Clinical trial results:
Post-Marketing Study to Evaluate the Efficacy and Safety of PANZYGA in Pediatric Patients with Chronic Immune Thrombocytopenia (ITP)

Summary

EudraCT number	2019-004063-49
Trial protocol	Outside EU/EEA
Global end of trial date	06 December 2023

Results information

Result version number	v1 (current)
This version publication date	17 August 2024
First version publication date	17 August 2024

Trial information

Trial identification

Sponsor protocol code	NGAM-10

Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT03866798
WHO universal trial number (UTN)	-
Other trial identifiers	IND : 14121, BLA: 125587

Notes:

Sponsors

Sponsor organisation name	Octapharma USA, Inc
Sponsor organisation address	117 West Century Road Paramus, New Jersey, United States, 07652
Public contact	Octapharma Pharmazeutika Produktionsges.m.b.H, Clinical Research & Development, 0043 (1) 610- 320, ClinicalRDVienna@groups.octapharma.com
Scientific contact	Octapharma Pharmazeutika Produktionsges.m.b.H, Clinical Research & Development, 0043 (1) 610- 320, ClinicalRDVienna@groups.octapharma.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	17 May 2024
Is this the analysis of the primary completion data?	No

Global end of trial reached?	Yes
Global end of trial date	06 December 2023
Was the trial ended prematurely?	Yes

Notes:

General information about the trial

Main objective of the trial:

The primary objective is to evaluate the efficacy of PANZYGA in increasing the platelet count in pediatric patients with chronic ITP.

Protection of trial subjects:

This trial was conducted in accordance to the principles of ICH- GCP, ensuring that the rights, safety and well-being of patients are protected and in consistency with the Declaration of Helsinki, national regulatory requirements and FDA Code of Federal Regulation. Inclusion and exclusion criteria were carefully defined in order to protect subjects from contraindications, interactions with other medication and risk factors associated with the investigational medicinal product. Throughout the study safety was assessed, such as monitoring of AEs and SAEs, safety lab results, prior and concomitant medication and vital signs.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	21 January 2020
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	United States: 6
Worldwide total number of subjects	6
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)	6
Adolescents (12-17 years)	0
Adults (18-64 years)	0
From 65 to 84 years	0

85 years and over	0

Subject disposition

Recruitment

Recruitment details:

8 sites were initiated in the USA of which 5 sites enrolled patients in the study.

Pre-assignment

Screening details:

6 Patients with documented diagnosis of Chronic Immune Thrombocytopenia (ITP) were screened between 21-Jan-2020 and 19-Sep-2023 according to predefined in- and exclusion criteria.

Period 1

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

Arms

Arm title	Panzyga

Arm description:

Each patient was administered panzyga by intravenous (IV) infusion at a dose of 1 g/kg body weight panzyga on Day 1 and optionally another dose of 1 g/kg panzyga on Day 3; body-weight dependent doses were based on each patient’s weight collected at Baseline.

Arm type	Experimental
Investigational medicinal product name	Panzyga
Investigational medicinal product code	
Other name	Immune Globulin Intravenous Human 10%
Pharmaceutical forms	Solution for infusion
Routes of administration	Intravenous use

Dosage and administration details:

Each patient was administered panzyga by intravenous (IV) infusion at a dose of 1 g/kg body weight panzyga on Day 1 and optionally another dose of 1 g/kg panzyga on Day 3; doses were based on each patient’s weight collected at Baseline. Total panzyga doses were 1 g/kg for patients receiving only 1 dose on Day 1 and 2 g/kg for those receiving the optional Day 3 dose. Prior to the Day 3 infusion, Investigators assessed each patient’s pre-infusion platelet count, hematocrit, and hemoglobin, and if the platelet count was >50 × 10^9/L, the Day 3 infusion was not administered; If the platelet count was still ≤50 × 10^9/L, the Day 3 infusion was administered. If any parameters indicated a clinically relevant change such that, in the Investigator’s opinion, it was not safe to administer the second infusion, the patient was to be withdrawn from study treatment and then followed for safety through Day 32.

Number of subjects in period 1	Panzyga
Started	6
Completed	6

Baseline characteristics

Reporting groups	
Reporting group title	Overall Period

Reporting group description: -

Reporting group values	Overall Period	Total	
Number of subjects	6	6	
Age categorical Units: Subjects			
Children (2-11 years)	6	6	
Gender categorical Units: Subjects			
Female	2	2	
Male	4	4	

End points

End points reporting groups

Reporting group title	Panzyga

Reporting group description:

Each patient was administered panzyga by intravenous (IV) infusion at a dose of 1 g/kg body weight panzyga on Day 1 and optionally another dose of 1 g/kg panzyga on Day 3; body-weight dependent doses were based on each patient's weight collected at Baseline.

Primary: Platelet Count Increase

End point title	Platelet Count Increase[1]

End point description:

The primary efficacy parameter was a clinical response defined as an increase in platelet count at least once to ≥50 × 10^9/L within 7 days after the first infusion, i.e., by Day 8.

End point type	Primary

End point timeframe:

within 7 days after the first infusion, i.e., by Day 8.

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: Due to the low number of enrolled patients, the analyses included only data listings, a small number of summary tables, and a figure. No statistical analysis performed.

End point values	Panzyga			
Subject group type	Reporting group			
Number of subjects analysed	6			
Units: Responder				
Yes	4			
Yes (%)	67			
No	2			
No (%)	33			

Statistical analyses

No statistical analyses for this end point

Secondary: Time to Platelet Response (Platelet count ≥ 50 x 10^9/L)

End point title	Time to Platelet Response (Platelet count ≥ 50 x 10^9/L)

End point description:

Response was defined as an increase in platelet count at least once to ≥50 × 10^9/L within 7 days after the first infusion, i.e., by Day 8.

End point type	Secondary

End point timeframe:

Days from first infusion to the first time reaching a platelet count of ≥50 × 10^9/L.

End point values	Panzyga			
Subject group type	Reporting group			
Number of subjects analysed	6			
Units: count of subjects				
2 days	3			
3 days	1			
non-responders	2			

Statistical analyses

No statistical analyses for this end point

Secondary: Duration of Platelet Response (Platelet Count Maintained ≥ 50 x 10^9/L)

End point title	Duration of Platelet Response (Platelet Count Maintained ≥ 50 x 10^9/L)

End point description:

Response was defined as an increase in platelet count at least once to ≥50 × 10^9/L within 7 days after the first infusion, i.e., by Day 8.

End point type	Secondary

End point timeframe:

number of days the platelet count remained above ≥50 × 10^9/L.

End point values	Panzyga			
Subject group type	Reporting group			
Number of subjects analysed	6			
Units: count of subjects				
6 days	1			
7 days	1			
33 days	1			
34 days	1			
non-responders	2			

Statistical analyses

No statistical analyses for this end point

Secondary: Maximum Platelet Count

End point title	Maximum Platelet Count

End point description:

maximum platelet count during the study.

End point type	Secondary

End point timeframe:

the maximum platelet count during the study up to 32 days

End point values	Panzyga			
Subject group type	Reporting group			
Number of subjects analysed	6			
Units: count of subjects				
99 (10^9/L)	1			
11 (10^9/L)	1			
516 (10^9/L)	1			
386 (10^9/L)	1			
204 (10^9/L)	1			
30 (10^9/L)	1			

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information	
Timeframe for reporting adverse events: AEs were collected from the start of the first infusion for the whole duration of the study	
Assessment type	Systematic
Dictionary used	
Dictionary name	MedDRA
Dictionary version	26.1
Reporting groups	
Reporting group title	Panzyga
Reporting group description: Each patient was administered panzyga by intravenous (IV) infusion at a dose of 1 g/kg body weight panzyga on Day 1 and optionally another dose of 1 g/kg panzyga on Day 3; body-weight dependent doses were based on each patient's weight collected at Baseline.	

