

A Study of ASTX030 (Cedazuridine in Combination with Azacitidine) in MDS, CMML, or AML

Estado	Tipo de Participantes	Rangos de Edad
Reclutando	No aportado	Mayores de 64 , Adultos (18-64 años)
Género	Fases	Participantes esperados
Ambos	Fase III	200
Resultados	Bajo nivel intervención	Enfermedad rara
Sin resultados	No	Si
Cobertura geográfica	Ámbitos del ensayo	Terapia avanzada
Sin determinar	tratamiento, seguridad, eficacia, farmacocinética, farmacodinamica, dosis	NO

Información

Identificador	Cod. Protocolo
2024-515098-93-00 (CTIS)	ASTX030-01

Área terapéutica

Enfermedades [C] - Hematología [C15]

Enfermedad investigada

Myelodysplastic Syndromes (MDS), Chronic Myelomonocytic Leukemia (CMML)

Título Científico

A Multi-phase, Dose-Escalation followed by an Open-label, Randomized, Crossover Study of Oral ASTX030 (Cedazuridine and Azacitidine Given in Combination) Versus Subcutaneous Azacitidine in Subjects with Myelodysplastic Syndromes (MDS), Chronic Myelomonocytic Leukemia (CMML), or Acute Myeloid Leukemia (AML)

Justificación

No aportado

Objetivo Principal

Establish azacitidine AUC equivalence (90% CI 0.8, 1.25) between the final selected dose of ASTX030 from Phase 2 using FDC and SC azacitidine at 75 mg/m²/day across BSA ranges

Variables de Evaluación Primaria

Ratio of azacitidine total cycle AUC 0-24 exposures after oral ASTX030 over SC azacitidine at 75 mg/m²/day

Momentos temporales de evaluación primaria

No aportado

Objetivo Secundario

Assess safety and tolerability of ASTX030
Evaluate changes in DNA methylation of ASTX030 compared to SC azacitidine
Assess clinical activity of ASTX030
Evaluate other PK parameters of azacitidine, cedazuridine, and cedazuridine-epimer

Variables de Evaluación Secundaria

1 TEAEs including SAEs
2 Percent LINE-1 demethylation change from baseline between SC azacitidine and ASTX030 in Cycles 1 and 2
3 Participants with MDS or CMML: - Clinical response rate - AML-free survival - Duration of response - OS - Time to response - Transfusion independence

Momentos temporales de evaluación secundaria

No aportado

Criterios de Inclusión

1. Must be 18 years 8. Able to swallow the number of capsules required within 10-mins and can tolerate 4 hours of fasting. 9. Life expectancy $\geq$ 12 weeks. 10. Follow contraceptive barrier requirements per protocol 11. Capable of giving legally effective informed consent. and willing to participate in the study. 2. Confirmed MDS or CMML and a

candidate to receive and benefit from single-agent azacitidine according to French-American-British myelodysplastic syndrome subtypes: or MDS with intermediate-2 or high risk MDS according to the IPSS (Greenberg P, et al. Blood. 1997;89:2079-2088) 3. ECOG 0 or 1 4. Adequate organ function : a. Total or direct bilirubin $2 \times$ ULN; AST/ SGOT and ALT/SGPT $2.5 \times$ ULN. b. Calculated CrCl >50 mL/min by Cockcroft-Gault formula or other medically acceptable formulas. 5. For participants with prior allogeneic stem cell transplant, has no evidence of graft vs host disease and must be 3 weeks off systemic immunosuppressive therapy before study start. 6. No major surgery within 3 weeks before treatment initiation. 7. No cytotoxic chemotherapy (excluding hydroxyurea) within 4 weeks before treatment initiation

