A Phase 2, Multicenter, Randomized, Double-blind, Placebo-controlled, Dose-ranging Study to Evaluate the Efficacy and Safety of Abiprubart in Participants with Sjögrens Disease

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

Información

Identificador
2024-512986-15-00 (CTIS)

Cod. Protocolo
KPL-404-C221

Área terapéutica
·Enfermedades [C] - Patologías bucodentales [C07]
·Enfermedades [C] - Patologías del sistema inmunitario [C20]
·Enfermedades [C] - Piel y tejidos conectivos [C17]
·Enfermedades [C] - Enfermedades musculoesqueléticas [C05]
·Enfermedades [C] - Patología ocular [C11]

Enfermedad investigada
Sjögrens Disease

Título Científico

A Phase 2, Multicenter, Randomized, Double-blind, Placebo-controlled, Dose-ranging Study to Evaluate the Efficacy and Safety of Abiprubart in Participants with Sjögrens Disease

Justificación

No aportado

Objetivo Principal

To evaluate the effect of abiprubart on an established systemic disease activity measure for Sjögrens Disease

Variables de Evaluación Primaria

Change from baseline in European League Against Rheumatism (EULAR) Sjögrens Disease Activity Index (ESSDAI) at Week 24 (Change from baseline of individual ESSDAI domains will also be reported as supportive information.)

Momentos temporales de evaluación primaria

No aportado

Objetivo Secundario

To evaluate the effect of abiprubart on established disease symptom and outcome measures for Sjögrens Disease
To evaluate the effect of abiprubart on glandular function symptoms, and systemic disease activity measures for Sjögrens Disease
To evaluate the effect of abiprubart on functional status and health-related quality of life of patients with Sjögrens Disease
To evaluate the safety, tolerability, pharmacokinetics, and pharmacodynamics of abiprubart on Sjögrens Disease

Variables de Evaluación Secundaria

Proportion of Sjögrens Tool for Assessing Response (STAR) responders (5 points) at Week 24 and evaluation of the individual STAR domains
Change from baseline in ESSDAI over time
Proportion of STAR responders (5 points) over time
Change from baseline in Stimulated Salivary Flow at Week 24 and over time
Change from baseline in Unstimulated Salivary Flow at Week 24 and over time
Change from baseline in ESSPRI at Week 24 and over time
Change from baseline in Schirmers test at Week 24 and over time
Change from baseline in clinESSDAI at Week 24 and over time
Change from baseline in FACIT-Fatigue at Week 24 and over time
Change from baseline in EQ-5D 5L at Week 24 and over time
Incidence of treatment-emergent adverse events (TEAEs), and serious AEs (SAEs)

Clinically significant laboratory or electrocardiogram (ECG) changes
Abiprubart serum concentrations over time, and PK parameters
Antidrug antibodies
Receptor occupancy (RO, US clinical sites only)

