Response-adaptive to Epcoritamab In FIrst Relapse: A Phase II, response-adaptive, Open-Label, Multicenter Study to Evaluate the Efficacy of Eptoritamab in Patients with Relapse/Refractory Large B Cell Lymphoma

Estado	**Tipo de Participantes**	**Rangos de Edad**
Reclutando	No aportado	Mayores de 64 , Adultos (18-64 años)
Género	**Fases**	**Participantes esperados**
Ambos	Fase II	80
Resultados	**Bajo nivel intervención**	**Enfermedad rara**
Sin resultados	No	No
Cobertura geográfica	**Ámbitos del ensayo**	**Terapia avanzada**
Sin determinar	tratamiento	NO

Información

Identificador
2024-514440-86-00 (CTIS)

Cod. Protocolo
REPIFIR-AGR-GEL-23

Área terapéutica
Enfermedades [C] - Hematología [C15]|

Enfermedad investigada
Relapse/Refractory Large B Cell Lymphoma

Título Científico
Response-adaptive to Epcoritamab In FIrst Relapse: A Phase II, response-adaptive, Open-Label, Multicenter Study to Evaluate the Efficacy of Eptoritamab in Patients with Relapse/Refractory Large B Cell Lymphoma

Justificación

No aportado

Objetivo Principal

The primary objective of the study is to evaluate the efficacy of Epcoritamab monotherapy by central evaluation as second line treatment for LBCL patients

Variables de Evaluación Primaria

The efficacy of Epcoritamab monotherapy will be centrally evaluated by the best CRR at any moment since initiation. The CRR will be assessed by PET-CT according to Lugano Classification (Appendix 3) and is defined as the proportion of patients who achieve a best response of complete response (CR) at any moment since initiation of Epcoritamab first administration

Momentos temporales de evaluación primaria

No aportado

Objetivo Secundario

To evaluate the efficacy of Epcoritamab monotherapy by central evaluation as second line treatment for LBCL patients after 3 cycles of administration.
To further evaluate the efficacy (local and central evaluation) of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide as second line treatment for LBCL patients adapted to early response by evaluating the CRR, ORR, DoR, Duration of complete response (DoCR) and survival endpoints
To further evaluate the efficacy of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide in second line treatment for LBCL patients adapted to early response assessed by MRD ctDNA during the first 12 complete cycles of treatment (monotherapy or combination) and cycles 18/24 (epcoritamab monotherapy) or cycles 21/27 (combination therapy)
To assess the impact of negative MRD before cycle 3 of Epcoritamab monotherapy in relation to PFS, OS, and DoR
To evaluate the safety and tolerability of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide when administered as second line treatment for LBCL patients adapted to early response

Variables de Evaluación Secundaria

The efficacy of Epcoritamab monotherapy will be centrally evaluated by the best CRR, defined as the proportion of patients who achieve a best response of CR after 3 cycles of Epcoritamab administration
The efficacy of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide will be evaluated by local investigators and central evaluation as per CRR (locally evaluated for Epcoritamab monotherapy; local and central evaluation for combination therapy), ORR, DoR, DoCR, Event-free survival (EFS), PFS and OS at any time
The efficacy of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide will be evaluated by MRD (positive or negative) from ctDNA samples immediately before initiation of C3, C4, C7, C10, C12, C13, C15,

End of Treatment (EoT) and cycles 18/24 (epcoritamab monotherapy) or cycles 21/27 (combination therapy).
The PFS, OS and DoR of patients with negative MRD at Visit 3 (V3) (immediately before administrating C3 of Epcoritamab monotherapy), as previously defined in this section
The safety and tolerability of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide are evaluated as follows: Type, frequency, and severity of adverse events

