

A Phase 3 Randomized Study Comparing JNJ-79635322 versus Teclistamab in Participants with Relapsed or Refractory Multiple Myeloma

Estado Reclutando	Tipo de Participantes No aportado	Rangos de Edad Mayores de 64 , Adultos (18-64 años)
Género Ambos	Fases Fase III	Participantes esperados 494
Resultados Sin resultados	Bajo nivel intervención No	Enfermedad rara No
Cobertura geográfica Sin determinar	Ámbitos del ensayo eficacia	Terapia avanzada NO

Información

Identificador 2025-523815-12-00 (CTIS)	Cod. Protocolo 79635322MMY3002
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Área terapéutica
Enfermedades [C] - Cáncer [C04]

Enfermedad investigada
Relapsed or Refractory Multiple Myeloma

Título Científico
"A Phase 3 Randomized Study Comparing JNJ-79635322 versus Teclistamab in Participants with Relapsed or Refractory Multiple Myeloma after 1 to 3 Prior Lines of Therapy, Including an Anti-CD38 Antibody and Lenalidomide"

Justificación

No aportado

Objetivo Principal

To compare the efficacy of JNJ-79635322 with teclistamab

Variables de Evaluación Primaria

Dual primary endpoints: CR or better, PFS

Momentos temporales de evaluación primaria

No aportado

Objetivo Secundario

No aportado

Variables de Evaluación Secundaria

No aportado

Momentos temporales de evaluación secundaria

No aportado

Criterios de Inclusión

1. At the time of informed consent, be 18 years of age or at least the legal age of majority in the jurisdiction in which the study is taking place. 2. Documented diagnosis of MM as defined by the criteria below: a. MM diagnosis according to the IMWG diagnostic criteria (Rajkumar 2014) b. Measurable disease at screening as assessed by central laboratory, defined by any of the following: i. Serum M-protein level 0.5 g/dL; or ii. Serum Ig FLC 10 mg/dL and abnormal serum Ig kappa lambda FLC ratio; or iii. Urine M-protein level 200 mg/24 hours 3. Received 1 to 3 prior lines of antimyeloma therapy, including an anti-CD38 antibody and lenalidomide. The participant must have undergone at least 2 consecutive cycles of an anti-CD38 antibody at the approved dosing schedule (or a minimum of 6 doses if the anti-CD38 antibody was only part of a maintenance regimen) in any prior line and 2 consecutive cycles of lenalidomide in any prior line, unless PD was the best response to the line of therapy 4. Relapsed or refractory disease as defined below: i. Relapsed disease is defined as an initial response to prior treatment, followed by

confirmed PD by IMWG response criteria >60 days after cessation of treatment. ii. Refractory disease is defined as failure to achieve a response or confirmed PD by IMWG response criteria during previous treatment or 60 days after cessation of treatment. 5. Have an ECOG performance status of 0 to 2 at screening and immediately before the first dose of study medication

Criterios de Exclusión

1. Serious underlying medical conditions, such as: i. Evidence of active systemic viral, fungal or bacterial infection requiring systemic antiviral, antifungal, or antimicrobial therapy. ii. Active autoimmune disease requiring systemic immunosuppressive therapy within 6 months before start of treatment. EXCEPTION: Participants with vitiligo, Type 1 diabetes, or prior autoimmune thyroiditis that is currently euthyroid based on clinical symptoms and laboratory testing are eligible regardless of when these conditions were diagnosed. iii. Overt clinical evidence of dementia or altered mental status 5. Presence of any of the following: i. Any ongoing myelodysplastic syndrome or B-cell malignancy (other than MM). ii. Any history of malignancy, other than MM, that is considered at high risk of recurrence requiring systemic therapy. iii. Any active malignancy (ie, progressing or requiring treatment change in the last 24 months) other than MM. The only allowed exceptions are malignancies treated within the last 24 months that are considered cured: i. Non-muscle invasive bladder cancer (solitary Ta-papillary urothelial neoplasm of low malignant potential or low-grade, <3 cm, no carcinoma in situ). ii. Non-melanoma skin cancers treated with curative therapy or localized melanoma treated with curative surgical resection alone. iii. Non-invasive cervical cancer. iv. Breast cancer: adequately treated lobular carcinoma in situ or ductal carcinoma in situ, or history of localized breast cancer (anti-hormonal therapy is permitted). v. Localized prostate cancer (M0, N0) with a Gleason Score 7, treated locally only (radical prostatectomy/radiotherapy/focal treatment). vi. Other malignancy that is considered cured with minimal risk of recurrence in consultation with the sponsor. 9. Active hepatitis of infectious origin. i. Seropositive for hepatitis B: defined by a positive test for HBsAg. Participants with resolved infection (ie, participants who are HBsAg negative with positive antibodies to total HBe antigen [anti-HBe]) must be screened using RT-PCR measurement of HBV DNA levels. Those who are RT-PCR positive will be excluded. Participants with serologic findings suggestive of HBV vaccination (anti-HBs positivity as the only serologic marker) AND a known history of prior HBV vaccination, do not need to be tested for HBV DNA by RT-PCR (see Section 10.6). ii. Known hepatitis C infection or positive serologic testing for HCV (anti-HCV) antibody. Participants with positive hepatitis C antibody due to prior resolved disease can be enrolled only if a confirmatory negative hepatitis C RNA test is obtained at screening or within 3 months prior to first dose of study treatment. iii. Other clinically active liver disease of infectious origin 10. Concurrent use of any other anticancer treatment (including non-palliative radiotherapy) or investigational agent. For participants who received an allogeneic stem cell transplant, the transplant must be dated at least 6 months before first dose of study drug. Participants who received an allogeneic transplant must be off all immunosuppressive medications for 6 weeks before the start of study treatment administration without signs of graft-versus-host disease. Toxicity related to prior anticancer treatment must have resolved to Grade 1 or better. 11. Received prior or concurrent exposure to T-cell redirecting therapy (eg, CAR-T, bispecific antibodies), directed at BCMA or GPRC5D.

Calendario

(Última actualización: 24/07/2026)

Autorización 03/07/2026	Inicio de Ensayo 06/07/2026	Inclusión Primer Paciente 14/07/2026	Interrumpido No aportado	Reiniciado No aportado
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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
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Promotor

Janssen Cilag International Belgium

Turnhoutseweg 30

Contact Person

CTIS Point of Contact

+31717996133

CTISadmin@its.jnj.com

Monetary support: N/A

Tipo de promotor: Comercial

Ceim

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Centros

No iniciado (--/--/----)	Clinica Universidad De Navarra Pamplona NAVARRA Hematology
No iniciado (--/--/----)	Clinica Universidad De Navarra Madrid MADRID Hematology
No iniciado (--/--/----)	Complejo Asistencial Universitario De Salamanca Salamanca SALAMANCA Hematology
No iniciado (--/--/----)	Complejo Hospitalario Universitario De Santiago Santiago De Compostela CORUÑA Hematology
No iniciado (--/--/----)	Hospital Clinic De Barcelona Barcelona BARCELONA Hematology
Activo (06/07/2026)	Hospital De Jerez De La Frontera Jerez De La Frontera CÁDIZ Hematology
No iniciado (--/--/----)	Hospital Germans Trias I Pujol Badalona BARCELONA Hematology
No iniciado (--/--/----)	Hospital San Pedro De Alcantara Caceres CÁCERES Hematology

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

Hospital Universitari Vall D Hebron

Barcelona

BARCELONA

Hematology

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

Hospital Universitario Marques De Valdecilla

Santander

CANTABRIA

Hematology

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

Hospital Universitario Quironsalud Madrid

Pozuelo De Alarcon

MADRID

Hematology

Activo (16/07/2026)

Hospital Universitario Reina Sofia

Cordoba

CÓRDOBA

Hematology

Activo (13/07/2026)

Hospital Universitario 12 De Octubre

Madrid

MADRID

Hematology

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

University Hospital Virgen Del Rocio S.L.