Momentos temporales de evaluación secundaria

No aportado

Criterios de Inclusión

1. Is capable of understanding the written ICF, has provided signed written informed consent, and agrees to comply with protocol requirements. 6. Has stimulated whole salivary flow rate at Screening of 0.05 mL/min. 7. Weighs at least 40 kg and no more than 150 kg and has a body mass index (BMI) within the range of 18-40 kg/m2. 8. Routine adult vaccinations, including COVID-19, influenza, pneumonia, and zoster, should be up to date and/or vaccines offered at least 2 weeks prior to randomization according to regional and national guidelines based on medical history or presence of risk factors, in the opinion of the Investigator. 9. [Original Criterion deleted] A full list of inclusion criteria can be found in the current protocol. 10. If female, must be either postmenopausal (defined as no menses for 12 months without other medical cause), permanently surgically sterile (i.e., removal of ovaries, fallopian tubes, and/or uterus), or, for women of childbearing potential, must: a. Be nonpregnant, nonlactating, and agree to remain abstinent or use a method of contraception with a failure rate of < 1% per year from the screening visit until after the EOS visit. Examples of contraception methods with a failure rate of < 1% per year include: i. hormonal contraceptives associated with inhibition of ovulation (stable dose for at least 4 weeks prior to first dose of study drug); hormonal contraceptive methods must be supplemented by a barrier method ii. hormone-releasing or copper intrauterine device iii. bilateral tubal occlusion iv. vasectomized male partner v. abstinence from heterosexual intercourse; the reliability of sexual abstinence should be evaluated based on duration of the study and usual lifestyle of the participant. Intermittent abstinence (such as calendar, ovulation, symptothermal or postovulation) and withdrawal are not considered acceptable contraceptive methods b. The definition of childbearing potential may be adapted for alignment with local guidelines or regulations 11. Sexually active male participants must have documented vasectomy or must agree to use a condom or method of contraception with a failure rate of <1% per year, as defined above with their partners of childbearing potential from first dose of study drug until after the EOS visit. 12. Male participants must agree to refrain from donating sperm from first dose of study drug until 30 days after the last study drug administration. Female participants must agree to refrain from donating eggs from first dose of study drug until after the EOS visit. 13. Females of childbearing potential must have a negative serum -human chorionic gonadotropin test during screening and negative urine pregnancy test on Day 1. 2. Is male or female at birth, and > 18 years of age and < 81 years of age at Screening. 3. Has a diagnosis of Sjögrens Disease according to 2016 ACR-EULAR Classification Criteria. 4. Has ESSDAI value 5, counting only the biological, hematological, articular, cutaneous, glandular, lymphadenopathy, and constitutional organ domains at Screening. 5. Is seropositive at Screening for anti-SSA antibodies tested at a central laboratory.

Criterios de Exclusión

1. Prior exposure to any other anti-CD40/CD154 agent.
6. Injectable corticosteroids (including intra-articular) within 8 weeks prior to randomization. (Note: Concomitant-treatment with nonsteroidal anti-inflammatory drugs, acetaminophen, oral corticosteroids [equivalent to prednisone 10 mg/day], or inhaled corticosteroids at a stable dose 4 weeks prior to baseline for stable medical conditions is allowed and should be kept at a stable dose throughout the study).
7. Has started, stopped or adjusted dose/regimen of medications for treatment of, or known to cause, dry mouth/eyes (such as sialagogues, artificial saliva, artificial tears, other topical ophthalmologic agents, antihistamines,

antidepressants, anticholinergics, sedatives, antipsychotic drugs, or anti-Parkinson agents), within the 30 days prior to screening or is anticipating change to these treatment regimens during the study.
8. Has history of immunodeficiency (e.g., immune disorders or disorders that result in decreased immunity), including human immunodeficiency virus (HIV). HIV test will be performed during screening unless participant has a previously documented negative HIV result within 8 weeks prior to Screening.
9. Positive (or 2 indeterminate) QuantiFERON® test results unless confirmation of prior completion of appropriate treatment for latent TB and no evidence of active TB QuantiFERON TB-Gold (QFT) testing should be performed through the central laboratory. QFT testing may be performed by a local laboratory with approval from the medical monitor. QFT test will be performed during screening unless participant has a previously documented negative QFT result within 8 weeks prior to Screening or documented prior positive QFT at any time. An indeterminate QFT test should be repeated. A positive QFT test or two successive indeterminate QFT results should be considered a positive diagnostic TB test. An indeterminate QFT test followed by a negative QFT test should be considered a negative diagnostic TB test. When possible, QFT test should be performed at least 4 weeks after receiving an mRNA COVID-19 vaccine.
A full list of exclusion criteria can be found in the current protocol.
10. Has received immunization with a live (attenuated) vaccine within 4 weeks prior to randomization or is expected to receive live (attenuated) vaccine during the study or within 6 weeks after the last study drug administration.
11. Positive or indeterminate results for hepatitis C virus infection or chronic active hepatitis B infection (at Screening) as defined below: a. Hepatitis C antibody positive b. Hepatitis B surface antigen positive c. Hepatitis B anti-core antibody positive but anti-surface antibody negative
12. History of thromboembolic event or a significant risk of future thromboembolic events (defined as a definitive diagnosis of thrombophilia OR an ongoing condition associated with an increased incidence of intravascular thrombosis, such as atrial fibrillation or anti-phospholipid syndrome). All history of intravascular thrombosis should be approved by the medical monitor.
13. Has any prior history of lymphoid malignancy associated with Sjögrens Disease diagnosis.
2. Diagnosis of Sjögrens Disease overlap syndromes where another autoimmune rheumatic disease constitutes the principal illness, including fibromyalgia with currently active, inadequately controlled symptoms.
3. Is currently enrolled in another clinical study (at the time of Screening), with the exception of observational studies.
4. Concurrent or prior disease modifying treatments prior to study treatment period defined in the table within protocol section 4.2
5. Has received cataract surgery, Lasik, or other ophthalmologic surgery procedure (e.g., lachrymal plug) in the 6 months prior to Screening.

Calendario

(Última actualización: 04/12/2024)

Autorización	Inicio de Ensayo	Inclusión Primer Paciente	Interrumpido	Reiniciado
04/12/2024	No aportado	No aportado	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

Kiniksa Pharmaceuticals GmbH Switzerland

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Contact Person

Rachel Frank

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rfrank@kiniksa.com

Monetary support: N/A

Tipo de promotor: Comercial

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Centros

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

Area Sanitaria Da Coruna E Cee

A Coruna

CORUÑA

Rheumatology

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

Hospital Clinico Universitario De Valencia

Valencia

VALENCIA

Rheumatology

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

Hospital De La Santa Creu I Sant Pau

Barcelona

BARCELONA

Rheumatology

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

Hospital Quironsalud Infanta Luisa

Sevilla

SEVILLA

Rheumatology

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

Hospital Universitario Fundacion Jimenez Diaz

Madrid

MADRID

Rheumatology

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

Hospital Universitario Regional De Malaga

Malaga

MÁLAGA

Rheumatology

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

Parc Tauli Hospital Universitari

Sabadell

BARCELONA

Rheumatology

Medicamentos

PRD9519622
INJECTION
SUBCUTANEOUS USE

-

Principios Activos: N/A

Experimental

Sin resultados

A Phase 2, Multicenter, Randomized, Double-blind, Placebo-controlled, Dose-ranging Study to Evaluate the Efficacy and Safety of Abiprubart in Participants with Sjögrens Disease

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

Information

Identifier
2024-512986-15-00 (CTIS)

Protocol Code
KPL-404-C221

Therapeutic area
·Diseases [C] - Mouth and tooth diseases [C07]
·Diseases [C] - Immune System Diseases [C20]
·Diseases [C] - Skin and Connective Tissue Diseases [C17]
·Diseases [C] - Musculoskeletal Diseases [C05]
·Diseases [C] - Eye Diseases [C11]

Investigated Disease
Sjögrens Disease

Scientific Title

A Phase 2, Multicenter, Randomized, Double-blind, Placebo-controlled, Dose-ranging Study to Evaluate the Efficacy and Safety of Abiprubart in Participants with Sjögrens Disease

Rationale

Not provided

Main Objective

To evaluate the effect of abiprubart on an established systemic disease activity measure for Sjögrens Disease

Primary Endpoints

Change from baseline in European League Against Rheumatism (EULAR) Sjögrens Disease Activity Index (ESSDAI) at Week 24 (Change from baseline of individual ESSDAI domains will also be reported as supportive information.)

