

Clinical trial results:

A Trial of Intra-pleuraL OK-432 Therapy in mesothelioma (TILT): A feasibility study using the 'trial within a cohort' methodology

Summary

EudraCT number	2016-004727-23	
Trial protocol	GB	
Global end of trial date	19 November 2019	
Results information		
Result version number	v1 (current)	
This version publication date	23 January 2021	
First version publication date	23 January 2021	

Trial information

Trial identification		
Sponsor protocol code	3850	
Additional study identifiers		
ISRCTN number	ISRCTN10432197	
ClinicalTrials.gov id (NCT number)	-	
WHO universal trial number (UTN)	-	
Notes:		

Sponsor organisation name	North Bristol NHS Trust
Sponsor organisation address	Southmead Hospital, Bristol, United Kingdom, BS10 5NB
Public contact	Research & Innovation, North Bristol NHS Trust, 0044 1174149329, researchsponsor@nbt.nhs.uk
Scientific contact	Research & Innovation, North Bristol NHS Trust, 0044 1174149329, researchsponsor@nbt.nhs.uk

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	25 February 2020	
Is this the analysis of the primary completion data?	No	
Global end of trial reached?	Yes	
Global end of trial date	19 November 2019	
Was the trial ended prematurely?	No	

Notes:

General information about the trial

Main objective of the trial:

The aim of this study is to answer the question "Is it possible (feasible) to undertake a trial within a cohort to investigate the effect of OK432, administered directly into the chest in people with mesothelioma, and is it acceptable to patients and relatives?"

This research will determine whether a full-scale version of the trial is possible. If it is, the results of this research will inform the design of the subsequent full-scale trial.

The long-term goal is to determine whether OK432 is an effective treatment for mesothelioma, and whether the trial within a cohort design is appropriate for mesothelioma trials.

Protection of trial subjects:

Known safety risks were minimised where possible by excluding high risk patients and using close patient monitoring to identify adverse events as soon as possible. The TwiC (Trial within a Cohort) design was discussed with the PPI group and seen as preferable to traditional randomised methods as patients would only be informed of the intervention once selected to receive it. The number of trial visits was also discussed with the PPI group to balance the need for clinical follow up with patient burden. To minimise potential distress to patients participating in the qualitative interviews a topic guide was developed in collaboration with the PPI group to ensure acceptability.

Background therapy: -

Evidence	for	comparator:	
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Actual start date of recruitment	30 January 2018
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	United Kingdom: 7
Worldwide total number of subjects	7
EEA total number of subjects	0

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	5
85 years and over	0

Subject disposition

Recruitment

Recruitment details:

Participants were enrolled between 30/01/2018 and 30/11/2019 and recruitment was based at three NHS sites in the UK.

Pre-assignment

Screening details:

There were 43 patients in the cohort during the recruitment period at the trial sites of which 7 met the eligibility criteria.

Period 1		
Period 1 title	Baseline	
Is this the baseline period?	Yes	
Allocation method	Not applicable	
Blinding used	Not blinded	
Arms		
Arm title	All participants	
Arm description:		
All participants		
Arm type	Baseline	
Investigational medicinal product name	OncoTice	
Investigational medicinal product code	BCG	
Other name	Bacillus Calmette-Guérin (BCG)	
Pharmaceutical forms	Powder and solvent for intravesical solution	
Routes of administration	Intrapleural use	

Dosage and administration details:

BCG original dose: $0.4-1.6 \times 10^7$ CFU instilled intra-pleurally via indwelling pleural catheter BCG dose reduced to $0.2-0.8 \times 10^7$ CFU after urgent safety measure passed

Investigational medicinal product name	OK432
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Powder for solution for injection/infusion
Routes of administration	Intrapleural use

Dosage and administration details:

Original dose 10 Klinishe Einheirt (KE) delivered intra-pleurally via indwelling pleural catheter Dose reduced to 5KE after urgent safety measure.

Number of subjects in period 1	All participants	
Started	7	
Completed	7	

Period 2 Period 2 title Overall trial Is this the baseline period? Allocation method Randomised - controlled Blinding used Not blinded

Blinding implementation details:

A key tenet of the TwiC design is that participants are only informed about the trial intervention once they have been selected to receive it, whilst controls are blinded to the existence of the trial.

