

Multicentric phase II trial to evaluate the efficacy and safety of Ibrutinib in combination with rituximab in patients with indolent clinical forms of Mantle Cell Lymphoma.

Estado
Fin Reclutamiento

Tipo de Participantes
No aportado

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

Género
Ambos

Fases
Fase II

Participantes esperados
50

Resultados
Sin resultados

Bajo nivel intervención
No

Enfermedad rara
No

Cobertura geográfica
Sin determinar

Ámbitos del ensayo
seguridad, eficacia

Terapia avanzada
NO

Información

Identificador
2024-512370-94-00 (CTIS)

Cod. Protocolo
GELTAMO-IMCL-2015

Transicionado 2015-004158-17

Área terapéutica
Enfermedades [C] - Cáncer [C04]

Enfermedad investigada
Mantle Cell Lymphoma

Título Científico
Multicentric phase II trial to evaluate the efficacy and safety of Ibrutinib in combination with rituximab in patients with indolent clinical forms of Mantle Cell Lymphoma.

Justificación

No aportado

Objetivo Principal

To explore the efficacy of I+R combination as a therapeutic alternative to immuno-chemotherapy (R-CHOP regimen) in indolent forms of MCL by assessing the rate of complete responses achieved at 12 months of treatment.

Variables de Evaluación Primaria

Rate of complete remission (CR) achieved at 12 months of I+R combination.

Momentos temporales de evaluación primaria

No aportado

Objetivo Secundario

To evaluate the efficacy of I+R combination along time in terms of secondary endpoints (ORR at 12 months, PFS, response duration, OS, MRD analysis)
To determine the safety and tolerability of ibrutinib in combination with rituximab (including evaluation of health-related quality of life (QOL))
Biological characterization of indolent forms of MCL and their response to I+R by genomic studies

Variables de Evaluación Secundaria

To determine the overall response rate (ORR) at 12 months, Progression free survival (PFS), duration of response (DOR) and overall survival (OS).
To determine the rate of negative minimal residual disease (MRD), the time to obtain a molecular response and the median duration of the molecular response in I+R responding patients.
Rates of AEs, SAEs, and SUSARs by CTC grade (Version 4.03) during I+R treatment
To assess the health-related quality of life (QOL) during treatment.
Genomic studies in indolent clinical forms of MCL (IGHV mutational status, DNA copy-number and whole exome sequencing)

Momentos temporales de evaluación secundaria

No aportado

Criterios de Inclusión

Subjects with confirmed diagnosis of Mantle Cell Lymphoma (World Health Organization Classification, WHO 2008). Classical, small-cell variants and marginal-zone variants can be included. Stable disease without evidence of clinical progression criteria for at least 3 months. Patients in prolonged therapeutic abstention may be included. Women of childbearing potential and men who are sexually active must be practicing a highly effective method of birth control during and after the study consistent with local regulations regarding the use of birth control methods for subjects participating in clinical trials. Men must agree to not donate sperm during and after the study. For females, these restrictions apply for 1 month after the last dose of study drug. For males, these restrictions apply for 3 months after the last dose of study drug. Women of childbearing potential must have a negative serum (beta-human chorionic gonadotropin [β -hCG]) or urine pregnancy test at Screening. Women who are pregnant or breastfeeding are ineligible for this study. Sign (or their legally-acceptable representatives must sign) an informed consent document indicating that they understand the purpose of and procedures required for the study, including biomarkers, and are willing to participate in the study. Age 18 years or older. Subjects must not have received any prior therapies (excluding diagnostic splenectomy). Asymptomatic patients. Ann Arbor clinical stages I-IV. Eastern Cooperative Oncology Group (ECOG) performance status ≤ 2 (0-1). Subjects with a non-nodal MCL presentation with mainly bone marrow or peripheral blood involvement. Other asymptomatic clinical presentations are acceptable in case of low tumor burden, including nodal MCL with lymph node enlargement 3 cm in the maximum diameter and with low proliferation index (Ki-67 $\leq 30\%$). The following laboratory values at screening: Neutrophil count $1 \times 10^9/L$, Hemoglobin level 100 g/L or platelet count $100 \times 10^9/L$ Transaminases (AST and ALT) $3 \times ULN$ Total bilirubin $1.5 \times ULN$ unless bilirubin rise is due to Gilberts syndrome or of non-hepatic origin Creatinine $2 \times ULN$ or calculated creatinine clearance 40 mL/min/1.73m²

Criterios de Exclusión

Aggressive histological variants: blastic and pleomorphic variants (blastoid). Known CNS infiltration. Subjects with expected therapy requirement for MCL in a short time (< 3 months). Patients with active hepatitis B or C infection or HIV infection. Positive test results for chronic HBV infection (defined as positive HBsAg serology) or positive test results for hepatitis C (hepatitis C virus [HCV] antibody serology testing) will be excluded with the following exceptions. Patients with occult or prior HBV infection (defined as negative HBsAg and positive total HBcAb) may be included if HBV DNA is undetectable, provided that they are willing to undergo monthly DNA testing or antiviral prophylaxis. Patients who have protective titers of hepatitis B surface antibody (HBsAb) after vaccination or prior but cured hepatitis B are eligible. Patients positive for HCV antibody are eligible only if PCR is negative for HCV RNA. Anticoagulation requirement with vitamin K antagonists. Past medical history of stroke or intracranial haemorrhage within 6 months prior to inclusion Required medication with strong CYP3A4/5 inhibitors. Any serious comorbidity that makes the patient unacceptable for receiving the treatment Concomitant or previous malignancies the last 2 years other than basal skin cancer or in situ uterine cervix cancer. Pregnancy or lactation. Major surgery within 4 weeks of inclusion. Proliferation index measured by Ki-67 $> 30\%$. Clinically significant cardiovascular disease such as uncontrolled or symptomatic arrhythmias, congestive heart failure, or myocardial infarction within 6 months of Screening, or any Class 3 (moderate) or Class 4 (severe) cardiac disease as defined by the New York Heart Association Functional Classification. Vaccinated with live, attenuated vaccines within 4 weeks of randomization. Uncontrolled systemic infection requiring intravenous (IV) antibiotics. Any life-threatening illness, medical condition, or organ system dysfunction which, in the investigators opinion, could compromise the subjects safety, interfere with the absorption or metabolism of ibrutinib capsules, or put the study outcomes at undue risk. B-cell monoclonal lymphocytosis with MCL phenotype. Eastern Cooperative Oncology Group (ECOG) performance status 2. Presence of B symptoms or any relevant symptoms related to the MCL. Nodal clinical forms with lymph node enlargement > 3 cm (maximum diameter). Cytopenias attributable to MCL: Neutrophil count $< 1 \times 10^9/L$, Hemoglobin level < 100 g/L or platelet count $< 100 \times 10^9/L$. Organ dysfunction related to MCL including creatinine level $> 2 ULN$ or altered liver biochemistry ($> 3 \times ULN$). Gradual increase in different determinations of serum LDH attributable to MCL that exceeds 20% of the ULN.

Calendario

(Última actualización: 12/12/2025)

Autorización 15/02/2016	Inicio de Ensayo 18/05/2016	Inclusión Primer Paciente 26/05/2016	Interrumpido No aportado	Reiniciado No aportado
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Fin de reclutamiento 10/12/2019	Fin prematuro (España) No aportado	Fin prematuro (Global) No aportado	Fin del ensayo en España No aportado	Fin del ensayo global No aportado
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Promotor

Fundacion Geltamo Spain

Avenida Valdecilla Sn

Contact Person

A person designed by the Sponsor

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Monetary support: N/A

Tipo de promotor: Comercial

Ceim

CEIm Hospital Clinic de Barcelona

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Centros

Activo (08/06/2017)	CENTRO ONCOLÓGICO MD ANDERSON INTERNATIONAL ESPAÑA MADRID MADRID
Activo (08/06/2017)	COMPLEJO ASISTENCIAL UNIVERSITARIO DE BURGOS BURGOS BURGOS
Activo (08/06/2017)	COMPLEJO ASISTENCIAL UNIVERSITARIO DE SALAMANCA SALAMANCA SALAMANCA
No iniciado (--)	Fundacio Assistencial De Mutua De Terrassa Fpc Terrassa BARCELONA Oncology
Activo (08/06/2017)	Hospital Clínic i Provincial de Barcelona BARCELONA BARCELONA
Activo (08/06/2017)	HOSPITAL CLÍNICO UNIVERSITARIO DE VALENCIA VALENCIA VALENCIA
Activo (08/06/2017)	HOSPITAL COSTA DEL SOL MARBELLA
Cerrado (10/12/2021)	Hospital de la Santa Creu i Sant Pau BARCELONA BARCELONA

Cerrado (27/10/2021)

HOSPITAL GENERAL UNIVERSITARIO SANTA LUCIA

CARTAGENA

MURCIA

Activo (08/06/2017)

HOSPITAL RAMÓN Y CAJAL

MADRID

MADRID

Activo (08/06/2017)

Hospital Universitari Mútua de Terrassa

TERRASSA

BARCELONA

Activo (08/06/2017)

Hospital Universitari Vall d'Hebron

BARCELONA

BARCELONA

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

Hospital Universitario De Burgos

Burgos

BURGOS

Oncology

Cerrado (14/12/2021)

HOSPITAL UNIVERSITARIO FUNDACIÓN ALCORCÓN

ALCORCÓN

MADRID

Activo (08/06/2017)

HOSPITAL UNIVERSITARIO 12 DE OCTUBRE

MADRID

MADRID

Activo (08/06/2017)

HOSPITAL VIRGEN DEL ROCÍO

SEVILLA

SEVILLA

Activo (08/06/2017)

Institut Catala D'oncologia

HOSPITALET DE LLOBREGAT (L')

BARCELONA

Medicamentos

MabThera 100 mg concentrate for solution for infusionSOLUTION FOR INFUSION
INTRAVENOUS

Código ATC: L01XC02 - RITUXIMAB

Principios Activos: N/A

Experimental

IMBRUVICA 140 mg hard capsulesCAPSULE, HARD
ORAL

Código ATC: L01EL01 - IBRUTINIB

Principios Activos: N/A

Experimental

Sin resultados

Multicentric phase II trial to evaluate the efficacy and safety of Ibrutinib in combination with rituximab in patients with indolent clinical forms of Mantle Cell Lymphoma.

State
End of recruitment

Type of participants
Not provided

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

Gender
Both

Phases
Phase II

Expected Participants
50

Results
No results

Low level of intervention
No

Rare disease
No

Geographic coverage
Undetermined

Areas of the study
safety, effectiveness

Advanced therapy
NO

Information

Identifier
2024-512370-94-00 (CTIS)

Protocol Code
GELTAMO-IMCL-2015

Transitioned 2015-004158-17

Therapeutic area
Diseases [C] - Cancer [C04]

Investigated Disease
Mantle Cell Lymphoma

Scientific Title
Multicentric phase II trial to evaluate the efficacy and safety of Ibrutinib in combination with rituximab in patients with indolent clinical forms of Mantle Cell Lymphoma.

Rationale

Not provided

Main Objective

To explore the efficacy of I+R combination as a therapeutic alternative to immuno-chemotherapy (R-CHOP regimen) in indolent forms of MCL by assessing the rate of complete responses achieved at 12 months of treatment.

Primary Endpoints

Rate of complete remission (CR) achieved at 12 months of I+R combination.

Temporary moments of secondary assessment

Not provided

Secondary Objective

To evaluate the efficacy of I+R combination along time in terms of secondary endpoints (ORR at 12 months, PFS, response duration, OS, MRD analysis)

To determine the safety and tolerability of ibrutinib in combination with rituximab (including evaluation of health-related quality of life (QOL))

Biological characterization of indolent forms of MCL and their response to I+R by genomic studies

Secondary Endpoints

To determine the overall response rate (ORR) at 12 months, Progression free survival (PFS), duration of response (DOR) and overall survival (OS).

To determine the rate of negative minimal residual disease (MRD), the time to obtain a molecular response and the median duration of the molecular response in I+R responding patients.

Rates of AEs, SAEs, and SUSARs by CTC grade (Version 4.03) during I+R treatment

To assess the health-related quality of life (QOL) during treatment.

Genomic studies in indolent clinical forms of MCL (IGHV mutational status, DNA copy-number and whole exome sequencing)

Temporary moments of secondary assessment

Not provided

Inclusion criteria

Subjects with confirmed diagnosis of Mantle Cell Lymphoma (World Health Organization Classification, WHO 2008). Classical, small-cell variants and marginal-zone variants can be included. Stable disease without evidence of clinical progression criteria for at least 3 months. Patients in prolonged therapeutic abstention may be included. Women of childbearing potential and men who are sexually active must be practicing a highly effective method of birth control during and after the study consistent with local regulations regarding the use of birth control methods for subjects participating in clinical trials. Men must agree to not donate sperm during and after the study. For females, these restrictions apply for 1 month after the last dose of study drug. For males, these restrictions apply for 3 months after the last dose of study drug. Women of childbearing potential must have a negative serum (beta-human chorionic gonadotropin [β -hCG]) or urine pregnancy test at Screening. Women who are pregnant or breastfeeding are ineligible for this study. Sign (or their legally-acceptable representatives must sign) an informed consent document indicating that they understand the purpose of and procedures required for the study, including biomarkers, and are willing to participate in the study. Age 18 years or older. Subjects must not have received any prior therapies (excluding diagnostic splenectomy). Asymptomatic patients. Ann Arbor clinical stages I-IV. Eastern Cooperative Oncology Group (ECOG) performance status ≤ 2 (0-1). Subjects with a non-nodal MCL presentation with mainly bone marrow or peripheral blood involvement. Other asymptomatic clinical presentations are acceptable in case of low tumor burden, including nodal MCL with lymph node enlargement 3 cm in the maximum diameter and with low proliferation index (Ki-67 $\leq 30\%$). The following laboratory values at screening: Neutrophil count $1 \times 10^9/L$, Hemoglobin level 100 g/L or platelet count $100 \times 10^9/L$ Transaminases (AST and ALT) $3 \times ULN$ Total bilirubin $1.5 \times ULN$ unless bilirubin rise is due to Gilberts syndrome or of non-hepatic origin Creatinine $2 \times ULN$ or calculated creatinine clearance 40 mL/min/1.73m²

Exclusion criteria

Aggressive histological variants: blastic and pleomorphic variants (blastoid). Known CNS infiltration. Subjects with expected therapy requirement for MCL in a short time (< 3 months). Patients with active hepatitis B or C infection or HIV infection. Positive test results for chronic HBV infection (defined as positive HBsAg serology) or positive test results for hepatitis C (hepatitis C virus [HCV] antibody serology testing) will be excluded with the following exceptions. Patients with occult or prior HBV infection (defined as negative HBsAg and positive total HBcAb) may be included if HBV DNA is undetectable, provided that they are willing to undergo monthly DNA testing or antiviral prophylaxis. Patients who have protective titers of hepatitis B surface antibody (HBsAb) after vaccination or prior but cured hepatitis B are eligible. Patients positive for HCV antibody are eligible only if PCR is negative for HCV RNA. Anticoagulation requirement with vitamin K antagonists. Past medical history of stroke or intracranial haemorrhage within 6 months prior to inclusion Required medication with strong CYP3A4/5 inhibitors. Any serious comorbidity that makes the patient unacceptable for receiving the treatment Concomitant or previous malignancies the last 2 years other than basal skin cancer or in situ uterine cervix cancer. Pregnancy or lactation. Major surgery within 4 weeks of inclusion. Proliferation index measured by Ki-67 $> 30\%$. Clinically significant cardiovascular disease such as uncontrolled or symptomatic arrhythmias, congestive heart failure, or myocardial infarction within 6 months of Screening, or any Class 3 (moderate) or Class 4 (severe) cardiac disease as defined by the New York Heart Association Functional Classification. Vaccinated with live, attenuated vaccines within 4 weeks of randomization. Uncontrolled systemic infection requiring intravenous (IV) antibiotics. Any life-threatening illness, medical condition, or organ system dysfunction which, in the investigators opinion, could compromise the subjects safety, interfere with the absorption or metabolism of ibrutinib capsules, or put the study outcomes at undue risk. B-cell monoclonal lymphocytosis with MCL phenotype. Eastern Cooperative Oncology Group (ECOG) performance status 2. Presence of B symptoms or any relevant symptoms related to the MCL. Nodal clinical forms with lymph node enlargement > 3 cm (maximum diameter). Cytopenias attributable to MCL: Neutrophil count $< 1 \times 10^9/L$, Hemoglobin level < 100 g/L or platelet count $< 100 \times 10^9/L$. Organ dysfunction related to MCL including creatinine level $> 2 ULN$ or altered liver biochemistry ($> 3 \times ULN$). Gradual increase in different determinations of serum LDH attributable to MCL that exceeds 20% of the ULN.

Calendar

(Last Update: 12/12/2025)

Authorization 15/02/2016	Start of Trial 18/05/2016	First patient inclusion 26/05/2016	Halted Not aported	Restarted Not aported
End of recruitment 10/12/2019	Premature end (Spain) Not aported	Premature End (Global) Not aported	Trial end (Spain) Not aported	Trial end (Global) Not aported

Sponsor

Fundacion Geltamo Spain

Avenida Valdecilla Sn

Contact Person

A person designed by the Sponsor

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Monetary support: N/A

Sponsor type: Commercial

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Sites

Active (08/06/2017)	CENTRO ONCOLÓGICO MD ANDERSON INTERNATIONAL ESPAÑA
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Active (08/06/2017)	COMPLEJO ASISTENCIAL UNIVERSITARIO DE BURGOS
	BURGOS BURGOS
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	SALAMANCA SALAMANCA
not initialized (---/---/---)	Fundacio Assistencial De Mutua De Terrassa Fpc
	Terrassa BARCELONA Oncology
Active (08/06/2017)	Hospital Clínic i Provincial de Barcelona
	BARCELONA BARCELONA
Active (08/06/2017)	HOSPITAL CLÍNICO UNIVERSITARIO DE VALENCIA
	VALENCIA VALENCIA
Active (08/06/2017)	HOSPITAL COSTA DEL SOL
	MARBELLA
Closed (10/12/2021)	Hospital de la Santa Creu i Sant Pau
	BARCELONA BARCELONA

Closed (27/10/2021)	HOSPITAL GENERAL UNIVERSITARIO SANTA LUCIA CARTAGENA MURCIA
Active (08/06/2017)	HOSPITAL RAMÓN Y CAJAL MADRID MADRID
Active (08/06/2017)	Hospital Universitari Mútua de Terrassa TERRASSA BARCELONA
Active (08/06/2017)	Hospital Universitari Vall d'Hebron BARCELONA BARCELONA
not initialized (---/---/----)	Hospital Universitario De Burgos Burgos BURGOS Oncology
Closed (14/12/2021)	HOSPITAL UNIVERSITARIO FUNDACIÓN ALCORCÓN ALCORCÓN MADRID
Active (08/06/2017)	HOSPITAL UNIVERSITARIO 12 DE OCTUBRE MADRID MADRID
Active (08/06/2017)	HOSPITAL VIRGEN DEL ROCÍO SEVILLA SEVILLA

Active (08/06/2017)

Institut Catala D'oncologia

HOSPITALET DE LLOBREGAT (L')

BARCELONA

Medication

MabThera 100 mg concentrate for solution for infusion

SOLUTION FOR INFUSION

INTRAVENOUS

ATC code: L01XC02 - RITUXIMAB

Active Principles: N/A

Experimental

IMBRUVICA 140 mg hard capsules

CAPSULE, HARD

ORAL

ATC code: L01EL01 - IBRUTINIB

Active Principles: N/A

Experimental

No results