatment in this study and were followed-up for safety for up to 9 years.

Reporting group values	Abiraterone Acetate + Prednisone/Prednisolone	Total	
Number of subjects	31	31	
Age Categorical Units: Subjects			
In utero	0	0	
Preterm newborn infants (gestational age < 37 wks)	0	0	
Newborns (0-27 days)	0	0	
Infants and toddlers (28 days-23 months)	0	0	
Children (2-11 years)	0	0	
Adolescents (12-17 years)	0	0	
Adults (18-64 years)	2	2	
From 65-84 years	12	12	
85 years and over	17	17	
Gender Categorical Units: Subjects			
Female	0	0	
Male	31	31	

End points

End points reporting groups

Reporting group title	Abiraterone Acetate + Prednisone/Prednisolone
Reporting group description:	
Subjects who received at least 3 months of abiraterone acetate treatment in previously completed abiraterone acetate studies (COU-AA-001 [NCT00473512], COU-AA-002 [NCT00473746], COU-AA-006 [NCT00910754], COU-AA-206 [NCT01400555], COU-AA-301 [NCT00638690], COU-AA-302 [NCT00887198], COU-AA-BMA [NCT00544440]) continued to receive abiraterone acetate 1000 milligrams (mg) (four 250 mg tablets) along with low dose corticosteroid (prednisone/prednisolone) 5 mg tablet orally twice daily starting Day 1 Cycle 1 (each cycle was of 28 days) according to dosing regimen established in the previously completed study until the investigator determined that the subject no longer received benefit or the sponsor terminated the study or the subject had continued the treatment in this study and were followed-up for safety for up to 9 years.	

Primary: Number of Subjects with Serious Adverse Events (SAEs)

End point title	Number of Subjects with Serious Adverse Events (SAEs) ^[1]
End point description:	
An SAE is defined as any untoward medical occurrence that results in death, is life-threatening, requires inpatient hospitalization or prolongation of existing hospitalization, results in persistent or significant disability/incapacity, leads to a congenital anomaly/birth defect in the offspring of a subject, or is an important medical event. Safety analysis set included subjects that received at least 1 dose of study drug.	
End point type	Primary
End point timeframe:	
Up to 9 years	

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 Inferential statistical analysis was planned for the Primary Endpoint.

End point values	Abiraterone Acetate + Prednisone/Prednisolone			
Subject group type	Reporting group			
Number of subjects analysed	31			
Units: subjects	16			

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information^[1]

Timeframe for reporting adverse events:

up to 9 years

Assessment type	Non-systematic
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Dictionary used

Dictionary name	MedDRA
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Dictionary version	23.0
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Reporting groups

Reporting group title	Abiraterone Acetate + Prednisone/Prednisolone
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Reporting group description:

Subjects who received at least 3 months of abiraterone acetate treatment in previously completed abiraterone acetate studies (COU-AA-001 [NCT00473512], COU-AA-002 [NCT00473746], COU-AA-006 [NCT00910754], COU-AA-206 [NCT01400555], COU-AA-301 [NCT00638690], COU-AA-302 [NCT00887198], COU-AA-BMA [NCT00544440]) continued to receive abiraterone acetate 1000 milligrams (mg) (four 250 mg tablets) tablet along with low dose corticosteroid (prednisone/prednisolone) 5 mg tablet orally twice daily starting Day 1 Cycle 1 (each cycle was of 28 days) according to dosing regimen established in the previously completed study until the investigator determined that the subject no longer received benefit or the sponsor terminated the study or the subject had continued the treatment in this study and were followed-up for safety for up to 9 years.

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: No other adverse events were collected and analyzed.

Serious adverse events	Abiraterone Acetate + Prednisone/Prednisolone		
Total subjects affected by serious adverse events			
subjects affected / exposed	16 / 31 (51.61%)		
number of deaths (all causes)	1		
number of deaths resulting from adverse events			
Vascular disorders			
Aortic thrombosis			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Hypertension			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Surgical and medical procedures			
Aortic valve replacement			

subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
General disorders and administration site conditions			
Fatigue			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Respiratory, thoracic and mediastinal disorders			
Dyspnoea			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Pulmonary embolism			
subjects affected / exposed	3 / 31 (9.68%)		
occurrences causally related to treatment / all	0 / 3		
deaths causally related to treatment / all	0 / 0		
Investigations			
Weight decreased			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Injury, poisoning and procedural complications			
Fall			
subjects affected / exposed	2 / 31 (6.45%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0 / 0		
Skin Laceration			
subjects affected / exposed	2 / 31 (6.45%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0 / 0		
Upper Limb Fracture			

subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Cardiac disorders			
Cardiac failure			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Cardiac Failure Congestive			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Myocardial Infarction			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Nervous system disorders			
Cerebrovascular accident			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Encephalopathy			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Spinal cord compression			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Syncope			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Gastrointestinal disorders			

Vomiting			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Oesophagitis			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Nausea			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Diarrhoea			
subjects affected / exposed	2 / 31 (6.45%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0 / 0		
Renal and urinary disorders			
Urinary retention			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Acute Kidney Injury			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Musculoskeletal and connective tissue disorders			
Musculoskeletal Pain			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Infections and infestations			
Lower respiratory tract infection			

subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Urinary tract infection			
subjects affected / exposed	1 / 31 (3.23%)		
occurrences causally related to treatment / all	1 / 1		
deaths causally related to treatment / all	0 / 0		
Metabolism and nutrition disorders			
Dehydration			
subjects affected / exposed	1 / 31 (3.23%)		
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	Abiraterone Acetate + Prednisone/Prednisolone		
Total subjects affected by non-serious adverse events			
subjects affected / exposed	0 / 31 (0.00%)		

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
09 April 2012	This amendment was created to incorporate the following changes: specified that this was a long-term safety follow-up study; updated follow-up for safety to a maximum of 3 years from the protocol issue date of 9 April 2012; added statement that consideration was given to extend the study duration following review of the safety data at 3 years.
11 March 2015	This amendment was created to incorporate the following changes: Updated the follow-up for safety to a maximum duration of 6 years from the protocol INT-1 issue date (9-April 2012); text updated to include current cytochrome (CYP)3A4 drug-drug interaction information.

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

Limitations of the trial such as small numbers of subjects analysed or technical problems leading to unreliable data.

Site visits not conducted for prior studies. No CRF/clinical database generated. Most subjects lost follow-up due to disease. Data not collected per plan, noted per source notes, thus into CIOMS. Difficult to generalize results for small population.

Notes: