

A Study to Compare the Efficacy and Safety of Obinutuzumab + GDC-0199 Versus Obinutuzumab + Chlorambucil in Patients With Chronic Lymphocytic Leukemia

This study is currently recruiting participants. (see [Contacts and Locations](#))

Verified February 2016 by Hoffmann-La Roche

Sponsor:
Hoffmann-La Roche

Collaborator:
AbbVie

Information provided by (Responsible Party):
Hoffmann-La Roche

ClinicalTrials.gov Identifier:
NCT02242942

First received: September 16, 2014
Last updated: February 1, 2016
Last verified: February 2016
[History of Changes](#)

[Full Text View](#)

[Tabular View](#)

[No Study Results Posted](#)

[Disclaimer](#)

[How to Read a Study Record](#)

Purpose

This open-label, multicenter, randomized Phase III study is designed to compare the efficacy and safety of a combined regimen of obinutuzumab and GDC-0199 versus obinutuzumab + chlorambucil (GC1b) in patients with chronic lymphocytic leukemia (CLL) and coexisting medical conditions. The anticipated time on study treatment will be approximately one year and the follow-up period will be up to 5 years.

Condition	Intervention	Phase
Lymphocytic Leukemia, Chronic	Drug: Chlorambucil Drug: GDC-0199 Drug: Obinutuzumab	Phase 3

Study Type: Interventional
Study Design: Allocation: Randomized
Endpoint Classification: Safety/Efficacy Study
Intervention Model: Parallel Assignment
Masking: Open Label
Primary Purpose: Treatment

Resource links provided by NLM:

[MedlinePlus](#) related topics: [Chronic Lymphocytic Leukemia](#) [Leukemia](#)

[Drug Information](#) available for: [Chlorambucil](#) [Obinutuzumab](#)

[Genetic and Rare Diseases Information Center](#) resources: [Chronic Lymphocytic Leukemia](#) [Leukemia, B-cell, Chronic](#)

[U.S. FDA Resources](#)

Further study details as provided by Hoffmann-La Roche:

Primary Outcome Measures:

- Progression-free survival (PFS), defined as the time from randomization to the first occurrence of progression, relapse or death from any cause as assessed by the investigator using IWCLL criteria [Time Frame: Up to 5 years] [Designated as safety issue: No]

Secondary Outcome Measures:

- PFS based on Institutional Review Committee (IRC)-assessments, defined as the time from randomization to the first occurrence of progression or relapse or death from any cause [Time Frame: Up to 5 years] [Designated as safety issue: No]
- Objective response rate ([ORR] defined as rate of a clinical response of complete response [CR], CR with incomplete bone marrow recovery [CRI] or partial response [PR]) as determined by the investigator, according to the IWCLL criteria [Time Frame: At the completion of treatment assessment, approximately 1 year] [Designated as safety issue: No]
- Minimal residual disease (MRD) response rate, as measured by allele-specific oligonucleotide polymerase chain reaction (ASO-PCR) [Time Frame: At the completion of treatment assessment, approximately 1 year] [Designated as safety issue: No]
- ORR at completion of combination treatment response assessment [Time Frame: Cycle 7 day 1 or 28 days after last IV infusion, approximately 6 months] [Designated as safety issue: No]
- MRD response rate, as measured by ASO-PCR at completion of combination treatment response assessment [Time Frame: Cycle 9 day 1 or 3 months after last IV infusion, approximately 9 months] [Designated as safety issue: No]