Arms

Are arms mutually exclusive?	No
Arm title	IMP-BCG

Arm description:

BCG is a live attenuated, low-virulence strain of Mycobacterium bovis prepared from a culture of Bacillus Calmette-Guérin (OncoTice, Merck Sharp & Dohme Ltd, Netherlands).

Arm type	Experimental
Investigational medicinal product name	OncoTice
Investigational medicinal product code	BCG
Other name	Bacillus Calmette-Guérin (BCG)
Pharmaceutical forms	Powder and solvent for intravesical solution
Routes of administration	Intrapleural use

Dosage and administration details:

BCG original dose: 0.4-1.6 x 10⁷ CFU instilled intra-pleurally via indwelling pleural catheter

BCG dose reduced to 0.2-0.8 x 10[^] 7 CFU after urgent safety measure passed

Arm title	Control

Arm description:

Eligible patients from the longitudinal, observational cohort study. A key tenet of the TwiC design is that participants are only informed about the trial intervention once they have been selected to receive it, whilst controls are blinded to the existence of the trial.

Arm type	No intervention		
No investigational medicinal product assigned in this arm			
Arm title	IMP-OK432		

Arm description:

OK432 consists of heat-treated, penicillin-killed, freeze-dried Streptococcus pyogenes group A2 (Picibanil, Chugai Pharmaceutical Ltd, Japan).

Arm type	Experimental
Investigational medicinal product name	OK432
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Powder for solution for injection/infusion
Routes of administration	Intrapleural use

Dosage and administration details:

Original dose 10 Klinishe Einheirt (KE) delivered intra-pleurally via indwelling pleural catheter Dose reduced to 5KE after urgent safety measure.

Arm title	All participants	
Arm description: -		
Arm type All participants		
No investigational medicinal product assigned in this arm		

Arm title	,03 ERWK	
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3KDUPDFHXWLFDO IRUPV	3RZGHU DQG VROYHQW IRU LQWUDYHVLFDO	VROXW
5RXWHV RI DGPLQLVWUDWL	ROWUDSOHXUDO XVH	
'RVDJH DQG DGPLQLVWUDW	/LRQ GHWDLOV	

% & * RULJLQDO GRVH [A &)8 LQVWLOOHG LQWUD SOHXUDOO\ YLD LQGZ % & * GRVH UHGXFHG WR [A &)8 DIWHU XUJHQW VDIHW\ PHDVXUH SDVVH

,QYHVWLJDWLRQDO PHGLFL	QDO SURGXFW QDPH	
,QYHVWLJDWLRQDO PHGLFL	QDO SURGXFW FRGH	
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3KDUPDFHXWLFDO IRUPV	3RZGHU IRU VROXWLRQ IRU LQMHFWLRQ LQ	NIXVLRQ
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Number of subjects in period 2	,03 %&*	& R Q W U R C	,032.
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&RPSOHWHG			
1RW FRPSOHWHG			
GHFOLQHG WR SDUWLFLS	DWH		

Number of subjects in period 2	\$00	SDUWLI	FLSD,QOWVVERWK
6 W D U W H G			
&RPSOHWHG			
1RW FRPSOHWHG			
GHFOLQHG WR SDUWLFLS	DWH		

Baseline characteristics

Reporting groups

Reporting group description: -

Reporting group values	Baseline	Total	
Number of subjects	7	7	
Age categorical			
Units: Subjects			
In utero		0	
Preterm newborn infants (gestational age < 37 wks)		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)		0	
From 65-84 years		0	
85 years and over		0	
Age continuous			
Units: years			
median	73		
full range (min-max)	60 to 83	-	
Gender categorical			
Units: Subjects			
Female	1	1	
Male	6	6	
Asbestos exposure			
Units: Subjects			
None recalled	1	1	
Transient	1	1	
Light/passive	1	1	
Heavy/active	4	4	
Duration of symptoms			
Units: Subjects			
< 1 month	3	3	
1-3 months	1	1	
> 3 months	2	2	
Not recorded	1	1	
Method of diagnosis			
Units: Subjects			
CT-guided biopsy	1	1	
Medical thoracoscopy	5	5	
VATS	1	1	
Laterality			
Units: Subjects			
Left	2	2	

Right	5	5	
Tumour histology			
Units: Subjects			
Epithelioid	7	7	
Brims prognostic score			
Units: Subjects			
1 (best prognosis)	1	1	
02	5	5	
03	0	0	
4 (worst prognosis)	1	1	

