

A phase 3 multicenter, randomised, prospective, open-label trial of fixed-duration (12 cycles) venetoclax/ obinutuzumab vs. fixed-duration (15 cycles) venetoclax/ pirtobrutinib vs. MRD-guided venetoclax/ pirtobrutinib in patients with previously untreated chronic lymphocytic leukaemia (CLL)/ small lymphocytic lymphoma (SLL) aiming to establish measurement of individual residual disease for adjustment of treatment duration to improve outcomes (CLL18/ MOIRAI)

Estado	Tipo de Participantes	Rangos de Edad
Reclutando	No aportado	Mayores de 64 , Adultos (18-64 años)
Género	Fases	Participantes esperados
Ambos	Fase III	67
Resultados	Bajo nivel intervención	Enfermedad rara
Sin resultados	No	Si
Cobertura geográfica	Ámbitos del ensayo	Terapia avanzada
Sin determinar	eficacia	NO

Información

Identificador

2023-510294-34-00 (CTIS)

Cod. Protocolo

CLL18/MOIRAI

Área terapéutica

Enfermedades [C] - Cáncer [C04]

Enfermedad investigada

small lymphocytic lymphoma (SLL)
chronic lymphocytic leukemia (CLL)

Título Científico

A phase 3 multicenter, randomised, prospective, open-label trial of fixed-duration (12 cycles) venetoclax/obinutuzumab vs. fixed-duration (15 cycles) venetoclax/ pirtobrutinib vs. MRD-guided venetoclax/ pirtobrutinib in patients with previously untreated chronic lymphocytic leukaemia (CLL)/ small lymphocytic lymphoma (SLL) aiming to establish measurement of individual residual disease for adjustment of treatment duration to improve outcomes (CLL18/MOIRAI)

Justificación

No aportado

Objetivo Principal

The primary objective of the study is to compare the efficacy of MRD-guided Venetoclax/Pirtobrutinib vs fixed-duration (15 cycles) Venetoclax/Pirtobrutinib and MRD-guided Venetoclax/Pirtobrutinib vs. fixed-duration (12 cycles) Venetoclax/Obinutuzumab by measuring progression-free survival (PFS) in patients with previously untreated chronic lymphocytic leukaemia (CLL)/small lymphocytic lymphoma (SLL).

Variables de Evaluación Primaria

Progression-free survival (PFS)

Momentos temporales de evaluación primaria

No aportado

Objetivo Secundario

To evaluate MRD levels by different types of measurement from different materials at the final restaging (three months after end of treatment) and at selected other time points
Overall response rate (ORR) as assessed by iwCLL guidelines at the final restaging (three months after end of treatment) and at selected other time points
Complete response (CR) rate as assessed by iwCLL guidelines at the final restaging (three months after end of treatment) and at selected other time points
Duration of response (DOR) as assessed by iwCLL guidelines
Time to next treatment (TTNT)
Treatment-free survival (TFS)
Overall survival (OS)
Safety and tolerability of MRD-guided Ven-Pirto, fixed-duration Ven-Pirto, and fixed-duration Ven-Obi
Best response as assessed by iwCLL guidelines until one year after end of treatment

Variables de Evaluación Secundaria

Measurable residual disease (MRD) levels by different types of measurement from different materials at final

restaging (performed 3 months after end of treatment in all patients - except for patients that show progression of CLL disease or Richter transformation before this point of time - which differs depending on the duration of treatment) and selected other time points during and after treatment

Overall response rate (ORR) and complete response (CR) rate at the final restaging and selected other time points

Duration of response (DOR)

Time to next treatment (TTNT)

Treatment-free survival (TFS)

Overall survival (OS)

Safety parameters: Type, frequency and severity of - adverse events (AEs) -adverse events of particular interest (AEPI)

Best response assessed until 1 year after end of treatment

Momentos temporales de evaluación secundaria

No aportado

Criterios de Inclusión

Documented CLL/SLL requiring treatment according to iwCLL criteria with a CLL phenotype cell count $>10^2$ tracked by flow cytometry at screening. Adequate bone marrow function as indicated by: - an absolute neutrophil count $1 \times 10^9/l$ - a hemoglobin value 8.0 g/dL without transfusions during the last 7 days unless directly attributable to CLL/SLL (e.g. bone marrow infiltration) and - a platelet count $25 \times 10^9/l$ unless due to the CLL/SLL, in this case, platelet count should be 10.000/ μl without transfusion during the last 7 days. Adequate renal function, as indicated by a creatinine clearance 30ml/min calculated according to the MDRD-formula or an equally accurate method (e.g. 24 hr. urine collection) Adequate liver function as indicated by: - a total bilirubin 2 x the institutional upper limit of normal (ULN) value, and - AST/ ALT 2.5 x the institutional ULN value, unless directly attributable to the patients CLL/SLL or to Gilberts Syndrome. Negative serological testing for hepatitis B (HBsAg negative and anti-HBc negative; patients positive for anti-HBc may be included if PCR for HBV DNA is negative and HBV-DNA PCR is performed every month until 12 months after last dosage of obinutuzumab), negative testing for hepatitis-C (HCV-RNA PCR) and negative HIV test within 6 weeks prior to registration Age 18 years Eastern Cooperative Oncology Group Performance Status (ECOG) performance status Life expectancy 6 months Ability and willingness to provide written informed consent and to adhere to the study visit schedule and other protocol requirements.

Criterios de Exclusión

Any prior CLL- or SLL-specific therapies, except for corticosteroid treatment administered due to necessary immediate intervention (within the last 10 days before start of study treatment only dose equivalents up to 20 mg prednisolone per day are permitted). Fertile men or women of childbearing potential unless: - surgically sterile or 2 years after the onset of menopause, or - willing to use two methods of reliable contraception including one highly effective (Pearl Index <1) and one additional effective (barrier) method during study treatment and for the required time period thereafter (at least one and up to 18 months after end of study treatment depending of study drug(s) used, see chapter 2.2.2.1 Known risks relevant with all study drugs). Vaccination with a live vaccine 28 days prior to registration Use of investigational agents which might interfere with the study drug within 28 days prior to registration Legal incapacity Prisoners or subjects who are institutionalized by regulatory or court order Persons who are in dependence to the sponsor or an investigator Decompensated auto-immune cytopenia (defined as ongoing drop in hemoglobin (AIHA) or in platelets (ITP) in spite of prednisolone and/or intravenous immunoglobulins treatment). (Suspicion of) transformation of CLL/SLL (i.e. Richter's transformation) or central nervous system (CNS) involvement. (Suspicion of) progressive multifocal leukoencephalopathy (PML). Malignant neoplasm other than CLL/SLL unless in remission and unlikely to adversely impact on patient's life expectancy, defined as curatively

treated non-melanoma skin cancer or other neoplasias treated curatively 1 year ago, without signs of progression and not currently requiring systemic therapies (with the exception of ongoing anti-hormonal therapy). Active infection requiring systemic treatment, including HIV, HBV and HCV Increased risk of bleeding, e.g. due to: - known bleeding disorder - anticoagulant therapy with phenprocoumon or other vitamin K antagonists (anticoagulation with a direct oral Xa or thrombin inhibitor (DOAC) or heparin) is permitted) - major surgery 4 weeks prior to randomization - stroke or intracranial hemorrhage 6 months of randomization Any comorbidity or organ system impairment rated with a CIRS (cumulative illness rating scale) score of 4 or any other life-threatening illness, medical condition or organ system dysfunction that in the investigator's opinion - could compromise the patient's safety or interfere with the absorption or metabolism of the study drugs (e.g, inability to swallow tablets or impaired resorption in the gastrointestinal tract) Pregnant women and nursing mothers (a negative pregnancy test is required for all women of childbearing potential within 7 days before start of treatment)

Calendario

(Última actualización: 13/07/2026)

Autorización 28/03/2025	Inicio de Ensayo 28/11/2025	Inclusión Primer Paciente 15/12/2025	Interrumpido No aportado	Reiniciado No aportado
Fin de reclutamiento No aportado	Fin prematuro (España) No aportado	Fin prematuro (Global) No aportado	Fin del ensayo en España No aportado	Fin del ensayo global No aportado

Promotor

University Of Cologne Germany

Albertus-Magnus-Platz 1

Contact Person

Paula Cramer

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Monetary support: N/A

Tipo de promotor: Comercial

Ceim

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Centros

No iniciado (---/---/----)	Complejo Hospitalario Universitario De Santiago Santiago De Compostela CORUÑA Hematology
Activo (29/04/2026)	El Hospital Universitario De Gran Canaria Dr. Negrin Las Palmas De Gran Canaria LAS PALMAS Hematology
No iniciado (---/---/----)	Hospital Alvaro Cunqueiro Vigo PONTEVEDRA Hematology
Activo (18/02/2026)	Hospital Clinic De Barcelona Barcelona BARCELONA Hematology
Activo (04/12/2025)	Hospital Clinico Universitario De Valencia Valencia VALENCIA Oncology and Hematology
Activo (08/07/2026)	Hospital Clinico Universitario Lozano Blesa Zaragoza ZARAGOZA Hematology
Activo (01/12/2025)	Hospital Costa Del Sol Marbella MÁLAGA Hematology and Haemotherapy
Activo (28/05/2026)	Hospital De La Santa Creu I Sant Pau Barcelona BARCELONA Hematology

Activo (04/02/2026)

Hospital Del Mar

Barcelona

BARCELONA

Hematology

Activo (23/12/2025)

Hospital General Universitario Dr. Balmis

Alicante

ALICANTE

Hematology

No iniciado (---/---/----)

Hospital Universitari Vall D Hebron

Barcelona

BARCELONA

Hematology

Activo (04/02/2026)

Hospital Universitario Central De Asturias

Oviedo

ASTURIAS

Hematology

Activo (01/07/2026)

Hospital Universitario De La Princesa

Madrid

MADRID

Hematology

No iniciado (---/---/----)

Hospital Universitario De Salamanca

Salamanca

SALAMANCA

Hematology

Activo (05/05/2026)

Hospital Universitario Donostia

Donostia

GUIPÚZCOA

Hematology

Activo (15/01/2026)

Hospital Universitario Infanta Leonor

Madrid

MADRID

Hematology and Hemotherapy

No iniciado (---/---/----)

Hospital Universitario La Paz

Madrid

MADRID

Hematology

Activo (23/01/2026)

Hospital Universitario Marques De Valdecilla

Santander

CANTABRIA

Hematology

Activo (28/11/2025)

Hospital Universitario Regional De Malaga

Malaga

MÁLAGA

Hematology

No iniciado (---/---/----)

Hospital Universitario Reina Sofia

Cordoba

CÓRDOBA

Hematology

Activo (08/05/2026)

Hospital Universitario Virgen De Valme

Sevilla

SEVILLA

Hematology and Hemotherapy

Activo (12/01/2026)

Hospital Universitario 12 De Octubre

Madrid

MADRID

Clinical Hematology

No iniciado (---/---/----)

Institut Catala D'´oncologia

Badalona

BARCELONA

Hematology

Activo (01/07/2026)

Institut Catala D'´oncologia

L'hospitalet De Llobregat

BARCELONA

Hematology

Activo (27/05/2026)

University Clinical Hospital Virgen De
La Arrixaca

Murcia

MURCIA

Hematology and Hemotherapy

Medicamentos

Venetoclax

FILM-COATED TABLET
ORAL USE

-

Principios Activos: N/A

Experimental

Venetoclax

FILM-COATED TABLET
ORAL USE

-

Principios Activos: N/A

Experimental

PIRTOBRUTINIB

FILM-COATED TABLET
ORAL USE

-

Principios Activos: N/A

Experimental

Gazyvaro 1,000 mg concentrate for solution for infusion.

SOLUTION FOR INFUSION
INTRAVENOUS USE

Código ATC: L01XC15 - OBINUTUZUMAB

Principios Activos: N/A

Experimental

Venetoclax

FILM-COATED TABLET
ORAL USE

-

Principios Activos: N/A

Experimental

Sin resultados

A phase 3 multicenter, randomised, prospective, open-label trial of fixed-duration (12 cycles) venetoclax/ obinutuzumab vs. fixed-duration (15 cycles) venetoclax/ pirtobrutinib vs. MRD-guided venetoclax/ pirtobrutinib in patients with previously untreated chronic lymphocytic leukaemia (CLL)/ small lymphocytic lymphoma (SLL) aiming to establish measurement of individual residual disease for adjustment of treatment duration to improve outcomes (CLL18/ MOIRAI)

State Recruiting	Type of participants Not provided	Age Ranges Older than 64 , Adults (18-64 years)
Gender Both	Phases Phase III	Expected Participants 67
Results No results	Low level of intervention No	Rare disease Yes
Geographic coverage Undetermined	Areas of the study effectiveness	Advanced therapy NO

Information

Identifier

2023-510294-34-00 (CTIS)

Protocol Code

CLL18/MOIRAI

Therapeutic area

Diseases [C] - Cancer [C04]

Investigated Disease

small lymphocytic lymphoma (SLL)
chronic lymphocytic leukemia (CLL)

Scientific Title

A phase 3 multicenter, randomised, prospective, open-label trial of fixed-duration (12 cycles) venetoclax/obinutuzumab vs. fixed-duration (15 cycles) venetoclax/ pirtobrutinib vs. MRD-guided venetoclax/ pirtobrutinib in patients with previously untreated chronic lymphocytic leukaemia (CLL)/ small lymphocytic lymphoma (SLL) aiming to establish measurement of individual residual disease for adjustment of treatment duration to improve outcomes (CLL18/MOIRAI)

Rationale

Not provided

Main Objective

The primary objective of the study is to compare the efficacy of MRD-guided Venetoclax/Pirtobrutinib vs fixed-duration (15 cycles) Venetoclax/Pirtobrutinib and MRD-guided Venetoclax/Pirtobrutinib vs. fixed-duration (12 cycles) Venetoclax/Obinutuzumab by measuring progression-free survival (PFS) in patients with previously untreated chronic lymphocytic leukaemia (CLL)/small lymphocytic lymphoma (SLL).

Primary Endpoints

Progression-free survival (PFS)

Temporary moments of secondary assessment

Not provided

Secondary Objective

To evaluate MRD levels by different types of measurement from different materials at the final restaging (three months after end of treatment) and at selected other time points
Overall response rate (ORR) as assessed by iwCLL guidelines at the final restaging (three months after end of treatment) and at selected other time points
Complete response (CR) rate as assessed by iwCLL guidelines at the final restaging (three months after end of treatment) and at selected other time points
Duration of response (DOR) as assessed by iwCLL guidelines
Time to next treatment (TTNT)
Treatment-free survival (TFS)
Overall survival (OS)
Safety and tolerability of MRD-guided Ven-Pirto, fixed-duration Ven-Pirto, and fixed-duration Ven-Obi
Best response as assessed by iwCLL guidelines until one year after end of treatment

Secondary Endpoints

Measurable residual disease (MRD) levels by different types of measurement from different materials at final

restaging (performed 3 months after end of treatment in all patients - except for patients that show progression of CLL disease or Richter transformation before this point of time - which differs depending on the duration of treatment) and selected other time points during and after treatment

Overall response rate (ORR) and complete response (CR) rate at the final restaging and selected other time points

Duration of response (DOR)

Time to next treatment (TTNT)

Treatment-free survival (TFS)

Overall survival (OS)

Safety parameters: Type, frequency and severity of - adverse events (AEs) -adverse events of particular interest (AEPI)

Best response assessed until 1 year after end of treatment

Temporary moments of secondary assessment

Not provided

Inclusion criteria

Documented CLL/SLL requiring treatment according to iwCLL criteria with a CLL phenotype cell count $>10 \times 10^9$ tracked by flow cytometry at screening. Adequate bone marrow function as indicated by: - an absolute neutrophil count 1×10^9 /l - a hemoglobin value 8.0 g/dL without transfusions during the last 7 days unless directly attributable to CLL/SLL (e.g. bone marrow infiltration) and - a platelet count 25×10^9 /l unless due to the CLL/SLL, in this case, platelet count should be 10.000/ μ l without transfusion during the last 7 days. Adequate renal function, as indicated by a creatinine clearance 30ml/min calculated according to the MDRD-formula or an equally accurate method (e.g. 24 hr. urine collection) Adequate liver function as indicated by: - a total bilirubin 2 x the institutional upper limit of normal (ULN) value, and - AST/ ALT 2.5 x the institutional ULN value, unless directly attributable to the patients CLL/SLL or to Gilberts Syndrome. Negative serological testing for hepatitis B (HBsAg negative and anti-HBc negative; patients positive for anti-HBc may be included if PCR for HBV DNA is negative and HBV-DNA PCR is performed every month until 12 months after last dosage of obinutuzumab), negative testing for hepatitis-C (HCV-RNA PCR) and negative HIV test within 6 weeks prior to registration Age 18 years Eastern Cooperative Oncology Group Performance Status (ECOG) performance status Life expectancy 6 months Ability and willingness to provide written informed consent and to adhere to the study visit schedule and other protocol requirements.

Exclusion criteria

Any prior CLL- or SLL-specific therapies, except for corticosteroid treatment administered due to necessary immediate intervention (within the last 10 days before start of study treatment only dose equivalents up to 20 mg prednisolone per day are permitted). Fertile men or women of childbearing potential unless: - surgically sterile or 2 years after the onset of menopause, or - willing to use two methods of reliable contraception including one highly effective (Pearl Index <1) and one additional effective (barrier) method during study treatment and for the required time period thereafter (at least one and up to 18 months after end of study treatment depending of study drug(s) used, see chapter 2.2.2.1 Known risks relevant with all study drugs). Vaccination with a live vaccine 28 days prior to registration Use of investigational agents which might interfere with the study drug within 28 days prior to registration Legal incapacity Prisoners or subjects who are institutionalized by regulatory or court order Persons who are in dependence to the sponsor or an investigator Decompensated auto-immune cytopenia (defined as ongoing drop in hemoglobin (AIHA) or in platelets (ITP) in spite of prednisolone and/or intravenous immunoglobulins treatment). (Suspicion of) transformation of CLL/SLL (i.e. Richter's transformation) or central nervous system (CNS) involvement. (Suspicion of) progressive multifocal leukoencephalopathy (PML). Malignant neoplasm other than CLL/SLL unless in remission and unlikely to adversely impact on patient's life expectancy, defined as curatively

treated non-melanoma skin cancer or other neoplasias treated curatively 1 year ago, without signs of progression and not currently requiring systemic therapies (with the exception of ongoing anti-hormonal therapy). Active infection requiring systemic treatment, including HIV, HBV and HCV Increased risk of bleeding, e.g. due to: - known bleeding disorder - anticoagulant therapy with phenprocoumon or other vitamin K antagonists (anticoagulation with a direct oral Xa or thrombin inhibitor (DOAC) or heparin is permitted) - major surgery 4 weeks prior to randomization - stroke or intracranial hemorrhage 6 months of randomization Any comorbidity or organ system impairment rated with a CIRS (cumulative illness rating scale) score of 4 or any other life-threatening illness, medical condition or organ system dysfunction that in the investigator's opinion - could compromise the patient's safety or interfere with the absorption or metabolism of the study drugs (e.g, inability to swallow tablets or impaired resorption in the gastrointestinal tract) Pregnant women and nursing mothers (a negative pregnancy test is required for all women of childbearing potential within 7 days before start of treatment)

Calendar

(Last Update: 13/07/2026)

Authorization 28/03/2025	Start of Trial 28/11/2025	First patient inclusion 15/12/2025	Halted Not aported	Restarted Not aported
End of recruitment Not aported	Premature end (Spain) Not aported	Premature End (Global) Not aported	Trial end (Spain) Not aported	Trial end (Global) Not aported

Sponsor

University Of Cologne Germany

Albertus-Magnus-Platz 1

Contact Person

Paula Cramer

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cII-18@uk-koeln.de

Monetary support: N/A

Sponsor type: Commercial

Ceim

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Sites

not initialized (---/---/----)	Complejo Hospitalario Universitario De Santiago Santiago De Compostela CORUÑA Hematology
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Active (04/02/2026)

Hospital Del Mar
Barcelona
BARCELONA
Hematology

Active (23/12/2025)

Hospital General Universitario Dr. Balmis
Alicante
ALICANTE
Hematology

not initialized (---/---/----)

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Barcelona
BARCELONA
Hematology

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Hospital Universitario Central De Asturias
Oviedo
ASTURIAS
Hematology

Active (01/07/2026)

Hospital Universitario De La Princesa
Madrid
MADRID
Hematology

not initialized (---/---/----)

Hospital Universitario De Salamanca
Salamanca
SALAMANCA
Hematology

Active (05/05/2026)

Hospital Universitario Donostia
Donostia
GUIPÚZCOA
Hematology

Active (15/01/2026)

Hospital Universitario Infanta Leonor
Madrid
MADRID
Hematology and Hemotherapy

not initialized (---/---/----)

Hospital Universitario La Paz
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MADRID
Hematology

Active (23/01/2026)

Hospital Universitario Marques De Valdecilla
Santander
CANTABRIA
Hematology

Active (28/11/2025)

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Malaga
MÁLAGA
Hematology

not initialized (---/---/----)

Hospital Universitario Reina Sofia
Cordoba
CÓRDOBA
Hematology

Active (08/05/2026)

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Sevilla
SEVILLA
Hematology and Hemotherapy

Active (12/01/2026)

Hospital Universitario 12 De Octubre
Madrid
MADRID
Clinical Hematology

not initialized (---/---/----)

Institut Catala D'´oncologia
Badalona
BARCELONA
Hematology

Active (01/07/2026)

Institut Catala D'´oncologia
L'hospitalet De Llobregat
BARCELONA
Hematology

Active (27/05/2026)

University Clinical Hospital Virgen De
La Arrixaca

Murcia

MURCIA

Hematology and Hemotherapy

Medication

Venetoclax

FILM-COATED TABLET
ORAL USE

-

Active Principles: N/A

Experimental

Venetoclax

FILM-COATED TABLET
ORAL USE

-

Active Principles: N/A

Experimental

PIRTOBRUTINIB

FILM-COATED TABLET
ORAL USE

-

Active Principles: N/A

Experimental

Gazyvaro 1,000 mg concentrate for solution for infusion.

SOLUTION FOR INFUSION
INTRAVENOUS USE

ATC code: L01XC15 - OBINUTUZUMAB

Active Principles: N/A

Experimental

Venetoclax

FILM-COATED TABLET
ORAL USE

-

Active Principles: N/A

Experimental

No results