Momentos temporales de evaluación secundaria

No aportado

Criterios de Inclusión

Written informed consent must be obtained before any study-specific assessment is performed. Female patients of child-bearing potential must have a negative urine or serum pregnancy test at screening and agree to use highly effective methods of contraception (e.g., established use of oral, injected or implanted combined (estradiol and progesterone containing) hormonal contraception; placement of an intrauterine device (IUD) or intrauterine system (IUS) upon enrollment according to the recommendations provided by Clinical Trial Facilitation Group (CTFG), during the treatment period and for 4 months after the last dose of study medication. Moreover, the patient must agree to ongoing pregnancy testing during the course of the study, and after study therapy has ended. This applies even if the patient practices complete and continued sexual abstinence. Male patients must use a reliable method of contraception (if sexually active with a female of child-bearing potential) upon enrollment according to the recommendations provided by CTFG, during the treatment period, and for 4 months following the last dose of investigational drug or agreement to remain abstinent. Agreement to refrain from donating blood or sperm during the study participation and for 4 months after the last dose of study medication Women must agree not to donate blood or oocytes during the course of the study and for 4 months after the last dose of study medication. Restrictions concerning blood donation apply as well to females who are not of childbearing potential. Men must also not donate sperm during the trial and for 4 months after receiving the last dose of study drug. Females of childbearing potential must refrain from breastfeeding during the course of the study and for 4 months after the last dose of study medication Willingness and ability to comply with scheduled visits, treatment plans, laboratory tests, and other study procedures Not included in other clinical trial or treated with an experimental drug Age >18 years Patients with Relapse/Refractory histologically confirmed LBCL, including, Diffuse Large B Cell Lymphoma (DLBCL); Primary Mediastinal Large B Cell Lymphoma (PMBCL), High-grade B-cell lymphoma (HGBCL); and grade 3B Follicular Lymphoma Patients must have received adequate first-line therapy including at a minimum: an anti-CD20 monoclonal antibody (rituximab or obinutuzumab), and CHOP (cyclophosphamide, hydroxydaunomycin, oncovin, and prednisone) or CHOP-like chemotherapy At the investigator's discretion, the patient should not be a candidate for 1st relapse CAR-T therapy or unwilling to receive CAR-T therapy Patients must be autologous stem cell transplantation (ASCT)-ineligible: Age 65 and/or HTC-CI 3 or or unwilling to receive transplant PET positive disease Performance status according to Eastern Cooperative Oncology Group (ECOG) 0 to 2. Patients meeting with the following hematology values: Hemoglobin 8 g/dl (transfusion support permitted but not within 7 days of screening lab collection); Absolute neutrophil count (ANC) 1 X 10E9/L (growth factor support allowed in case of bone marrow involvement); Absolute lymphocyte count 0.1 x 10E9/L; Platelet count 70 x 10E9/L (unless secondary to bone marrow involvement, OR 50 x 10E9/L if documented bone marrow involvement). Platelet transfusions permitted but not within 7 days of screening lab collection.

Criterios de Exclusión

Patients who received more than one prior line of systemic therapy Presence of severe infection that is uncontrolled or requiring IV antimicrobials for management History of HIV infection or acute or chronic active hepatitis B or C infection. Individuals with positive HIV serology may be included if negative viral load and CD4 >200/mm3. For being

included, patients should have controlled disease and been on treatment for at least 1 year. Individuals with history of hepatitis infection with positive antibodies (anti-HB and anti-HV) might be included if negative viral load (negative hepatitis B PCR). Patients who are HBcAb positive must receive HBV prophylaxis while on treatment. Patients with positive HbsAg are excluded. Patients who are hepatitis B PCR positive will be excluded. Patients who are hepatitis C RNA positive will be excluded. Females who are pregnant or breastfeeding Richters transformation or prior chronic lymphocytic leukemia (CLL). Treatment with radiotherapy, chemotherapy, immunotherapy, immunosuppressive therapy, or any investigational agent for the purposes of treating cancer within 4 weeks prior to Cycle 1 Day 1 Recent major surgery (within 4 weeks before the start of Cycle 1 Day 1) other than for diagnosis Vaccination with a live vaccine or COVID-19 vaccination within 4 weeks prior to treatment History of hypersensitivity to any of the study drugs or their ingredients or to drugs with similar structure. History of severe allergic or anaphylactic reactions to human, humanized, chimeric, or murine monoclonal antibodies Close affiliation with the investigator (e.g. a close relative) or persons working at the study site Patients with detectable Central Nervous System (CNS) lymphoma Significant organ function impairment: creatinine clearance calculated by Cockcroft-Gault 45 ml/min; direct bilirubin level < 2 x ULN (except in patients with Gilberts syndrome); alanine transaminase (ALT) and aspartate aminotransferase (AST) >3 × ULN or >5 × ULN in cases of documented liver involvement; clinically relevant pleural effusion; left ventricular ejection fraction (LVEF) 45% Serious accompanying disorder leading to impaired organ function causing significant clinical problems and reduced life expectancy of less than 3 months Have a history of deep venous thrombosis/embolism, threatening thromboembolism or known thrombophilia or are at a high risk for a thromboembolic event in the opinion of the investigator and who are not willing/able to take venous thromboembolic event prophylaxis during the entire treatment period Known clinically significant cardiac disease, including: Onset of unstable angina pectoris within 6 months of signing the patient informed consent form; Acute myocardial infarction within 6 months of signing the patient informed consent form; Congestive heart failure (grade III or IV as classified by the New York Heart Association; Left ventricular ejection fraction 45%. Known past or current malignancy other than inclusion diagnosis, except for: Cervical carcinoma of Stage 1B or less; Non-invasive basal cell or squamous cell skin carcinoma; Non-invasive, superficial bladder cancer; Localized low grade prostate cancer (up to Gleason score 6); DCIS of the breast; Other malignancy that has been treated with curative intent and has remained in remission for 3 years Previous ASCT Prior anti-CD3 and CD20 bispecific antibodies therapy or prior treatment with tafasitamab.

Calendario

(Última actualización: 08/07/2026)

Autorización	Inicio de Ensayo	Inclusión Primer Paciente	Interrumpido	Reiniciado
14/05/2025	04/08/2025	04/08/2025	No aportado	No aportado

Fin de reclutamiento	Fin prematuro (España)	Fin prematuro (Global)	Fin del ensayo en España	Fin del ensayo global
No aportado	No aportado	No aportado	No aportado	No aportado

Promotor

Fundacion Geltamo Spain

Avenida Valdecilla Sn

Contact Person

Ana María Méndez López

942203450

administracion@geltamo.com

Monetary support: N/A

Tipo de promotor: Comercial

Ceim

CEIm Hospital General Universitario Gregorio Marañón

C/ Doctor Esquerdo, 46 28007 Madrid

ceim.hgugm@salud.madrid.org

915867007

Centros

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

Complejo Asistencial Universitario De Salamanca

Salamanca

SALAMANCA

Hematology

Activo (28/10/2025)

Hospital Costa Del Sol

Marbella

MÁLAGA

Hematology

Activo (27/06/2025)

Hospital General Universitario Gregorio Maranon

Madrid

MADRID

Hematology

Activo (22/07/2025)

Hospital San Pedro De Alcantara

Caceres

CÁCERES

Hematology

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

Hospital Universitari Son Espases

Palma

BALEARES

Hematology

Activo (17/07/2025)

Hospital Universitari Vall D Hebron

Barcelona

BARCELONA

Hematology

Activo (15/09/2025)

Hospital Universitario Basurto

Bilbao

VIZCAYA/BIZKAIA

Hematology

Activo (09/10/2025)

Hospital Universitario Central De Asturias

Oviedo

ASTURIAS

Hematology

Activo (16/07/2025)

Hospital Universitario De Burgos

Burgos

BURGOS

Hematology

Activo (23/09/2025)

Hospital Universitario De Canarias

San Cristobal De La Laguna

STA. CRUZ DE TENERIFE

Hematology

Activo (17/09/2025)

Hospital Universitario Dr Peset Aleixandre

Valencia

VALENCIA

Hematology

Activo (12/11/2025)

Hospital Universitario Fundacion Jimenez Diaz

Madrid

MADRID

Hematology

Activo (17/09/2025)