End points

Reporting group title	All participants
Reporting group description:	
All participants	
Reporting group title	IMP-BCG
Reporting group description:	
	irulence strain of Mycobacterium bovis prepared from a culture of Bacillus rck Sharp & Dohme Ltd, Netherlands).
Reporting group title	Control
Reporting group description:	
	rudinal, observational cohort study. A key tenet of the TwiC design is that about the trial intervention once they have been selected to receive it, ne existence of the trial.
Reporting group title	IMP-0K432
Reporting group description:	
OK 432 consists of heat-treated (Picibanil, Chugai Pharmaceutic	, penicillin-killed, freeze-dried Streptococcus pyogenes group A2 cal Ltd, Japan).
Reporting group title	All participants
Reporting group description: -	
Reporting group title	IMP- both
Reporting group description:	
Patients who received either OF	(432 or BCG

Primary: Recruitment	rate	
End point title	Recruitment rate ^[1]	
End point description:		
End point type	Primary	
End point timeframe:		
Randomisation		

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 analyses planned - a feasibility trial

End point values	All participants		
Subject group type	Reporting group		
Number of subjects analysed	7		
Units: Participants			
Target	12		
Randomised	7		

Statistical analyses

Primary: Attrition Rate

End point title Attrition Rate^[2]

End point description:

Attrition was defined as participants who declined to receive an IMP following randomisation or who declined or failed to complete follow up in the cohort if allocated to control.

End point type Primary

End point timeframe:

Notes:

Final follow up

[2] - 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 analyses planned - a feasibility trial

No statistical analyses for this end point

End point values	All participants		
Subject group type	Reporting group		
Number of subjects analysed	7		
Units: Participants			
Randomised	7		
Completed	5		

Statistical analyses

No statistical analyses for this end point

Secondary: Number of control participants who were unblinded				
End point title	Number of control participants who were unblinded			
End point description:				
End point type	Secondary			
End point timeframe:				
Final follow up				

End point values	Control		
Subject group type	Reporting group		
Number of subjects analysed	3		
Units: Participants			
Number of control patients	3		
Number of control patients who were unblinded	3		

Statistical analyses

Secondary: Survival

End point title Survival

End point description:

End point type Secondary

Survival was calculated as date of diagnosis with MPM to date of death, as recorded on the death certificate. Surviving participants were censored on 02/06/2020 (7.5 months after final patient visit)

End point values	Control	IMP- both	
Subject group type	Reporting group	Reporting group	
Number of subjects analysed	3	4	
Units: months			
median (inter-quartile range (Q1-Q3))	29 (5.2 to 45.0)	18.1 (12.1 to 23.3)	

Statistical analyses

End point timeframe:

No statistical analyses for this end point

No statistical analyses for this end point

Secondary: Radiological tumour response rates End point title Radiological tumour response rates End point description: End point type Secondary End point timeframe: Baseline and final follow up (week 12)

End point values	All participants		
Subject group type	Reporting group		
Number of subjects analysed	7		
Units: Participants			
progressive disease	3		
stable disease	4		

Statistical analyses

Secondary: Pleural fluid drainage volumes			
End point title Pleural fluid drainage volumes			
End point description:			
End point type	Secondary		
End point timeframe:			
Intil final follow up at 12 weeks			

End point values	All participants		
Subject group type	Reporting group		
Number of subjects analysed	7		
Units: ml			
arithmetic mean (full range (min-max))	436.7 (0 to 1500)		

Statistical analyses

No statistical analyses for this end point

Secondary: Successful pleurodesis

End point title Successful pleurodesis

End point description:

End point type Secondary

End point timeframe:

Censored from cohort on 02/06/2020

End point values	All participants		
Subject group type	Reporting group		
Number of subjects analysed	7		
Units: Participants	6		

Statistical analyses

No statistical analyses for this end point

Secondary: Time to pleurodesis

End point title	Time to pleurodesis
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End point description:

End point type	Secondary
End point timeframe:	
Final follow up at 12 weeks	

End point values	All participants		
Subject group type	Reporting group		
Number of subjects analysed	6 ^[3]		
Units: days			
median (inter-quartile range (Q1-Q3))	42 (30 to 132)		

Notes:

[3] - 6 patients achieved pleurodesis

Statistical analyses

No statistical analyses for this end point

Secondary: Breathlessness		
End point title	Breathlessness	
End point description:		
End point type	Secondary	
End point type End point timeframe:	Secondary	

