Clinical trial results:
Phase II multicenter, openlabel, single arm clinical Study of Pomalidomide and dexamethasonE in RelapSed myeloma Plus rEsponse adapted Cyclophosphamide as a Tailored InnoVativE strategy

Summary

EudraCT number	2013-003678-29
Trial protocol	DE
Global end of trial date	17 August 2017

Results information

Result version number	v1 (current)
This version publication date	17 October 2020
First version publication date	17 October 2020
Summary attachment (see zip file)	Adverse Events (2018-07-19_PER01_Appendix Final Report.pdf)

Trial information

Trial identification

Sponsor protocol code	PERSPECTIVE

Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT02046915
WHO universal trial number (UTN)	-

Notes:

Sponsors

Sponsor organisation name	Universitätsklinikum Tübingen
Sponsor organisation address	Geissweg , Tuebinegn, Germany,
Public contact	Study Office, Universitätsklinikum Tübingen, birtta.besemer@med.uni-tuebingen.de
Scientific contact	Study Office, Universitätsklinikum Tübingen, britta.besemer@med.uni-tuebingen.de

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	07 June 2018
Is this the analysis of the primary completion data?	No

Global end of trial reached?	Yes
Global end of trial date	17 August 2017
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

To investigate the best objective response

Protection of trial subjects:

The study was conducted in accordance with the Declaration of Helsinki and the ICH Guidelines in Good Clinical Practice. The study was not started before the competent ethics committee had given a favorable opinion. Written informed consent was obtained from all patients and the study was only conducted as approved by the Ethics committee and the competent authority. Amendments were only implemented after approval

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	18 June 2014
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	Germany: 60
Worldwide total number of subjects	60
EEA total number of subjects	60

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)	17
From 65 to 84 years	43

85 years and over	0

Subject disposition

Recruitment

Recruitment details:

Patients were recruited in 8 German centers.
Date of first patient enrollment: 18.06.2014
Date Last Patient Last Visit defined as 2 years after last subject enrolment:
17.08.2017

Pre-assignment

Screening details:

Adult male and female patients with RRMM and fulfilling the inclusion and exclusion criteria were enrolled into the study.
Trial population consisted of both genders. Gender distribution in the trial is supposed to reflect the distribution in the real patient's population (approx. 60% male and 40% female patients)

Period 1

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

Arms

Arm title	Pomalidomide

Arm description:

Pomalidomide was administered orally at the starting dose of 4 mg/day on days 1-21 of a 28 day cycle. In case of suboptimal response (DS, MR), from Cycle 4 Day1 or of first evidence of progressive disease at cycle 2, 3, 4 the subject received 500mg/m2 at day1 and day15 Treatment continued until disease progression or unacceptable toxicity Cyclophoshamide was administrated for a maximum of 12 cycle

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

Dosage and administration details:

Oral Pomalidomide at the starting dose of 4 mg on Days 1–21 of a 28-day cycle

Number of subjects in period 1[1]	Pomalidomide
Started	59
Completed	59

Notes:

[1] - The number of subjects reported to be in the baseline period are not the same as the worldwide number enrolled in the trial. It is expected that these numbers will be the same.
Justification: The trial has recruited 60 patients. The intention-to-treat (ITT) population (59 patients) is defined according to the intention-to-treat principle and consists of all patients included in the study with written informed consent, excluding patients with violation of major eligibility criteria. As per principle investigator decision, included patients without 'at least two prior

anti- myeloma regimen and progression under the last prior treatment' (inclusion criterion 5) are excluded from IT

Baseline characteristics

Reporting groups

Reporting group title	Pomalidomide Teatment

Reporting group description:

Patients recieved:
Oral Pomalidomide at the starting dose of 4 mg on Days 1–21 of a 28-day cycle;
In case of suboptimal response (SD, MR) from Cycle 4 Day 1 (C4D1) or of first evidence of progressive disease at C2, C3 or C4, the subject received:
Cyclophosphamide: 500 mg/m² D1, D15
Treatment continued until disease progression or unacceptable toxicity (whichever occurs first).
Cyclophosphamide was administered for a maximum of 12 cycles.