Serious adverse events	Panzyga		
Total subjects affected by serious adverse events			
subjects affected / exposed	0 / 6 (0.00%)		
number of deaths (all causes)	0		
number of deaths resulting from adverse events	0		

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

Non-serious adverse events	Panzyga		
Total subjects affected by non-serious adverse events			
subjects affected / exposed	4 / 6 (66.67%)		
Nervous system disorders			
Headache			
subjects affected / exposed	2 / 6 (33.33%)		
occurrences (all)	2		
Blood and lymphatic system disorders			
Neutropenia			
subjects affected / exposed	1 / 6 (16.67%)		
occurrences (all)	1		
Gastrointestinal disorders			
Nausea			
subjects affected / exposed	2 / 6 (33.33%)		
occurrences (all)	2		

Vomiting subjects affected / exposed occurrences (all) Mouth haemorrhage subjects affected / exposed occurrences (all) Dental caries subjects affected / exposed occurrences (all)	2 / 6 (33.33%) 2 1 / 6 (16.67%) 2 1 / 6 (16.67%) 1		
Respiratory, thoracic and mediastinal disorders Epistaxis subjects affected / exposed occurrences (all) Oropharyngeal pain subjects affected / exposed occurrences (all) Rhinorrhoea subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1 1 / 6 (16.67%) 1 1 / 6 (16.67%) 1		
Musculoskeletal and connective tissue disorders Myalgia subjects affected / exposed occurrences (all)	1 / 6 (16.67%) 1		

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
21 May 2019	Amendment 1: Comments provided to Sponsor by the FDA review were implemented : - A plan for Sponsor expedited safety reporting to FDA was added, along with additional Investigator SAE reporting requirements, as specified in 21 CFR 312.32. - Instructions for handling infusion-related adverse events were modified such that in the event of Grade 2 or higher infusion-related reactions the PANZYGA infusion would be stopped; the infusions may be resumed at a lower rate after the symptoms subside. - A new section - Managing Hypersensitivity Reactions - Specification of Pre-medication Use Prior to PANZYGA Infusions - Additional vital sign assessments after the start of the PANZYGA infusion, specifically to add vital signs assessments prior to any infusion rate change and to assess them every hour - Thrombopoietin receptor agonist use is prohibited during Screening through Day 32 unless patients have been on a stable dose for 3 weeks. - Clarification regarding Long-term Anti-prolific Agents or Attenuated Androgen Therapy
05 August 2019	Amendment 2: - FDA reviewed Study Protocol No. NGAM-10 Version 02, including Amendment 01 and requested to amend the protocol such that in the event of severe hypersensitivity reactions or anaphylaxis, any further Panzyga administration should be discontinued and not resumed. In addition the following has been amended: -Increasing Exclusionary Time Requirement after Splenectomy was implemented - Allowable Time Windows for Changing Infusion Rates was implemented - Allowable Time Window for Vital Sign Assessments Taken at the End of the Infusion was implemented - Clarification of Body Weight and Height Assessments - Reconsent of Patients who Turn 18 years old during study participation - Allowing Safety Assessment Visits to be performed locally by the Patient's Primary Care Physician and/or Local Laboratory Services
27 April 2020	Amendment 3: Protocol has been amended to address considerations specified in the FDA Guidance on the Conduct of Clinical Trials of Medical Products during COVID-19 Pandemic, March 2020, rev. April 2020.

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? Yes

Date	Interruption	Restart date
06 December 2023	Due to feasibility constraints with respect to finding pediatric patients with chronic ITP who were eligible and willing to participate, the study was terminated early after 6 patients were enrolled and treated.	-

Notes:

Limitations and caveats

None reported