Hospital Universitario Infanta Leonor

Madrid

MADRID

Hematology

Activo (07/08/2025)

Hospital Universitario Miguel Servet

Zaragoza

ZARAGOZA

Hematology

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

Hospital Universitario Virgen del Rocio

Sevilla

SEVILLA

Hematology

Activo (20/10/2025)

Hospital Universitario Y Politecnico La Fe

Valencia

VALENCIA

Hematology

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

Hospital Universitario 12 De Octubre

Madrid

MADRID

Hematology

Activo (07/10/2025)

Institut Catala D´oncologia

Badalona

BARCELONA

Hematology

Activo (10/12/2025)

University Clinical Hospital Virgen De La Arrixaca

Murcia

MURCIA

Hematology

Medicamentos

Revlimid 25 mg hard capsules
CAPSULE, HARD
ORAL

Código ATC: L04AX04 - LENALIDOMIDA
Principios Activos: N/A
Huérfano Experimental

Revlimid 25 mg hard capsules
CAPSULE, HARD
ORAL

Código ATC: L04AX04 - LENALIDOMIDA
Principios Activos: N/A
Huérfano Experimental

MINJUVI 200 mg powder for concentrate for solution for infusion
SOLUTION FOR INFUSION
INFUSION

Código ATC: L01FX12 - TAFASITAMAB
Principios Activos: N/A
Huérfano Experimental

Epcoritamab (GEN3013)
SOLUTION FOR INJECTION
SUBCUTANEOUS INJECTION

-
Principios Activos: N/A
Huérfano Experimental

Epcoritamab (GEN3013)
SOLUTION FOR INJECTION
SUBCUTANEOUS INJECTION

-
Principios Activos: N/A
Huérfano Experimental

Revlimid 25 mg hard capsules
CAPSULE, HARD
ORAL

Código ATC: L04AX04 - LENALIDOMIDA
Principios Activos: N/A
Huérfano Experimental

Revlimid 25 mg hard capsules
CAPSULE, HARD
ORAL

Código ATC: L04AX04 - LENALIDOMIDA
Principios Activos: N/A
Huérfano Experimental

Sin resultados

Response-adaptive to Epcoritamab In FIrst Relapse: A Phase II, response-adaptive, Open-Label, Multicenter Study to Evaluate the Efficacy of Eptoritamab in Patients with Relapse/Refractory Large B Cell Lymphoma

State	**Type of participants**	**Age Ranges**
Recruiting	Not provided	Older than 64 , Adults (18-64 years)
Gender	**Phases**	**Expected Participants**
Both	Phase II	80
Results	**Low level of intervention**	**Rare disease**
No results	No	No
Geographic coverage	**Areas of the study**	**Advanced therapy**
Undetermined	treatment	NO

Information

Identifier
2024-514440-86-00 (CTIS)

Protocol Code
REPIFIR-AGR-GEL-23

Therapeutic area
Diseases [C] - Hemic and Lymphatic Diseases [C15]|

Investigated Disease
Relapse/Refractory Large B Cell Lymphoma

Scientific Title
Response-adaptive to Epcoritamab In FIrst Relapse: A Phase II, response-adaptive, Open-Label, Multicenter Study to Evaluate the Efficacy of Eptoritamab in Patients with Relapse/Refractory Large B Cell Lymphoma

Rationale

Not provided

Main Objective

The primary objective of the study is to evaluate the efficacy of Epcoritamab monotherapy by central evaluation as second line treatment for LBCL patients

Primary Endpoints

The efficacy of Epcoritamab monotherapy will be centrally evaluated by the best CRR at any moment since initiation. The CRR will be assessed by PET-CT according to Lugano Classification (Appendix 3) and is defined as the proportion of patients who achieve a best response of complete response (CR) at any moment since initiation of Epcoritamab first administration

Temporary moments of secondary assessment

Not provided

Secondary Objective

To evaluate the efficacy of Epcoritamab monotherapy by central evaluation as second line treatment for LBCL patients after 3 cycles of administration.
To further evaluate the efficacy (local and central evaluation) of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide as second line treatment for LBCL patients adapted to early response by evaluating the CRR, ORR, DoR, Duration of complete response (DoCR) and survival endpoints
To further evaluate the efficacy of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide in second line treatment for LBCL patients adapted to early response assessed by MRD ctDNA during the first 12 complete cycles of treatment (monotherapy or combination) and cycles 18/24 (epcoritamab monotherapy) or cycles 21/27 (combination therapy)
To assess the impact of negative MRD before cycle 3 of Epcoritamab monotherapy in relation to PFS, OS, and DoR
To evaluate the safety and tolerability of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide when administered as second line treatment for LBCL patients adapted to early response

Secondary Endpoints

The efficacy of Epcoritamab monotherapy will be centrally evaluated by the best CRR, defined as the proportion of patients who achieve a best response of CR after 3 cycles of Epcoritamab administration
The efficacy of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide will be evaluated by local investigators and central evaluation as per CRR (locally evaluated for Epcoritamab monotherapy; local and central evaluation for combination therapy), ORR, DoR, DoCR, Event-free survival (EFS), PFS and OS at any time
The efficacy of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide will be evaluated by MRD (positive or negative) from ctDNA samples immediately before initiation of C3, C4, C7, C10, C12, C13, C15,

End of Treatment (EoT) and cycles 18/24 (epcoritamab monotherapy) or cycles 21/27 (combination therapy).
The PFS, OS and DoR of patients with negative MRD at Visit 3 (V3) (immediately before administrating C3 of Epcoritamab monotherapy), as previously defined in this section
The safety and tolerability of Epcoritamab monotherapy and combination therapy with tafasitamab-lenalidomide are evaluated as follows: Type, frequency, and severity of adverse events

Temporary moments of secondary assessment

Not provided

Inclusion criteria

Written informed consent must be obtained before any study-specific assessment is performed. Female patients of child-bearing potential must have a negative urine or serum pregnancy test at screening and agree to use highly effective methods of contraception (e.g., established use of oral, injected or implanted combined (estradiol and progesterone containing) hormonal contraception; placement of an intrauterine device (IUD) or intrauterine system (IUS) upon enrollment according to the recommendations provided by Clinical Trial Facilitation Group (CTFG), during the treatment period and for 4 months after the last dose of study medication. Moreover, the patient must agree to ongoing pregnancy testing during the course of the study, and after study therapy has ended. This applies even if the patient practices complete and continued sexual abstinence. Male patients must use a reliable method of contraception (if sexually active with a female of child-bearing potential) upon enrollment according to the recommendations provided by CTFG, during the treatment period, and for 4 months following the last dose of investigational drug or agreement to remain abstinent. Agreement to refrain from donating blood or sperm during the study participation and for 4 months after the last dose of study medication Women must agree not to donate blood or oocytes during the course of the study and for 4 months after the last dose of study medication. Restrictions concerning blood donation apply as well to females who are not of childbearing potential. Men must also not donate sperm during the trial and for 4 months after receiving the last dose of study drug. Females of childbearing potential must refrain from breastfeeding during the course of the study and for 4 months after the last dose of study medication Willingness and ability to comply with scheduled visits, treatment plans, laboratory tests, and other study procedures Not included in other clinical trial or treated with an experimental drug Age >18 years Patients with Relapse/Refractory histologically confirmed LBCL, including, Diffuse Large B Cell Lymphoma (DLBCL); Primary Mediastinal Large B Cell Lymphoma (PMBCL), High-grade B-cell lymphoma (HGBCL); and grade 3B Follicular Lymphoma Patients must have received adequate first-line therapy including at a minimum: an anti-CD20 monoclonal antibody (rituximab or obinutuzumab), and CHOP (cyclophosphamide, hydroxydaunomycin, oncovin, and prednisone) or CHOP-like chemotherapy At the investigator's discretion, the patient should not be a candidate for 1st relapse CAR-T therapy or unwilling to receive CAR-T therapy Patients must be autologous stem cell transplantation (ASCT)-ineligible: Age 65 and/or HTC-CI 3 or or unwilling to receive transplant PET positive disease Performance status according to Eastern Cooperative Oncology Group (ECOG) 0 to 2. Patients meeting with the following hematology values: Hemoglobin 8 g/dl (transfusion support permitted but not within 7 days of screening lab collection); Absolute neutrophil count (ANC) 1 X 10E9/L (growth factor support allowed in case of bone marrow involvement); Absolute lymphocyte count 0.1 x 10E9/L; Platelet count 70 x 10E9/L (unless secondary to bone marrow involvement, OR 50 x 10E9/L if documented bone marrow involvement). Platelet transfusions permitted but not within 7 days of screening lab collection.