Reporting group values	Pomalidomide Teatment	Total	
Number of subjects	59	59	
Age categorical Units: Subjects			
Age 18-99	59	59	
Gender categorical Units: Subjects			
Female	32	32	
Male	27	27	
ECOG PS Units: Subjects			
ECOG 0	23	23	
ECOG 1	27	27	
ECOG 2	6	6	
ECOG missing	3	3	
ISS Stage Units: Subjects			
ISS Stage I	18	18	
ISS Stage II	17	17	
ISS Stage III	19	19	
ISS not determined	5	5	

Subject analysis sets

Subject analysis set title	Baseline
Subject analysis set type	Full analysis

Subject analysis set description:

Values at baseline

Reporting group values	Baseline		
Number of subjects	59		
Age categorical Units: Subjects			
Age 18-99	59		

Gender categorical Units: Subjects			
Female Male			
ECOG PS Units: Subjects			
ECOG 0 ECOG 1 ECOG 2 ECOG missing			
ISS Stage Units: Subjects			
ISS Stage I ISS Stage II ISS Stage III ISS not determined			

End points

End points reporting groups

Reporting group title	Pomalidomide

Reporting group description:

Pomalidomide was administered orally at the starting dose of 4 mg/day on days 1-21 of a 28 day cycle. In case of suboptimal response (DS, MR), from Cycle 4 Day1 or of first evidence of progressive disease at cycle 2, 3, 4 the subject received 500mg/m2 at day1 and day15 Treatment continued until disease progression or unacceptable toxicity Cyclophoshamide was administrated for a maximum of 12 cycle

Subject analysis set title	Baseline
Subject analysis set type	Full analysis

Subject analysis set description:

Values at baseline

Primary: ORR

End point title	ORR

End point description:

The primary endpoint is the objective response rate (ORR) during treatment period (maximum 2 years). The one-sided null hypothesis tested is H0 : ORR 30% against the alternative H1 : ORR > 30%. The null hypothesis will be rejected if 21 responder
Among 59 evaluable patients are 23 non responders. Therefore the null hypothesis of ORR ≤30 cannot be rejected

End point type	Primary

End point timeframe:

The primary endpoint is the objective response rate (ORR) during treatment period (maximum 2 years). The one-sided null hypothesis tested is H0 : ORR 30% against the alternative H1 : ORR > 30%. The null hypothesis will be rejected if 21 responder

End point values	Pomalidomide	Baseline		
Subject group type	Reporting group	Subject analysis set		
Number of subjects analysed	59	59		
Units: events				
number (not applicable)				
missing	2	0		
Progression Disease	5	59		
Stable Disease	13	0		
minimal response	16	0		
Partial Response	14	0		
Very Godd Partial Disease	7	0		
Complete Response	2	0		

Statistical analyses

Statistical analysis title	primary satistical analyis

Statistical analysis description:

The primary endpoint is the objective response rate (ORR) during treatment period (maximum 2 years). The one-sided null hypothesis tested is H0 : ORR 30% against the alternative H1 : ORR > 30%. The null
hypothesis will be rejected if 21 responders are among 53 evaluable patients.

Comparison groups	Pomalidomide v Baseline
Number of subjects included in analysis	118
Analysis specification	Pre-specified
Analysis type	other
Parameter estimate	rate existimate
Point estimate	0.3898
Confidence interval	
level	95 %
sides	1-sided
lower limit	0.2923

Adverse events

Adverse events information[1]

Timeframe for reporting adverse events:

all AEs that occur after the subject has received the first drug dose up to 30 days after the last dose or until the beginning of a new therapy, whichever occurs first will be documented in the CRF

Assessment type	Non-systematic

Dictionary used

Dictionary name	MedDRA
Dictionary version	21.0 PT

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

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: Table of Adverse Events will be attached

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
30 June 2015	Following the release of the Rote-Hand-Brief by Celgene in April 2015, the "Pomalidomide Pregancy Prevendtion plan for Subjects in clinical Trials" had been updated and the recommendation on contraception for female patients (female partner of patients) of childbearing potential and the frequency of the Pregnancy Test had been implemented.

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported

Online references

http://www.ncbi.nlm.nih.gov/pubmed/30962424