AMALEE - CLEE011A2207 / PMR (dernière mise à jour : 29/01/2020)

http://archimaid.fr/index.php?action=show&id=1040

Informations générales

Titre de l'étude : Etude de phase II, randomisée, en ouvert, multicentrique, évaluant la tolérance et l'efficacité du ribociclib 400 mg en association avec des inhibiteurs de l'aromatase non-stéroïdiens pour le traitement de femmes pré- et post-ménopausées atteintes d'un cancer du sein à récepteurs hormonaux positifs et HER2 négatif, à un stade avancé, sans traitement préalable

Traitement : Métastasique ou localement avancé

Type d'étude : Ciblage moléculaire / Innovation thérapeutique

Phase : II **Stade** : Localement avancé à Métastasique **Ligne(s)** : 1

Schéma : QT interval prolongation and neutropenia are considered to be important identified risks for ribociclib (Kisqali® Prescribing Information, Investigator Brochure). The approved dosing regimen of ribociclib is 600 mg daily (QD) on a 3 weeks on/1 week off schedule.

The purpose of the study is to explore whether a reduced dosing regimen of 400 mg ribociclib orally QD 3 weeks on/1 week off may decrease the risk of QTc prolongation without compromising the efficacy of ribociclib in combination with an NSAI in pre- and postmenopausal women with HR-positive, HER2-negative aBC who have received no prior therapy for advanced disease. The risks of other AEs of special interest, such as neutropenia and hepatobiliary toxicity will be evaluated in this study as well.

Approximately 350 patients will be randomly assigned to one of the below treatment arms in a 1:1 ratio: Experimental arm (Arm 1) - Ribociclib 400 mg QD 3 weeks on/1 week off + NSAI (+ goserelin in premenopausal women): 175 patients Control arm (Arm 2) - Ribociclib 600 mg QD 3 weeks on/1 week off + NSAI (+ goserelin in premenopausal women): 175 patients Randomization will be stratified by the presence of lung and/or liver metastases (yes versus no).

Spécialités / Localisations

Spécialité n°1 : Seins, organes génitaux de la femme

CIM10 - Localisation n°1 : **C50** - Tumeur maligne du sein

Critères

Critères d'inclusion : Patient has advanced (loco-regionally recurrent or metastatic) breast cancer not amenable to curative therapy.

Patient has a histologically and/or cytologically confirmed diagnosis of ER-positive and/or PgR-positive breast cancer based on the most recently analyzed tissue sample, and all tested by local laboratory.

Patient has HER2-negative breast cancer defined as a negative in situ hybridization test or an IHC status of 0, 1+ or 2+. If IHC is 2+, a negative in situ hybridization (FISH, CISH, or SISH) test is required by local laboratory testing and based on the most recently analyzed tissue sample.

Patient must have measurable disease, i.e., at least one measurable lesion according to RECIST version 1.1. (a lesion in a previously irradiated site may only be counted as a target lesion if there is clear evidence of progression since the irradiation).

Patient has an Eastern Cooperative Oncology Group (ECOG) performance status 0 or 1.

Standard 12-lead ECG values defined as the mean of the triplicate ECGs and assessed by the central laboratory:

QTc interval at screening < 450 ms (using Fridericia's correction)
Mean resting heart rate 50 to 90 bpm (determined from the ECG)

Women of childbearing potential (CBP), defined as all women physiologically capable of becoming pregnant, must have confirmed negative serum pregnancy test (for ?-hCG) within 14 days prior to randomization.

Women of CBP must be willing to use highly effective methods of contraception.

Critères de non-inclusion : Patient with symptomatic visceral disease or any disease burden that makes the patient ineligible for endocrine therapy per the investigator's judgment.

Patient who received any prior systemic anti-cancer therapy(including endocrine therapy, chemotherapy, prior CDK4/6 inhibitors) for aBC. Patients who received neo-/adjuvant therapy for breast cancer are eligible.

Patient is concurrently using other anti-cancer therapy.

Patient has had major surgery within 14 days prior to starting study drug or has not recovered from major toxicities.

Patient has received extended-field radiotherapy <= 4 weeks or limited field radiotherapy <= 2 weeks prior to randomization, and has not recovered to grade 1 or better from related side effects of such therapy (with the exception of alopecia or other toxicities not considered a safety risk for the patient at investigator's discretion).

Patient has a concurrent malignancy or malignancy within 3 years of the randomization date, with the exception of adequately treated basal or squamous cell skin carcinoma, or curatively resected cervical carcinoma in situ.

Patients with central nervous system (CNS) involvement unless they meet specific stability criteria.

Patient has clinically significant, uncontrolled heart disease and/or cardiac repolarization abnormality.

Patient is currently receiving or has received systemic corticosteroids <= 2 weeks prior to starting study drug, and has not fully recovered from side effects of such treatment.

Other protocol-defined Inclusion/Exclusion may apply.

Informations promoteur

Nom du promoteur : Novartis Pharmaceuticals

Type de promoteur : Industriel

Adresse : - 00000 HORS FRANCE

Coordonnateur : - *Mail :* - *Tél :*

Informations centre investigateur n°1

Nom du centre : Centre François BACLESSE

Adresse : 3 avenue du Général Harris 14000 CAEN

Investigateur : Christelle LEVY

TEC / ARC / IDE : Sara GROSSI - *Mail :* s.grossi@baclesse.unicancer.fr - *Tél :*

Ouverture de l'essai : OUVERT

Liens utiles

Clinical Trials : https://clinicaltrials.gov/ct2/show/study/NCT03822468?term=NCT03822468&draw=2&rank=1