Exclusion criteria

Patients who received more than one prior line of systemic therapy Presence of severe infection that is uncontrolled or requiring IV antimicrobials for management History of HIV infection or acute or chronic active hepatitis B or C infection. Individuals with positive HIV serology may be included if negative viral load and CD4 >200/mm3. For being

included, patients should have controlled disease and been on treatment for at least 1 year. Individuals with history of hepatitis infection with positive antibodies (anti-HB and anti-HV) might be included if negative viral load (negative hepatitis B PCR). Patients who are HBcAb positive must receive HBV prophylaxis while on treatment. Patients with positive HbsAg are excluded. Patients who are hepatitis B PCR positive will be excluded. Patients who are hepatitis C RNA positive will be excluded. Females who are pregnant or breastfeeding Richters transformation or prior chronic lymphocytic leukemia (CLL). Treatment with radiotherapy, chemotherapy, immunotherapy, immunosuppressive therapy, or any investigational agent for the purposes of treating cancer within 4 weeks prior to Cycle 1 Day 1 Recent major surgery (within 4 weeks before the start of Cycle 1 Day 1) other than for diagnosis Vaccination with a live vaccine or COVID-19 vaccination within 4 weeks prior to treatment History of hypersensitivity to any of the study drugs or their ingredients or to drugs with similar structure. History of severe allergic or anaphylactic reactions to human, humanized, chimeric, or murine monoclonal antibodies Close affiliation with the investigator (e.g. a close relative) or persons working at the study site Patients with detectable Central Nervous System (CNS) lymphoma Significant organ function impairment: creatinine clearance calculated by Cockcroft-Gault 45 ml/min; direct bilirubin level < 2 x ULN (except in patients with Gilberts syndrome); alanine transaminase (ALT) and aspartate aminotransferase (AST) >3 × ULN or >5 × ULN in cases of documented liver involvement; clinically relevant pleural effusion; left ventricular ejection fraction (LVEF) 45% Serious accompanying disorder leading to impaired organ function causing significant clinical problems and reduced life expectancy of less than 3 months Have a history of deep venous thrombosis/embolism, threatening thromboembolism or known thrombophilia or are at a high risk for a thromboembolic event in the opinion of the investigator and who are not willing/able to take venous thromboembolic event prophylaxis during the entire treatment period Known clinically significant cardiac disease, including: Onset of unstable angina pectoris within 6 months of signing the patient informed consent form; Acute myocardial infarction within 6 months of signing the patient informed consent form; Congestive heart failure (grade III or IV as classified by the New York Heart Association; Left ventricular ejection fraction 45%. Known past or current malignancy other than inclusion diagnosis, except for: Cervical carcinoma of Stage 1B or less; Non-invasive basal cell or squamous cell skin carcinoma; Non-invasive, superficial bladder cancer; Localized low grade prostate cancer (up to Gleason score 6); DCIS of the breast; Other malignancy that has been treated with curative intent and has remained in remission for 3 years Previous ASCT Prior anti-CD3 and CD20 bispecific antibodies therapy or prior treatment with tafasitamab.

Calendar

(Last Update: 08/07/2026)

Authorization	Start of Trial	First patient inclusion	Halted	Restarted
14/05/2025	04/08/2025	04/08/2025	Not aported	Not aported

End of recruitment	Premature end (Spain)	Premature End (Global)	Trial end (Spain)	Trial end (Global)
Not aported	Not aported	Not aported	Not aported	Not aported

Sponsor

Fundacion Geltamo Spain

Avenida Valdecilla Sn

Contact Person

Ana María Méndez López

942203450

administracion@geltamo.com

Monetary support: N/A

Sponsor type: Commercial

Ceim

CEIm Hospital General Universitario Gregorio Marañón

C/ Doctor Esquerdo, 46 28007 Madrid

ceim.hgugm@salud.madrid.org

915867007

Sites

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

Complejo Asistencial Universitario De Salamanca

Salamanca

SALAMANCA

Hematology

Active (28/10/2025)

Hospital Costa Del Sol

Marbella

MÁLAGA

Hematology

Active (27/06/2025)

Hospital General Universitario Gregorio Maranon

Madrid

MADRID

Hematology

Active (22/07/2025)

Hospital San Pedro De Alcantara

Caceres

CÁCERES

Hematology

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

Hospital Universitari Son Espases

Palma

BALEARES

Hematology

Active (17/07/2025)

Hospital Universitari Vall D Hebron

Barcelona

BARCELONA

Hematology

Active (15/09/2025)

Hospital Universitario Basurto

Bilbao

VIZCAYA/BIZKAIA

Hematology

Active (09/10/2025)

Hospital Universitario Central De Asturias

Oviedo

ASTURIAS

Hematology

Active (16/07/2025)

Hospital Universitario De Burgos

Burgos

BURGOS

Hematology

Active (23/09/2025)

Hospital Universitario De Canarias

San Cristobal De La Laguna

STA. CRUZ DE TENERIFE

Hematology

Active (17/09/2025)

Hospital Universitario Dr Peset Aleixandre

Valencia

VALENCIA

Hematology

Active (12/11/2025)

Hospital Universitario Fundacion Jimenez Diaz

Madrid

MADRID

Hematology

Active (17/09/2025)

Hospital Universitario Infanta Leonor

Madrid

MADRID

Hematology

Active (07/08/2025)

Hospital Universitario Miguel Servet

Zaragoza

ZARAGOZA

Hematology

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

Hospital Universitario Virgen del Rocio

Sevilla

SEVILLA

Hematology

Active (20/10/2025)

Hospital Universitario Y Politecnico La Fe

Valencia

VALENCIA

Hematology

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

Hospital Universitario 12 De Octubre

Madrid

MADRID

Hematology

Active (07/10/2025)

Institut Catala D´oncologia

Badalona

BARCELONA

Hematology

Active (10/12/2025)

University Clinical Hospital Virgen De La Arrixaca

Murcia

MURCIA

Hematology

Medication

Revlimid 25 mg hard capsules
CAPSULE, HARD
ORAL

ATC code: L04AX04 - LENALIDOMIDA
Active Principles: N/A
Orphan Experimental

Revlimid 25 mg hard capsules
CAPSULE, HARD
ORAL

ATC code: L04AX04 - LENALIDOMIDA
Active Principles: N/A
Orphan Experimental

MINJUVI 200 mg powder for concentrate for solution for infusion
SOLUTION FOR INFUSION
INFUSION

ATC code: L01FX12 - TAFASITAMAB
Active Principles: N/A
Orphan Experimental

Epcoritamab (GEN3013)
SOLUTION FOR INJECTION
SUBCUTANEOUS INJECTION

-
Active Principles: N/A
Orphan Experimental

Epcoritamab (GEN3013)
SOLUTION FOR INJECTION
SUBCUTANEOUS INJECTION

-
Active Principles: N/A
Orphan Experimental

Revlimid 25 mg hard capsules
CAPSULE, HARD
ORAL

ATC code: L04AX04 - LENALIDOMIDA
Active Principles: N/A
Orphan Experimental

Revlimid 25 mg hard capsules
CAPSULE, HARD
ORAL

ATC code: L04AX04 - LENALIDOMIDA
Active Principles: N/A
Orphan Experimental

No results