PLEASE NOTE: *This study has been imported from ClinicalTrials.gov without additional data checks.*

Trial Description

Title

A Randomised, Double-blind, Placebo-controlled, Phase I/II Trial of RNActive®-Derived Cancer Vaccine (CV9104) in Asymptomatic or Minimally Symptomatic Patients With Metastatic Castrate-refractory Prostate Cancer

Trial Acronym

[---]*

URL of the trial

[---]*

Brief Summary in Lay Language

The purpose of this study is to determine whether the new RNActive®-derived prostate cancer vaccine CV9104 prolongs survival in patients with asymptomatic or minimally symptomatic metastatic prostate cancer that is castrate resistant.

Brief Summary in Scientific Language

The study is the first clinical study with the new prostate cancer vaccine CV9104. This vaccine is composed of 6RNActive®-based compounds, each encoding for an antigen that is overexpressed in prostate cancer compared to healthy tissues. RNActive®-based vaccines are a novel class of vaccines based on messenger RNA.

The study is a double-blind randomized placebo-controlled phase I/II trial in men with asymptomatic- minimally symptomatic metastatic castrate-refractory prostate cancer.

The phase 1 (safety lead- in) part of the trial has the primary objective to assess the safety of CV9104 and to determine the dose for the randomized phase II part.

The primary objective of the phase II part is to compare overall survival in patients treated with CV9104 compared to patients treated with placebo.

Organizational Data

- DRKS-ID: **DRKS00005373**
- Date of Registration in DRKS: **2013/10/17**
- Date of Registration in Partner Registry or other Primary Registry: **2013/02/08**
- Investigator Sponsored/Initiated Trial (IST/IIT): **no**
- Ethics Approval/Approval of the Ethics Committee: **[---]***
- (leading) Ethics Committee Nr.: **[---]***

Secondary IDs

- Primary Registry-ID: **NCT01817738 (ClinicalTrials.gov)**
- Sponsor-ID: **CV-9104-004 (CureVac GmbH)**

Health condition or Problem studied

- Free text: **Prostate Cancer**
- ICD10: **C61 - Malignant neoplasm of prostate**

Interventions/Observational Groups

- Arm 1: **Biological: CV9104**
- Arm 2: **Biological: Placebo**

Characteristics

- Study Type: **Interventional**
- Study Type Non-Interventional: **[---]***
- Allocation: **Randomized controlled trial**
- Blinding: **[---]***
- Who is blinded: **patient/subject, caregiver, investigator/therapist, assessor**
- Control: **Placebo, Active control (effective treament of control group)**
- Purpose: **Treatment**
- Assignment: **Parallel**
- Phase: **I-II**
- Off-label use (Zulassungsüberschreitende Anwendung eines Arzneimittels): **[---]***

Primary Outcome

- Phase I (Safety Lead-In): Occurrence of dose-limiting toxicity (DLT) during the first 4 weeks of treatment (after administration of 3 vaccinations and after a 1 week observation period; time frame: Up to 4 weeks; Safety Lead in Portion: Patients will receive CV9104 at a starting dose of 1920 µg in weeks 1, 2 and 3. Safety lead-in patients will be observed for DLTs until 1 week after Vaccination 3 (week 4). In case no DLTs will be observed vaccinations will continue in weeks 5, 7, 9, 12, 15, 18 and 24, then every 6 weeks for up to 12 months after the first vaccination and then every 3 months thereafter until one of the criteria for study treatment discontinuation is met
- Phase II (Randomised Portion): Overall Survival from time of randomisation- up to 3.5-4 years.; time frame: Overall survival will be assessed during the lifetime of the study

Secondary Outcome

- Progression free survival from date of randomisation; time frame: Every 3 months for up to 2 years
- Progression free survival from start of first subsequent systemic therapy; time frame: Every 6 months until 2 years
- Percent change to maximal and to minimal PSA from baseline and before start of first subsequent systemic cancer therapy and from start of first systemic therapy to end of first subsequent systemic therapy; time frame: Every 3 months up to 2 years
- Cellular and humoral immune response rate against the 6 antigens encoded by CV9104; time frame: Immune responses will be assessed at baseline, in week 6 and week 24 after start of vaccination
- Time to symptom progression based on FACT P score and subscores; time frame: Assessments at baseline, weeks 5, 9,18, 24 and every 3 months for up to 2 years
- Absolute change and area under the curve from baseline EQ-5D score and pain sub-score; time frame: Assessments at baseline, weeks 5, 9,18, 24 and thereafter every 3 months for up to 2 years
- Progression free survival from randomisation until second progression on first subsequent therapy; time frame: Every 3 and 6 months up to 2 years

Countries of recruitment

- CZ **Czech Republic**
- FR **France**
- DE **Germany**
- PL **Poland**
- ES **Spain**
- SE **Sweden**
- CH **Switzerland**
- UK **United Kingdom**

Locations of Recruitment

- **Universitätsklinikum Aachen Klinik für Urologie, Aachen**
- **Vivantes Klinikum Am Urban Klinik für Urologie, Berlin**
- **Medizinisches Zentrum Friedensplatz, Bonn**
- **Universitätsklinikum Dresden Klinik und Poliklinik für Urologie, Dresden**
- **Chirurgische Universitätsklinik Freiburg Klinik für Urologie, Freiburg**
- **Urologikum Hamburg, Hamburg**
- **Nationales Zentrum für Tumorerkrankungen Medizinische Onkologie, Heidelberg**
- **Urologie am Nordplatz, Leipzig**
- **UMM Universitätsmedizin Mannheim, Mannheim**
- **Praxis Dr.schulze, Marklleeberg**
- **Urologische Klinik und Poliklinik der Technischen Universität München Klinikum Rechts der Isar, Munich**
- **Universitätsklinikum Münster Klinik und Poliklinik für Urologie, Münster**
- **Studienpraxis für Urologie, Nürtingen**
- **Ortenau Klinikum Urologie und Kinderurologie, Offenburg**
- **Urologische Klinik Dr. Castingius München, Planegg**
- **Universitätsklinik für Urologie, Tübingen**

Recruitment

- Planned/Actual: **[---]***
- (Anticipated or Actual) Date of First Enrollment: **2012/08/31**
- Target Sample Size: **200**
- Monocenter/Multicenter trial: **Multicenter trial**
- National/International: **International**

Inclusion Criteria

- Gender: **Male**
- Minimum Age: **18 Years**
- Maximum Age: **no maximum age**

Additional Inclusion Criteria

1. Male, age ≥18 years

2. Histologically confirmed castrate refractory metastatic adenocarcinoma of the prostate with progressive disease after surgical castration or during androgen suppression therapy including a GNRH agonist or antagonist and after at least 1 additional anti-hormonal manipulation; and serum testosterone level of < 50 ng/dL or < 1.7 nmol/L

Progression will be confirmed either

- **radiologically or**
- **by 2 consecutive rises of PSA, measured at least 1 week apart, resulting at least in a 50% increase over the nadir and a PSA > 2 ng/mL.**
- **An antiandrogen withdrawal response must have been excluded after discontinuation of antiandrogen therapy for at least 6 weeks.**

3. Metastatic disease confirmed by imaging

4. ECOG performance status 0 or 1

Key

Exclusion criteria

1. Previous immunotherapy for PCA (e.g. sipuleucel-T [Provenge®], experimental cancer vaccines or ipilimumab [Yervoy®]).

2. Treatment with any investigational anticancer agents within 4 weeks prior to first dose of study drug

3. Systemic treatment with immunosuppressive agents

4. Active skin disease (atopic eczema, psoriasis) in the areas for vaccine injection (upper arms or thighs) preventing the administration of i.d. injections into areas of healthy skin.

5. History of or current autoimmune disorders

6. Primary or secondary immune deficiency.

7. Seropositive for human immunodeficiency virus, hepatitis B virus (except after hepatitis B vaccination) or hepatitis C virus infection.

8. Symptomatic congestive heart failure (New York Heart Association 3 or 4), unstable angina pectoris or myocardial infarction, significant cardiac arrhythmia, history of

stroke or transient ischemic attack, all within 6 months prior to enrolment or severe
hypertension according to WHO criteria or uncontrolled hypertension at the time of
enrolment (systolic blood pressure ≥ 180 mm Hg)´

9. Previous chemotherapy for metastatic PCA.

10. Previous anti-hormonal treatment with abiraterone or any other investigational
anti-hormonal treatment.

11. Cancer-related pain requiring opioid narcotics within 28 days before enrolment or an
average pain score of > 3 on a visual analogue scale.

12. Presence of visceral metastases.

13. History of other malignancies other than PCA over the last 5 years (except basal cell
carcinoma of the skin).

Addresses

- **Primary Sponsor**

  CureVac AG

  Telephone: **[---]***
  Fax: **[---]***
  E-mail: **[---]***
  URL: **[---]***

- **Contact for Scientific Queries**

  University Hospital of Tübingen; Dept. of Urology
  Arnulf Stenzl, Prof. Dr.

  Telephone: **[---]***
  Fax: **[---]***
  E-mail: **[---]***
  URL: **[---]***

- **Contact for Public Queries**

  University Hospital of Tübingen; Dept. of Urology
  Arnulf Stenzl, Prof. Dr.

  Telephone: **[---]***
  Fax: **[---]***

Contact for Public Queries

University Hospital of Tübingen; Dept. of Urology
Arnulf Stenzl, Prof. Dr.

Telephone: **[---]***
Fax: **[---]***
E-mail: **[---]***
URL: **[---]***

Sources of Monetary or Material Support

- **[---]***

Bitte wenden Sie sich an den Sponsor / Please refer to primary sponsor

Telephone: **[---]***
Fax: **[---]***
E-mail: **[---]***
URL: **[---]***

Status

- Recruitment Status: **Recruiting complete, follow-up continuing**
- Study Closing (LPLV): **[---]***

Trial Publications, Results and other documents

- Further trial documents **Click here for more information about CureVac**