End point values	All participants		
Subject group type	Reporting group		
Number of subjects analysed	7		
Units: mm			
median (inter-quartile range (Q1-Q3))	18.3 (8.3 to 25)		

Statistical analyses

Secondary: Chest pain	
End point title	Chest pain
End point description:	
End point type	Secondary
End point timeframe:	
baseline and weeks 3, 6 and 12	

End point values	All participants		
Subject group type	Reporting group		
Number of subjects analysed	7		
Units: mm			
median (inter-quartile range (Q1-Q3))	4.7 (1.5 to 11.2)		

Statistical analyses

No statistical analyses for this end point

Secondary: Sweats End point title Sweats End point description: End point type Secondary End point timeframe: baseline and weeks 3, 6 and 12

End point values	All participants		
Subject group type	Reporting group		
Number of subjects analysed	7		
Units: mm			
median (inter-quartile range (Q1-Q3))	2.2 (0.3 to 7.9)		

Statistical analyses

Secondary: Quality of Life	
End point title	Quality of Life
End point description:	
End point type	Secondary
End point timeframe:	
baseline and weeks 3, 6 and 12	

End point values	All participants		
Subject group type	Reporting group		
Number of subjects analysed	7		
Units: mm			
median (inter-quartile range (Q1-Q3))	80 (76.9 to 81.7)		

Statistical analyses

Adverse events

Adverse events information

Timeframe for reporting adverse events:

Randomisation until datalock (returned to the cohort)	participants continued to be monitored for adverse events when they had
Assessment type	Systematic
Dictionary used	
Dictionary name	SNOMED CT
Dictionary version	1.36.4
Reporting groups	
Reporting group title	OK432
Reporting group description: -	
Reporting group title	IMP-BCG
Reporting group description: -	
Reporting group title	Control

Reporting group description: -

Serious adverse events	OK432	IMP-BCG	Control
Total subjects affected by serious adverse events			
subjects affected / exposed	1 / 1 (100.00%)	1 / 2 (50.00%)	1 / 2 (50.00%)
number of deaths (all causes)	0	0	0
number of deaths resulting from adverse events	0	0	0
General disorders and administration site conditions			
Systemic inflammatory response syndrome	Additional description: Fever, malaise and anorexia with raised inflammatory markers.		
subjects affected / exposed	1 / 1 (100.00%)	1 / 2 (50.00%)	0 / 2 (0.00%)
occurrences causally related to treatment / all	1 / 1	1 / 1	0/0
deaths causally related to treatment / all	0/0	0/0	0/0
Respiratory, thoracic and mediastinal disorders			
Pleural infection bacterial	Additional description: Infection of indwelling pleural catheter		
subjects affected / exposed	0 / 1 (0.00%)	0 / 2 (0.00%)	1 / 2 (50.00%)
occurrences causally related to treatment / all	0/0	0/0	0 / 1
deaths causally related to treatment / all	0/0	0/0	0/0

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

Non-serious adverse events	OK 432	IMP-BCG	Control
Total subjects affected by non-serious adverse events			
subjects affected / exposed	0 / 1 (0.00%)	1 / 2 (50.00%)	2 / 2 (100.00%)
General disorders and administration site conditions			
Systemic inflammatory response syndrome	Additional description: Fever, malaise and raised inflammatory markers		
subjects affected / exposed	0 / 1 (0.00%)	1 / 2 (50.00%)	0 / 2 (0.00%)
occurrences (all)	0	1	0
Respiratory, thoracic and mediastinal disorders			
Pleural infection bacterial	Additional description: Infected indwelling pleural catheter, treated as outpatient.		
subjects affected / exposed	0 / 1 (0.00%)	0 / 2 (0.00%)	1 / 2 (50.00%)
occurrences (all)	0	0	1
Skin and subcutaneous tissue disorders			
Pain	Additional description: Rib pain		
subjects affected / exposed	0 / 1 (0.00%)	0 / 2 (0.00%)	1 / 2 (50.00%)
occurrences (all)	0	0	1
Infections and infestations			
Viral upper respiratory tract infection			
subjects affected / exposed	0 / 1 (0.00%)	0 / 2 (0.00%)	1 / 2 (50.00%)
occurrences (all)	0	0	1

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
30 October 2017	Addition of BCG arm
25 July 2018	Updated BCG SmPC Change to CTA to use Pharmaceutical Solutions as QP
21 January 2019	Urgent Safety Measure to allow half dose IMP

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported