

Brentuximab Vedotin plus Lenalidomide and Rituximab for the Treatment of Relapsed/Refractory DLBCL

Estado
EC Finalizado

Tipo de Participantes
No aportado

Rangos de Edad
Mayores de 64 , Adultos (18-64 años)

Género
Ambos

Fases
Fase III

Participantes esperados
134

Resultados
Sin resultados

Bajo nivel intervención
No

Enfermedad rara
No

Cobertura geográfica
Sin determinar

Ámbitos del ensayo
tratamiento, seguridad, eficacia

Terapia avanzada
NO

Información

Identificador
2023-503384-41-00 (CTIS)

Cod. Protocolo
SGN35-031

Transicionado 2020-002686-33

Área terapéutica

- Enfermedades [C] - Tracto respiratorio [C08]
- Procesos fisiológicos [G] - Fisiología de la circulación y de la respiración [G09]

Enfermedad investigada

Relapsed or refractory diffuse large B-cell lymphoma (DLBCL)

Título Científico

C5691003_A Randomized, Double-blind, Placebo-Controlled, Active-Comparator, Multicenter, Phase 3 Study of Brentuximab Vedotin or Placebo in Combination With Lenalidomide and Rituximab in Subjects with Relapsed or Refractory Diffuse Large B-cell Lymphoma (DLBCL)

ECHELON-3

Justificación

No aportado

Objetivo Principal

Evaluate and compare overall survival (OS) between the 2 treatment arms in the intent-to-treat (ITT) population.

Variables de Evaluación Primaria

OS (Overall Survival)

Momentos temporales de evaluación primaria

No aportado

Objetivo Secundario

1. Evaluate and compare progression-free survival (PFS) per Lugano 2014 by investigator between the 2 treatment arms in the ITT population
 2. Evaluate and compare the objective response rate (ORR) per Lugano 2014 by investigator between the 2 treatment arms in the ITT population
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Variables de Evaluación Secundaria

PFS (progression-free survival) per Lugano 2014 by investigator
CR (complete response) rate per Lugano 2014 by investigator
DOR (duration of response) per Lugano 2014 by investigator
Incidence, severity, and seriousness of adverse events (AEs) per National Cancer Institute Common Terminology Criteria for Adverse Events (NCI CTCAE) version 5.0
OS in CD30-positive participants
ORR (objective response rate) per Lugano 2014 by investigator

Momentos temporales de evaluación secundaria

No aportado

Criterios de Inclusión

Participants with relapsed or refractory diffuse and transformed large B-cell lymphoma (R/R DLBCL). DLBCL and cell of origin (GCB versus non-GCB) will be histologically determined by the most recent local pathology assessment for the purposes of study eligibility and stratification. The following subtypes of DLBCL are eligible for enrollment: a. Not otherwise specified (NOS) b. Intravascular large B-cell lymphoma c. DLBCL associated with chronic inflammation d. EBV-positive NOS e. ALK-positive f. T-cell-/histiocyte-rich large B-cell lymphoma g. Primary mediastinal large B-cell lymphoma h. High-grade B-cell lymphoma with translocations of MYC and BCL2 and/or BCL6 (double-/triple-hit lymphoma) i. High-grade NOS B-cell lymphomas j. Primary cutaneous DLBCL (leg type) k. DLBCL arising from transformed indolent lymphomas/leukemias

Participants who can father children, under the following conditions: a. Must agree not to donate sperm starting at time of informed consent and continuing throughout the study period and for at least 12 months after the final dose of study drug. b. If sexually active with a person of childbearing potential in a way that could lead to pregnancy, must consistently use 2 methods of birth control (see Appendix C) starting at time of informed consent and continuing throughout the study and for at least 12 months after the final dose of study drug. c. If sexually active with a person who is pregnant or breastfeeding, must consistently use one of the contraception options (see Appendix C) starting at time of informed consent and continuing throughout the study and for at least 12 months after the final dose of study drug

The following requirements for participants who are known to be human immunodeficiency virus (HIV) positive: CD4+ T-cell counts 350 cells/mm³ within 28 days of Day 1 No acquired immune deficiency syndrome-defining opportunistic infection within the past 12 months On established highly active antiretroviral therapy for at least 4 weeks with an HIV viral load less than 400 copies/mL within 28 days of Day 1 (see Section 5.6.2 for participants receiving strong CYP3A inhibitors). The subject must provide written informed consent

Participants must have R/R disease following 2 lines of prior systemic therapy. For participants with transformed DLBCL (subtype k), at least the last systemic therapy used must have been for DLBCL. Participants must be HSCT or CAR-T ineligible according to the investigator and must meet at least one of the following criteria: a. One or more co-morbidities, including cardiac, pulmonary, renal or hepatic dysfunction that in the opinion of the Investigator make the subject medically unfit to receive HSCT or CAR-T therapy. b. Active disease following induction and salvage chemotherapy c. Inadequate stem cell mobilization (for HSCT) d. Relapse following prior HSCT or CAR-T e. Unable to receive CAR-T therapy due to financial, geographic, insurance, or manufacturing issues. Participants must have tumor tissue submitted to the central pathology lab for the determination of CD30 expression, which will be centrally determined by visual assessment for any detectable level of CD30 on tumor cells by IHC. The most recent biopsy available that contains viable DLBCL tissue should be submitted. If the CD30 results from the central pathology lab are not available prior to randomization, the subject may be stratified based on % CD30 expression from the local pathology lab. Participants who are stratified based on local pathology lab results must have the same archived tumor tissue sent in for central CD30 evaluation within 2 weeks of enrollment. Age 18 and older An Eastern Cooperative Oncology Group (ECOG) performance status score of 0 to 2 Participants must have fluorodeoxyglucose (FDG)-avid disease by positron emission tomography (PET) and bidimensional measurable disease of > 1.5 cm by computed tomography (CT), as assessed by the site radiologist within 28 days of Day 1. a. PET and CT imaging performed prior to consent but within 28 days of Day 1 can be used The following baseline laboratory data within 28 days of Day 1: a. Absolute neutrophil count (ANC) 1000/L. If recent G-CSF has been used, the ANC result must be 14 days after last dose of pegylated G-CSF or 7 days after last dose of G-CSF. b. Platelet count 50,000/L at least 7 days after last treatment for DLBCL with no platelet transfusion during this 7-day period. c. For participants whose last therapy was CAR-T therapy, the ANC and platelet count requirements must be met at least twice during screening, with the measurements at least 7 days apart. d. Hemoglobin 8.0 g/dL and have not received a transfusion in the 7 days prior to testing e. Serum bilirubin 1.5 x upper limit of normal (ULN) or 3 x ULN for participants with Gilberts disease or documented hepatic involvement with lymphoma. f. Estimated glomerular filtration rate (eGFR) 45 mL/min using the Cockcroft-Gault (C-G) formula, with serum creatinine (Scr) reported in mg/dL. o $eGFR (mL/min) = ([140 \text{ age}] \times \text{weight [kg]} \times 0.85 [\text{if female}]) / (\text{Scr} \times 72)$ g. Alanine aminotransferase (ALT) and aspartate aminotransferase (AST) 3.0 x ULN or 5.0 x ULN for participants with documented hepatic involvement with lymphoma. h. Labs performed prior to consent but within 28 days of Day 1 can be used. Participants of childbearing potential, as defined in Section 4.3, under the following conditions. a. Must avoid pregnancy for at least 4 weeks before beginning lenalidomide therapy, during therapy, during dose interruptions, and for at least 12 months after completing therapy. Participants must commit either to abstain continuously from heterosexual sexual intercourse or to use 2 methods of birth control simultaneously: one highly effective form of contraception tubal ligation, intrauterine device (IUD), hormonal (birth control pills, injections, hormonal patches, vaginal rings, or implants), or partners vasectomy, and 1 additional effective contraceptive method male latex or synthetic condom,

diaphragm, or cervical cap (see Appendix C), beginning 4 weeks prior to initiating treatment with lenalidomide, during therapy, during dose interruptions, and continuing for 12 months following discontinuation of study drug (brentuximab vedotin, rituximab, or lenalidomide). Two negative beta human chorionic gonadotropin (-HCG) pregnancy tests must be obtained prior to initiating therapy. The first test must be a serum -HCG pregnancy test and the second test can either be a serum or urine -HCG pregnancy test. The first test should be performed within 10 to 14 days and the second test performed within 24 hours prior to receiving lenalidomide therapy. Afterwards, a serum -HCG pregnancy test must be administered weekly during the first month, then at least monthly thereafter in females with regular menstrual cycles or every 2 weeks in participants with irregular menstrual cycles. b. Must agree not to try to become pregnant during the study and for at least 12 months after the final dose of study drug. c. Must agree not to breastfeed or donate ova, starting at time of informed consent and continuing through 12 months after the final dose of study drug. d. If sexually active in a way that could lead to pregnancy, must consistently use 2 methods of birth control as described in Inclusion criterion 9a, starting at time of informed consent and continuing throughout the study and for at least 12 months after the final dose of study drug

Criterios de Exclusión

History of another malignancy within 2 years before the first dose of study drug or any evidence of residual disease from a previously diagnosed malignancy. Exceptions are malignancies with a negligible risk of metastasis or death (eg, 5-year OS 90%), such as carcinoma in situ of the cervix, non-melanoma skin carcinoma, localized prostate cancer, ductal carcinoma in situ, or Stage I uterine cancer Participants with previous allogeneic HSCT if they meet either of the following criteria: <100 days from HSCT Active acute or chronic graft-versus-host disease (GVHD) or receiving immunosuppressive therapy as treatment for or prophylaxis against GVHD Previous treatment with brentuximab vedotin or lenalidomide. a. Previous treatment with other vedotin-based ADCs is permitted if the last dose is at least 6 months prior to Day 1 Current therapy with immunosuppressive medications (including steroids), other systemic anti-neoplastic, or investigational agents. a. Prednisone (or equivalent) 10 mg/day may be used for non-lymphomatous purposes Documented history of a cerebral vascular event (stroke or transient ischemic attack), unstable angina, myocardial infarction, pulmonary embolism, or cardiac symptoms consistent with New York Heart Association (NYHA) Class III-IV within 6 months prior to the first dose of study drugs Congestive heart failure, Class III or IV, by the NYHA criteria (see Appendix D). Grade 2 or higher peripheral sensory or motor neuropathy at baseline Other serious underlying medical condition that, in the opinion of the investigator, would impair the subjects ability to receive or tolerate the planned treatment, and complete study assessments History of progressive multifocal leukoencephalopathy (PML). Active cerebral/meningeal disease related to the underlying malignancy. Participants with a history of cerebral/meningeal disease related to the underlying malignancy are allowed if prior CNS disease has been effectively treated and without progression for at least 3 months Any uncontrolled Grade 3 or higher (per NCI CTCAE version 5.0) viral, bacterial, or fungal infection within 2 weeks prior to the first dose of study drug. Routine antimicrobial prophylaxis is permitted Chemotherapy, radiotherapy, biologics, and/or other antitumor treatment with immunotherapy that is not completed 3 weeks prior to first dose of study drug, unless underlying disease has progressed on treatment Participants who are breastfeeding Known hypersensitivity to any study drug or excipient contained in the drug formulation of the study drugs Any contraindication to associated study treatments Known to be positive for hepatitis B by surface antigen expression. Participants who are hepatitis B surface antigen (HBsAg) negative but hepatitis B core antibody (HBcAb) positive are eligible, but should start hepatitis B prophylaxis therapy prior to receiving the first dose of rituximab. Known to be positive for hepatitis C (HCV) infection (either confirmed positive by polymerase chain reaction [PCR] or on antiviral therapy for hepatitis C within the last 6 months). Participants who have been treated for hepatitis C infection are permitted if they have documented sustained virologic response of 12 weeks

Calendario

(Última actualización: 11/06/2026)

Autorización 21/01/2021	Inicio de Ensayo 25/03/2021	Inclusión Primer Paciente 16/06/2021	Interrumpido No aportado	Reiniciado No aportado
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Fin de reclutamiento 23/11/2023	Fin prematuro (España) No aportado	Fin prematuro (Global) No aportado	Fin del ensayo en España 12/03/2026	Fin del ensayo global No aportado
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Promotor

Seagen Inc. United States

21823 30th Drive Southeast

Contact Person

Clinical Medical Lead

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Monetary support: N/A

Tipo de promotor: Comercial

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Centros

Cerrado (09/08/2024)

CLINICA UNIVERSIDAD DE NAVARRA

Pamplona/Iruña

NAVARRA

Cerrado (21/06/2023)

Complejo Hospitalario Infanta Leonor

Madrid

MADRID

Cerrado (07/08/2025)

HOSPITAL CLINICO UNIVERSITARIO DE SALAMANCA (COMPLEJO ASISTENCIAL UNIV.SA)

Salamanca

SALAMANCA

Cerrado (02/09/2025)

HOSPITAL COSTA DEL SOL

Marbella

MÁLAGA

Cerrado (08/04/2026)

HOSPITAL DE LA SANTA CREU I SANT PAU

Barcelona

BARCELONA

Cerrado (08/04/2026)

Hospital De La Santa Creu I Sant Pau

Barcelona

BARCELONA

AGDAC

Cerrado (05/11/2025)

Hospital Del Mar

Barcelona

BARCELONA

Hematology department

Cerrado (08/04/2026)

HOSPITAL SAN PEDRO DE ALCANTARA

Cáceres

CÁCERES

Cerrado (12/01/2024)

HOSPITAL UNIVERSITARI VALL
D'HEBRON

Barcelona

BARCELONA

Cerrado (30/11/2023)

HOSPITAL UNIVERSITARIO CENTRAL
DE ASTURIAS

Oviedo

ASTURIAS

Cerrado (18/01/2024)

HOSPITAL UNIVERSITARIO DE
NAVARRA

Pamplona/Iruña

NAVARRA

Cerrado (03/09/2025)

HOSPITAL UNIVERSITARIO
FUNDACION JIMENEZ DIAZ

Madrid

MADRID

Cerrado (04/09/2025)

HOSPITAL UNIVERSITARIO LA PAZ

Madrid

MADRID

Cerrado (09/02/2024)

HOSPITAL UNIVERSITARIO PUERTA
DE HIERRO MAJADAHONDA

Majadahonda

MADRID

Cerrado (01/09/2025)

HOSPITAL UNIVERSITARIO
QUIRONSAUD MADRID

Pozuelo de Alarcón

MADRID

Cerrado (27/06/2023)

Hospital Universitario Regional De
Malaga

Málaga

MÁLAGA

Cerrado (05/10/2022)

Hospital Universitario Virgen Del Rocio

Sevilla

SEVILLA

Cerrado (06/02/2024)

HOSPITAL UNIVERSITARIO 12 DE OCTUBRE

Madrid

MADRID

Cerrado (06/02/2024)

Hospital Universitario 12 De Octubre

Madrid

MADRID

Medical Oncology Department

Cerrado (04/06/2025)

Institut Catala D'oncologia

Hospitalet de Llobregat, L'

BARCELONA

Cerrado (05/09/2024)

Institut Catala D'oncologia

Badalona

BARCELONA

Medicamentos

-
-
SUBCUTANEOUS INJECTION

Código ATC: L01XC02 - RITUXIMAB

Principios Activos: N/A

Experimental

Revlimid 5 mg hard capsules

CAPSULE, HARD

ORAL

Código ATC: L04AX04 - LENALIDOMIDA

Principios Activos: N/A

Huérfano

Experimental

BRENTUXIMAB VEDOTIN

POWDER FOR CONCENTRATE FOR SOLUTION FOR
INFUSION

SUBCUTANEOUS INJECTION

-
Principios Activos: N/A

Experimental

Sin resultados

Brentuximab Vedotin plus Lenalidomide and Rituximab for the Treatment of Relapsed/Refractory DLBCL

State
Finished CT

Type of participants
Not provided

Age Ranges
Older than 64 , Adults (18-64 years)

Gender
Both

Phases
Phase III

Expected Participants
134

Results
No results

Low level of intervention
No

Rare disease
No

Geographic coverage
Undetermined

Areas of the study
treatment, safety, effectiveness

Advanced therapy
NO

Information

Identifier
2023-503384-41-00 (CTIS)

Protocol Code
SGN35-031

Transitioned 2020-002686-33

Therapeutic area

- Diseases [C] - Respiratory Tract Diseases [C08]
- Body processes [G] - Circulatory and Respiratory Physiological Phenomena [G09]

Investigated Disease

Relapsed or refractory diffuse large B-cell lymphoma (DLBCL)

Scientific Title

C5691003_A Randomized, Double-blind, Placebo-Controlled, Active-Comparator, Multicenter, Phase 3 Study of Brentuximab Vedotin or Placebo in Combination With Lenalidomide and Rituximab in Subjects with Relapsed or Refractory Diffuse Large B-cell Lymphoma (DLBCL)

ECHELON-3

Rationale

Not provided

Main Objective

Evaluate and compare overall survival (OS) between the 2 treatment arms in the intent-to-treat (ITT) population.

Primary Endpoints

OS (Overall Survival)

Temporary moments of secondary assessment

Not provided

Secondary Objective

1. Evaluate and compare progression-free survival (PFS) per Lugano 2014 by investigator between the 2 treatment arms in the ITT population
 2. Evaluate and compare the objective response rate (ORR) per Lugano 2014 by investigator between the 2 treatment arms in the ITT population
-

Secondary Endpoints

PFS (progression-free survival) per Lugano 2014 by investigator
CR (complete response) rate per Lugano 2014 by investigator
DOR (duration of response) per Lugano 2014 by investigator
Incidence, severity, and seriousness of adverse events (AEs) per National Cancer Institute Common Terminology Criteria for Adverse Events (NCI CTCAE) version 5.0
OS in CD30-positive participants
ORR (objective response rate) per Lugano 2014 by investigator

Temporary moments of secondary assessment

Not provided

Inclusion criteria

Participants with relapsed or refractory diffuse and transformed large B-cell lymphoma (R/R DLBCL). DLBCL and cell of origin (GCB versus non-GCB) will be histologically determined by the most recent local pathology assessment for the purposes of study eligibility and stratification. The following subtypes of DLBCL are eligible for enrollment: a. Not otherwise specified (NOS) b. Intravascular large B-cell lymphoma c. DLBCL associated with chronic inflammation d. EBV-positive NOS e. ALK-positive f. T-cell-/histiocyte-rich large B-cell lymphoma g. Primary mediastinal large B-cell lymphoma h. High-grade B-cell lymphoma with translocations of MYC and BCL2 and/or BCL6 (double-/triple-hit lymphoma) i. High-grade NOS B-cell lymphomas j. Primary cutaneous DLBCL (leg type) k. DLBCL arising from transformed indolent lymphomas/leukemias

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diaphragm, or cervical cap (see Appendix C), beginning 4 weeks prior to initiating treatment with lenalidomide, during therapy, during dose interruptions, and continuing for 12 months following discontinuation of study drug (brentuximab vedotin, rituximab, or lenalidomide). Two negative beta human chorionic gonadotropin (-HCG) pregnancy tests must be obtained prior to initiating therapy. The first test must be a serum -HCG pregnancy test and the second test can either be a serum or urine -HCG pregnancy test. The first test should be performed within 10 to 14 days and the second test performed within 24 hours prior to receiving lenalidomide therapy. Afterwards, a serum -HCG pregnancy test must be administered weekly during the first month, then at least monthly thereafter in females with regular menstrual cycles or every 2 weeks in participants with irregular menstrual cycles. b. Must agree not to try to become pregnant during the study and for at least 12 months after the final dose of study drug. c. Must agree not to breastfeed or donate ova, starting at time of informed consent and continuing through 12 months after the final dose of study drug. d. If sexually active in a way that could lead to pregnancy, must consistently use 2 methods of birth control as described in Inclusion criterion 9a, starting at time of informed consent and continuing throughout the study and for at least 12 months after the final dose of study drug

Exclusion criteria

History of another malignancy within 2 years before the first dose of study drug or any evidence of residual disease from a previously diagnosed malignancy. Exceptions are malignancies with a negligible risk of metastasis or death (eg, 5-year OS 90%), such as carcinoma in situ of the cervix, non-melanoma skin carcinoma, localized prostate cancer, ductal carcinoma in situ, or Stage I uterine cancer. Participants with previous allogeneic HSCT if they meet either of the following criteria: <100 days from HSCT. Active acute or chronic graft-versus-host disease (GVHD) or receiving immunosuppressive therapy as treatment for or prophylaxis against GVHD. Previous treatment with brentuximab vedotin or lenalidomide. a. Previous treatment with other vedotin-based ADCs is permitted if the last dose is at least 6 months prior to Day 1. Current therapy with immunosuppressive medications (including steroids), other systemic anti-neoplastic, or investigational agents. a. Prednisone (or equivalent) 10 mg/day may be used for non-lymphomatous purposes. Documented history of a cerebral vascular event (stroke or transient ischemic attack), unstable angina, myocardial infarction, pulmonary embolism, or cardiac symptoms consistent with New York Heart Association (NYHA) Class III-IV within 6 months prior to the first dose of study drugs. Congestive heart failure, Class III or IV, by the NYHA criteria (see Appendix D). Grade 2 or higher peripheral sensory or motor neuropathy at baseline. Other serious underlying medical condition that, in the opinion of the investigator, would impair the subjects' ability to receive or tolerate the planned treatment, and complete study assessments. History of progressive multifocal leukoencephalopathy (PML). Active cerebral/meningeal disease related to the underlying malignancy. Participants with a history of cerebral/meningeal disease related to the underlying malignancy are allowed if prior CNS disease has been effectively treated and without progression for at least 3 months. Any uncontrolled Grade 3 or higher (per NCI CTCAE version 5.0) viral, bacterial, or fungal infection within 2 weeks prior to the first dose of study drug. Routine antimicrobial prophylaxis is permitted. Chemotherapy, radiotherapy, biologics, and/or other antitumor treatment with immunotherapy that is not completed 3 weeks prior to first dose of study drug, unless underlying disease has progressed on treatment. Participants who are breastfeeding. Known hypersensitivity to any study drug or excipient contained in the drug formulation of the study drugs. Any contraindication to associated study treatments. Known to be positive for hepatitis B by surface antigen expression. Participants who are hepatitis B surface antigen (HBsAg) negative but hepatitis B core antibody (HBcAb) positive are eligible, but should start hepatitis B prophylaxis therapy prior to receiving the first dose of rituximab. Known to be positive for hepatitis C (HCV) infection (either confirmed positive by polymerase chain reaction [PCR] or on antiviral therapy for hepatitis C within the last 6 months). Participants who have been treated for hepatitis C infection are permitted if they have documented sustained virologic response of 12 weeks.

Calendar

(Last Update: 11/06/2026)

Authorization 21/01/2021	Start of Trial 25/03/2021	First patient inclusion 16/06/2021	Halted Not aported	Restarted Not aported
End of recruitment 23/11/2023	Premature end (Spain) Not aported	Premature End (Global) Not aported	Trial end (Spain) 12/03/2026	Trial end (Global) Not aported

Sponsor

Seagen Inc. United States

21823 30th Drive Southeast

Contact Person

Clinical Medical Lead

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ClinicalTrials.gov@pfizer.com

Monetary support: N/A

Sponsor type: Commercial

Ceim

CEIm Hospital Universitario 12 de Octubre

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Sites

Closed (09/08/2024)	CLINICA UNIVERSIDAD DE NAVARRA Pamplona/Iruña NAVARRA	Complejo Hospitalario Infanta Leonor Madrid MADRID
Closed (07/08/2025)	HOSPITAL CLINICO UNIVERSITARIO DE SALAMANCA (COMPLEJO ASISTENCIAL UNIV.SA) Salamanca SALAMANCA	HOSPITAL COSTA DEL SOL Marbella MÁLAGA
Closed (08/04/2026)	HOSPITAL DE LA SANTA CREU I SANT PAU Barcelona BARCELONA	Hospital De La Santa Creu I Sant Pau Barcelona BARCELONA AGDAC
Closed (05/11/2025)	Hospital Del Mar Barcelona BARCELONA Hematology department	HOSPITAL SAN PEDRO DE ALCANTARA Cáceres CÁCERES

Closed (12/01/2024)

HOSPITAL UNIVERSITARI VALL D'HEBRON

Barcelona

BARCELONA

Closed (30/11/2023)

HOSPITAL UNIVERSITARIO CENTRAL DE ASTURIAS

Oviedo

ASTURIAS

Closed (18/01/2024)

HOSPITAL UNIVERSITARIO DE NAVARRA

Pamplona/Iruña

NAVARRA

Closed (03/09/2025)

HOSPITAL UNIVERSITARIO FUNDACION JIMENEZ DIAZ

Madrid

MADRID

Closed (04/09/2025)

HOSPITAL UNIVERSITARIO LA PAZ

Madrid

MADRID

Closed (09/02/2024)

HOSPITAL UNIVERSITARIO PUERTA DE HIERRO MAJADAHONDA

Majadahonda

MADRID

Closed (01/09/2025)

HOSPITAL UNIVERSITARIO QUIRONSAUD MADRID

Pozuelo de Alarcón

MADRID

Closed (27/06/2023)

Hospital Universitario Regional De Malaga

Málaga

MÁLAGA

Closed (05/10/2022)

Hospital Universitario Virgen Del Rocio

Sevilla

SEVILLA

Closed (06/02/2024)

HOSPITAL UNIVERSITARIO 12 DE OCTUBRE

Madrid

MADRID

Closed (06/02/2024)

Hospital Universitario 12 De Octubre

Madrid

MADRID

Medical Oncology Department

Closed (04/06/2025)

Institut Catala D'oncologia

Hospitalet de Llobregat, L'

BARCELONA

Closed (05/09/2024)

Institut Catala D'oncologia

Badalona

BARCELONA

Medication

-
-
SUBCUTANEOUS INJECTION

ATC code: L01XC02 - RITUXIMAB

Active Principles: N/A

Experimental

Revlimid 5 mg hard capsules

CAPSULE, HARD

ORAL

ATC code: L04AX04 - LENALIDOMIDA

Active Principles: N/A

Orphan

Experimental

BRENTUXIMAB VEDOTIN

POWDER FOR CONCENTRATE FOR SOLUTION FOR
INFUSION

SUBCUTANEOUS INJECTION

-
Active Principles: N/A

Experimental

No results