Criterios de Exclusión

1. Active, uncontrolled gastric or duodenal ulcer. 4. Known positive for Hepatitis B or C infection with the exception of those with an undetectable viral load within 3 months of screening 5. Life-threatening illness, uncontrolled medical condition or organ system dysfunction, or other reasons that, could compromise the participant's safety, interfere with the absorption or metabolism of ASTX030, or the integrity of study outcomes. 6. History of other malignancies, except certain adequately treated and/or controlled cancers, or early-stage cases not requiring therapy. 7. Extramedullary disease in MDS/MPN, including palpable hepatomegaly or splenomegaly 8. Prior treatment with > 1 cycle of decitabine or azacitidine 9. Treated with any investigational therapy within 2 weeks, or 5 half-lives, whichever is longer, before treatment initiation , or has ongoing clinically significant AEs from previous treatment with investigational agent 10. Cannot discontinue treatment with drugs that delay gastric emptying (GLP-1 and/or GIP agonists in Cycles 1 & 2. 11. Known hypersensitivity to cedazuridine or azacitidine or any excipients. 2. Poor medical risk due to any uncontrolled systemic diseases or active uncontrolled bacterial, viral, or fungal infections. 3. Known HIV infection.

Calendario

(Última actualización: 25/05/2026)

Autorización 03/06/2025	Inicio de Ensayo 25/07/2025	Inclusión Primer Paciente 05/08/2025	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

Taiho Oncology Inc. United States

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Contact Person

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Monetary support: N/A

Tipo de promotor: Comercial

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Centros

No iniciado (--/--/----)	Clinica Universidad De Navarra Madrid MADRID Haematology	No iniciado (--/--/----)	Clinica Universidad De Navarra Pamplona NAVARRA Haematology
No iniciado (--/--/----)	Hospital Clinic De Barcelona Barcelona BARCELONA Haematology	No iniciado (--/--/----)	Hospital General Universitario Gregorio Maranon Madrid MADRID Haematology and haemotherapy
No iniciado (--/--/----)	Hospital Quironsalud Malaga Malaga MÁLAGA Haematology	No iniciado (--/--/----)	Hospital San Pedro De Alcantara Caceres CÁCERES Haematology
No iniciado (--/--/----)	Hospital Universitari De Girona Doctor Josep Trueta Girona GERONA Haematology and haemotherapy	No iniciado (--/--/----)	Hospital Universitari Vall D Hebron Barcelona BARCELONA Haematology

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

Hospital Universitario Central De Asturias

Oviedo

ASTURIAS

Haematology

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

Hospital Universitario De Salamanca

Salamanca

SALAMANCA

Haematology

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

Hospital Universitario La Paz

Madrid

MADRID

Haematology

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

Hospital Universitario Virgen De Las Nieves

Granada

GRANADA

Haematology

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

Hospital Universitario Y Politecnico La Fe

Valencia

VALENCIA

Haematology

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

Institut Catala D'´oncologia

Badalona

BARCELONA

Haematology

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

Institut Catala D'´oncologia

L'hospitalet De Llobregat

BARCELONA

Haematology

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

MD Anderson Cancer Center

Madrid

MADRID

Haematology

Medicamentos

Azacitidine, Cedazuridine

CAPSULE

ORAL

-

Principios Activos: N/A

Experimental

Vidaza 25 mg/ml powder for suspension for injection

SUSPENSION FOR INJECTION

SUBCUTANEOUS USE

Código ATC: L01BC07 - AZACITIDINA

Principios Activos: N/A

Experimental

Azacitidine, Cedazuridine

CAPSULE

ORAL

-

Principios Activos: N/A

Experimental

Azacitidine

CAPSULE

ORAL

-

Principios Activos: N/A

Experimental

Sin resultados

A Study of ASTX030 (Cedazuridine in Combination with Azacitidine) in MDS, CMML, or AML

State
Recruiting

Type of participants
Not provided

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

Gender
Both

Phases
Phase III

Expected Participants
200

Results
No results

Low level of intervention
No

Rare disease
Yes

Geographic coverage
Undetermined

Areas of the study
treatment, safety, effectiveness,
pharmacokinetics, pharmacodynamics, dose

Advanced therapy
NO

Information

Identifier
2024-515098-93-00 (CTIS)

Protocol Code
ASTX030-01

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

Investigated Disease
Myelodysplastic Syndromes (MDS), Chronic Myelomonocytic Leukemia (CMML)

Scientific Title
A Multi-phase, Dose-Escalation followed by an Open-label, Randomized, Crossover Study of Oral ASTX030 (Cedazuridine and Azacitidine Given in Combination) Versus Subcutaneous Azacitidine in Subjects with Myelodysplastic Syndromes (MDS), Chronic Myelomonocytic Leukemia (CMML), or Acute Myeloid Leukemia (AML)

Rationale

Not provided

Main Objective

Establish azacitidine AUC equivalence (90% CI 0.8, 1.25) between the final selected dose of ASTX030 from Phase 2 using FDC and SC azacitidine at 75 mg/m²/day across BSA ranges

Primary Endpoints

Ratio of azacitidine total cycle AUC 0-24 exposures after oral ASTX030 over SC azacitidine at 75 mg/m²/day

Temporary moments of secondary assessment

Not provided

Secondary Objective

Assess safety and tolerability of ASTX030
Evaluate changes in DNA methylation of ASTX030 compared to SC azacitidine
Assess clinical activity of ASTX030
Evaluate other PK parameters of azacitidine, cedazuridine, and cedazuridine-epimer

Secondary Endpoints

1 TEAEs including SAEs
2 Percent LINE-1 demethylation change from baseline between SC azacitidine and ASTX030 in Cycles 1 and 2
3 Participants with MDS or CMML: - Clinical response rate - AML-free survival - Duration of response - OS - Time to response - Transfusion independence

Temporary moments of secondary assessment

Not provided

Inclusion criteria

1. Must be 18 years 8. Able to swallow the number of capsules required within 10-mins and can tolerate 4 hours of fasting. 9. Life expectancy $\geq$ 12 weeks. 10. Follow contraceptive barrier requirements per protocol 11. Capable of giving legally effective informed consent. and willing to participate in the study. 2. Confirmed MDS or CMML and a

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1. Active, uncontrolled gastric or duodenal ulcer. 4. Known positive for Hepatitis B or C infection with the exception of those with an undetectable viral load within 3 months of screening 5. Life-threatening illness, uncontrolled medical condition or organ system dysfunction, or other reasons that, could compromise the participant's safety, interfere with the absorption or metabolism of ASTX030, or the integrity of study outcomes. 6. History of other malignancies, except certain adequately treated and/or controlled cancers, or early-stage cases not requiring therapy. 7. Extramedullary disease in MDS/MPN, including palpable hepatomegaly or splenomegaly 8. Prior treatment with > 1 cycle of decitabine or azacitidine 9. Treated with any investigational therapy within 2 weeks, or 5 half-lives, whichever is longer, before treatment initiation , or has ongoing clinically significant AEs from previous treatment with investigational agent 10. Cannot discontinue treatment with drugs that delay gastric emptying (GLP-1 and/or GIP agonists in Cycles 1 & 2. 11. Known hypersensitivity to cedazuridine or azacitidine or any excipients. 2. Poor medical risk due to any uncontrolled systemic diseases or active uncontrolled bacterial, viral, or fungal infections. 3. Known HIV infection.

Calendar

(Last Update: 25/05/2026)

Authorization 03/06/2025	Start of Trial 25/07/2025	First patient inclusion 05/08/2025	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

Taiho Oncology Inc. United States

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Contact Person

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Monetary support: N/A

Sponsor type: Commercial

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Sites

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BARCELONA

Haematology

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

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Haematology

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Azacitidine, Cedazuridine

CAPSULE

ORAL

-

Active Principles: N/A

Experimental

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SUSPENSION FOR INJECTION

SUBCUTANEOUS USE

ATC code: L01BC07 - AZACITIDINA

Active Principles: N/A

Experimental

Azacitidine, Cedazuridine

CAPSULE

ORAL

-

Active Principles: N/A

Experimental

Azacitidine

CAPSULE

ORAL

-

Active Principles: N/A

Experimental

No results