- Overall survival [Time Frame: Time between the date of randomization and the date of death due to any cause, up to approximately 5 years] [Designated as safety issue: No]
- Duration of objective response [Time Frame: Time from the first occurrence of a documented objective response to the time of progressive disease as determined by the investigator or death from any cause, up to approximately 5 years] [Designated as safety issue: No]
- Best response achieved (CR, CRi, PR, stable disease, or progressive disease) [Time Frame: Up to and including the assessment at completion of treatment assessment, within 3 months of last day of treatment, approximately 1 year] [Designated as safety issue: No]
- Event-free survival [Time Frame: Time between date of randomization and the date of disease progression/relapse on the basis of investigator-assessment, death, or start of a new anti-leukemic therapy, up to 5 years] [Designated as safety issue: No]
- Time to next anti-leukemic treatment [Time Frame: Time between the date of randomization and the date of first intake of new anti-leukemic therapy, up to 5 years] [Designated as safety issue: No]
- Incidence of adverse events assessed according to the National Cancer Institute Common Terminology Criteria for Adverse Events (NCICTCAE) version 4.0 [Time Frame: 28 days after the last dose of GDC-0199 or after 90 days after last dose of obinutuzumab, whichever is longer] [Designated as safety issue: No]
- Incidence of severe adverse events [Time Frame: Up to 5 years] [Designated as safety issue: No]
- Incidence of adverse events of special interest [Time Frame: Up to 2 years after last dose of study drug] [Designated as safety issue: No]

Estimated Enrollment: 432
 Study Start Date: December 2014
 Estimated Study Completion Date: January 2020
 Estimated Primary Completion Date: November 2018 (Final data collection date for primary outcome measure)

Arms	Assigned Interventions
Experimental: Safety run-in phase Non-randomized phase	Drug: GDC-0199 GDC-0199, oral tablet: 20 mg daily during Cycle 1, Day 22-28; 50 mg daily during Cycle 2, Day 1-7; 100 mg daily during Cycle 2, Day 8-14; 200 mg daily during Cycle 2, Day 15-21; 400 mg daily during Cycle 2, Day 22-28 and on Day 1-28 for all subsequent cycles until the end of Cycle 12 Other Name: ABT-0199 Drug: Obinutuzumab Obinutuzumab, intravenous (IV) infusion: 100 mg or 1000 mg, depending on splitting rules, at Cycle 1, Day 1 (if 100 mg was received on Day 1, 900 mg will be administered on Cycle 1, Day 2); 1000 mg at Cycle 1, Day 8 and Day 15; 1000 mg at Day 1 for all subsequent cycles until the end of Cycle 6 Other Name: GA-101; gazyva
Experimental: Treatment A Randomized phase	Drug: GDC-0199 GDC-0199, oral tablet: 20 mg daily during Cycle 1, Day 22-28; 50 mg daily during Cycle 2, Day 1-7; 100 mg daily during Cycle 2, Day 8-14; 200 mg daily during Cycle 2, Day 15-21; 400 mg daily during Cycle 2, Day 22-28 and on Day 1-28 for all subsequent cycles until the end of Cycle 12 Other Name: ABT-0199 Drug: Obinutuzumab Obinutuzumab, intravenous (IV) infusion: 100 mg or 1000 mg, depending on splitting rules, at Cycle 1, Day 1 (if 100 mg was received on Day 1, 900 mg will be administered on Cycle 1, Day 2); 1000 mg at Cycle 1, Day 8 and Day 15; 1000 mg at Day 1 for all subsequent cycles until the end of Cycle 6 Other Name: GA-101; gazyva
Experimental: Treatment B Randomized phase	Drug: Chlorambucil Chlorambucil, administered orally: 0.5 mg/kg at Day 1 and Day 15 for Cycle 1-12 Drug: Obinutuzumab Obinutuzumab, intravenous (IV) infusion: 100 mg or 1000 mg, depending on splitting rules, at Cycle 1, Day 1 (if 100 mg was received on Day 1, 900 mg will be administered on Cycle 1, Day 2); 1000 mg at Cycle 1, Day 8 and Day 15; 1000 mg at Day 1 for all subsequent cycles until the end of Cycle 6 Other Name: GA-101; gazyva

Eligibility

Ages Eligible for Study: 18 Years and older
 Genders Eligible for Study: Both
 Accepts Healthy Volunteers: No

Criteria

Inclusion Criteria:

- Documented previously untreated CLL according to the International Workshop on Chronic Lymphocytic Leukemia (IWCLL) criteria
- CLL requiring treatment according to IWCLL criteria
- Total Cumulative Illness Rating Scale (CIRS score) > 6
- Adequate marrow function independent of growth factor or transfusion support within 2 weeks of screening as per protocol, unless cytopenia is due to marrow involvement of CLL
- Adequate liver function
- Life expectancy > 6 months
- Agreement to use highly effective contraceptive methods per protocol

Exclusion Criteria:

- Transformation of CLL to aggressive Non-Hodgkin's lymphoma (Richter's transformation or pro-lymphocytic leukemia)
- Known central nervous system involvement
- Patients with a history of confirmed progressive multifocal leukoencephalopathy (PML)
- An individual organ/ system impairment score of 4 as assessed by the CIRS definition limiting the ability to receive the treatment regimen of this trial with the exception of eyes, ears, nose, throat organ system
- Patients with uncontrolled autoimmune hemolytic anemia or immune thrombocytopenia
- Inadequate renal function
- History of prior malignancy, except for conditions as listed in the protocol if patients have recovered from the acute side effects incurred as a result of previous therapy
- Use of investigational agents or concurrent anti-cancer treatment within the last 4 weeks of registration
- Patients with active bacterial, viral, or fungal infection requiring systemic treatment within the last two months prior to registration
- History of severe allergic or anaphylactic reactions to humanized or murine monoclonal antibodies or known sensitivity or allergy to murine products
- Hypersensitivity to chlorambucil, obinutuzumab, or GDC-0199 or to any of the excipients
- Pregnant women and nursing mothers
- Positive test results for chronic HBV infection (defined as positive HBsAg serology) or positive test result for hepatitis C (hepatitis C virus [HCV] antibody serology testing)
- Patients with known infection with human immunodeficiency virus (HIV) or human T-cell leukemia virus-1 (HTLV-1)
- Requires the use of warfarin, marcumar, or phenprocoumon
- Received agents known to be strong CYP3A4 inhibitors or inducers within 7 days prior to the first dose of study drug

▶ Contacts and Locations

Choosing to participate in a study is an important personal decision. Talk with your doctor and family members or friends about deciding to join a study. To learn more about this study, you or your doctor may contact the study research staff using the Contacts provided below. For general information, see [Learn About Clinical Studies](#).

Please refer to this study by its ClinicalTrials.gov identifier: NCT02242942

Contacts

Contact: Reference Study ID Number: **BO25323** www.roche.com/about_roche/roche_worldwide.htm 888-662-6728 (U.S. Only) global.roche.genentechtrials@roche.cc

📍 Show 196 Study Locations

Sponsors and Collaborators

Hoffmann-La Roche
AbbVie

Investigators

Study Director: Clinical Trials Hoffmann-La Roche

▶ More Information

No publications provided

Responsible Party: Hoffmann-La Roche
 ClinicalTrials.gov Identifier: [NCT02242942](#) [History of Changes](#)
 Other Study ID Numbers: **BO25323** 2014-001810-24
 Study First Received: September 16, 2014
 Last Updated: February 1, 2016
 Health Authority: United States: Food and Drug Administration

Additional relevant MeSH terms:

Leukemia, Lymphocytic, Chronic, B-Cell
 Leukemia, Lymphoid
 Immune System Diseases
 Immunoproliferative Disorders
 Leukemia
 Leukemia, B-Cell
 Lymphatic Diseases
 Lymphoproliferative Disorders
 Neoplasms

Neoplasms by Histologic Type
 Chlorambucil
 Obinutuzumab
 Alkylating Agents
 Antineoplastic Agents
 Antineoplastic Agents, Alkylating
 Molecular Mechanisms of Pharmacological Action
 Pharmacologic Actions
 Therapeutic Uses

ClinicalTrials.gov processed this record on February 03, 2016