Sevilla

SEVILLA

Hematology

Medicamentos

JNJ-79635322

SOLUTION FOR INJECTION
SUBCUTANEOUS USE

Principios Activos: N/A

Huérfano

Experimental

teclistamab

SOLUTION FOR INJECTION
SUBCUTANEOUS USE

Principios Activos: N/A

Experimental

teclistamab

SOLUTION FOR INJECTION
SUBCUTANEOUS USE

Principios Activos: N/A

Experimental

JNJ-79635322

SOLUTION FOR INJECTION
SUBCUTANEOUS USE

Principios Activos: N/A

Huérfano

Experimental

Sin resultados

A Phase 3 Randomized Study Comparing JNJ-79635322 versus Teclistamab in Participants with Relapsed or Refractory Multiple Myeloma

State
Recruiting

Type of participants
Not provided

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

Gender
Both

Phases
Phase III

Expected Participants
494

Results
No results

Low level of intervention
No

Rare disease
No

Geographic coverage
Undetermined

Areas of the study
effectiveness

Advanced therapy
NO

Information

Identifier
2025-523815-12-00 (CTIS)

Protocol Code
79635322MMY3002

Therapeutic area
Diseases [C] - Cancer [C04]

Investigated Disease
Relapsed or Refractory Multiple Myeloma

Scientific Title
"A Phase 3 Randomized Study Comparing JNJ-79635322 versus Teclistamab in Participants with Relapsed or Refractory Multiple Myeloma after 1 to 3 Prior Lines of Therapy, Including an Anti-CD38 Antibody and Lenalidomide"

Rationale

Not provided

Main Objective

To compare the efficacy of JNJ-79635322 with teclistamab

Primary Endpoints

Dual primary endpoints: CR or better, PFS

Temporary moments of secondary assessment

Not provided

Secondary Objective

Not provided

Secondary Endpoints

Not provided

Temporary moments of secondary assessment

Not provided

Inclusion criteria

1. At the time of informed consent, be 18 years of age or at least the legal age of majority in the jurisdiction in which the study is taking place. 2. Documented diagnosis of MM as defined by the criteria below: a. MM diagnosis according to the IMWG diagnostic criteria (Rajkumar 2014) b. Measurable disease at screening as assessed by central laboratory, defined by any of the following: i. Serum M-protein level 0.5 g/dL; or ii. Serum Ig FLC 10 mg/dL and abnormal serum Ig kappa lambda FLC ratio; or iii. Urine M-protein level 200 mg/24 hours 3. Received 1 to 3 prior lines of antimyeloma therapy, including an anti-CD38 antibody and lenalidomide. The participant must have undergone at least 2 consecutive cycles of an anti-CD38 antibody at the approved dosing schedule (or a minimum of 6 doses if the anti-CD38 antibody was only part of a maintenance regimen) in any prior line and 2 consecutive cycles of lenalidomide in any prior line, unless PD was the best response to the line of therapy 4. Relapsed or refractory disease as defined below: i. Relapsed disease is defined as an initial response to prior treatment, followed by

confirmed PD by IMWG response criteria >60 days after cessation of treatment. ii. Refractory disease is defined as failure to achieve a response or confirmed PD by IMWG response criteria during previous treatment or 60 days after cessation of treatment. 5. Have an ECOG performance status of 0 to 2 at screening and immediately before the first dose of study medication

Exclusion criteria

1. Serious underlying medical conditions, such as: i. Evidence of active systemic viral, fungal or bacterial infection requiring systemic antiviral, antifungal, or antimicrobial therapy. ii. Active autoimmune disease requiring systemic immunosuppressive therapy within 6 months before start of treatment. EXCEPTION: Participants with vitiligo, Type 1 diabetes, or prior autoimmune thyroiditis that is currently euthyroid based on clinical symptoms and laboratory testing are eligible regardless of when these conditions were diagnosed. iii. Overt clinical evidence of dementia or altered mental status 5. Presence of any of the following: i. Any ongoing myelodysplastic syndrome or B-cell malignancy (other than MM). ii. Any history of malignancy, other than MM, that is considered at high risk of recurrence requiring systemic therapy. iii. Any active malignancy (ie, progressing or requiring treatment change in the last 24 months) other than MM. The only allowed exceptions are malignancies treated within the last 24 months that are considered cured: i. Non-muscle invasive bladder cancer (solitary Ta-papillary urothelial neoplasm of low malignant potential or low-grade, <3 cm, no carcinoma in situ). ii. Non-melanoma skin cancers treated with curative therapy or localized melanoma treated with curative surgical resection alone. iii. Non-invasive cervical cancer. iv. Breast cancer: adequately treated lobular carcinoma in situ or ductal carcinoma in situ, or history of localized breast cancer (anti-hormonal therapy is permitted). v. Localized prostate cancer (M0, N0) with a Gleason Score 7, treated locally only (radical prostatectomy/radiotherapy/focal treatment). vi. Other malignancy that is considered cured with minimal risk of recurrence in consultation with the sponsor. 9. Active hepatitis of infectious origin. i. Seropositive for hepatitis B: defined by a positive test for HBsAg. Participants with resolved infection (ie, participants who are HBsAg negative with positive antibodies to total HBe antigen [anti-HBe]) must be screened using RT-PCR measurement of HBV DNA levels. Those who are RT-PCR positive will be excluded. Participants with serologic findings suggestive of HBV vaccination (anti-HBs positivity as the only serologic marker) AND a known history of prior HBV vaccination, do not need to be tested for HBV DNA by RT-PCR (see Section 10.6). ii. Known hepatitis C infection or positive serologic testing for HCV (anti-HCV) antibody. Participants with positive hepatitis C antibody due to prior resolved disease can be enrolled only if a confirmatory negative hepatitis C RNA test is obtained at screening or within 3 months prior to first dose of study treatment. iii. Other clinically active liver disease of infectious origin 10. Concurrent use of any other anticancer treatment (including non-palliative radiotherapy) or investigational agent. For participants who received an allogeneic stem cell transplant, the transplant must be dated at least 6 months before first dose of study drug. Participants who received an allogeneic transplant must be off all immunosuppressive medications for 6 weeks before the start of study treatment administration without signs of graft-versus-host disease. Toxicity related to prior anticancer treatment must have resolved to Grade 1 or better. 11. Received prior or concurrent exposure to T-cell redirecting therapy (eg, CAR-T, bispecific antibodies), directed at BCMA or GPRC5D.

Calendar

(Last Update: 24/07/2026)

Authorization 03/07/2026	Start of Trial 06/07/2026	First patient inclusion 14/07/2026	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

Janssen Cilag International Belgium

Turnhoutseweg 30

Contact Person

CTIS Point of Contact

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CTISadmin@its.jnj.com

Monetary support: N/A

Sponsor type: Commercial

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Sites

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not initialized (---/---/----)	Clinica Universidad De Navarra Madrid MADRID Hematology
not initialized (---/---/----)	Complejo Asistencial Universitario De Salamanca Salamanca SALAMANCA Hematology
not initialized (---/---/----)	Complejo Hospitalario Universitario De Santiago Santiago De Compostela CORUÑA Hematology
not initialized (---/---/----)	Hospital Clinic De Barcelona Barcelona BARCELONA Hematology
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not initialized (---/---/----)	Hospital San Pedro De Alcantara Caceres CÁCERES Hematology

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

Hospital Universitari Vall D Hebron
Barcelona
BARCELONA
Hematology

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

Hospital Universitario Marques De Valdecilla
Santander
CANTABRIA
Hematology

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

Hospital Universitario Quironsalud Madrid
Pozuelo De Alarcon
MADRID
Hematology

Active (16/07/2026)

Hospital Universitario Reina Sofia
Cordoba
CÓRDOBA
Hematology

Active (13/07/2026)

Hospital Universitario 12 De Octubre
Madrid
MADRID
Hematology

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

University Hospital Virgen Del Rocio S.L.
Sevilla
SEVILLA
Hematology

Medication

JNJ-79635322

SOLUTION FOR INJECTION
SUBCUTANEOUS USE

-

Active Principles: N/A

Orphan

Experimental

teclistamab

SOLUTION FOR INJECTION
SUBCUTANEOUS USE

-

Active Principles: N/A

Experimental

teclistamab

SOLUTION FOR INJECTION
SUBCUTANEOUS USE

-

Active Principles: N/A

Experimental

JNJ-79635322

SOLUTION FOR INJECTION
SUBCUTANEOUS USE

-

Active Principles: N/A

Orphan

Experimental

No results