Temporary moments of secondary assessment

Not provided

Secondary Objective

To evaluate the effect of abiprubart on established disease symptom and outcome measures for Sjögrens Disease
To evaluate the effect of abiprubart on glandular function symptoms, and systemic disease activity measures for Sjögrens Disease
To evaluate the effect of abiprubart on functional status and health-related quality of life of patients with Sjögrens Disease
To evaluate the safety, tolerability, pharmacokinetics, and pharmacodynamics of abiprubart on Sjögrens Disease

Secondary Endpoints

Proportion of Sjögrens Tool for Assessing Response (STAR) responders (5 points) at Week 24 and evaluation of the individual STAR domains
Change from baseline in ESSDAI over time
Proportion of STAR responders (5 points) over time
Change from baseline in Stimulated Salivary Flow at Week 24 and over time
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Change from baseline in EQ-5D 5L at Week 24 and over time
Incidence of treatment-emergent adverse events (TEAEs), and serious AEs (SAEs)

Clinically significant laboratory or electrocardiogram (ECG) changes
Abiprubart serum concentrations over time, and PK parameters
Antidrug antibodies
Receptor occupancy (RO, US clinical sites only)

Temporary moments of secondary assessment

Not provided

Inclusion criteria

1. Is capable of understanding the written ICF, has provided signed written informed consent, and agrees to comply with protocol requirements. 6. Has stimulated whole salivary flow rate at Screening of 0.05 mL/min. 7. Weighs at least 40 kg and no more than 150 kg and has a body mass index (BMI) within the range of 18-40 kg/m2. 8. Routine adult vaccinations, including COVID-19, influenza, pneumonia, and zoster, should be up to date and/or vaccines offered at least 2 weeks prior to randomization according to regional and national guidelines based on medical history or presence of risk factors, in the opinion of the Investigator. 9. [Original Criterion deleted] A full list of inclusion criteria can be found in the current protocol. 10. If female, must be either postmenopausal (defined as no menses for 12 months without other medical cause), permanently surgically sterile (i.e., removal of ovaries, fallopian tubes, and/or uterus), or, for women of childbearing potential, must: a. Be nonpregnant, nonlactating, and agree to remain abstinent or use a method of contraception with a failure rate of < 1% per year from the screening visit until after the EOS visit. Examples of contraception methods with a failure rate of < 1% per year include: i. hormonal contraceptives associated with inhibition of ovulation (stable dose for at least 4 weeks prior to first dose of study drug); hormonal contraceptive methods must be supplemented by a barrier method ii. hormone-releasing or copper intrauterine device iii. bilateral tubal occlusion iv. vasectomized male partner v. abstinence from heterosexual intercourse; the reliability of sexual abstinence should be evaluated based on duration of the study and usual lifestyle of the participant. Intermittent abstinence (such as calendar, ovulation, symptothermal or postovulation) and withdrawal are not considered acceptable contraceptive methods b. The definition of childbearing potential may be adapted for alignment with local guidelines or regulations 11. Sexually active male participants must have documented vasectomy or must agree to use a condom or method of contraception with a failure rate of <1% per year, as defined above with their partners of childbearing potential from first dose of study drug until after the EOS visit. 12. Male participants must agree to refrain from donating sperm from first dose of study drug until 30 days after the last study drug administration. Female participants must agree to refrain from donating eggs from first dose of study drug until after the EOS visit. 13. Females of childbearing potential must have a negative serum -human chorionic gonadotropin test during screening and negative urine pregnancy test on Day 1. 2. Is male or female at birth, and > 18 years of age and < 81 years of age at Screening. 3. Has a diagnosis of Sjögrens Disease according to 2016 ACR-EULAR Classification Criteria. 4. Has ESSDAI value 5, counting only the biological, hematological, articular, cutaneous, glandular, lymphadenopathy, and constitutional organ domains at Screening. 5. Is seropositive at Screening for anti-SSA antibodies tested at a central laboratory.

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5. Has received cataract surgery, Lasik, or other ophthalmologic surgery procedure (e.g., lachrymal plug) in the 6 months prior to Screening.

Calendar

(Last Update: 04/12/2024)

Authorization	Start of Trial	First patient inclusion	Halted	Restarted
04/12/2024	Not aported	Not aported	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

Kiniksa Pharmaceuticals GmbH Switzerland

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Contact Person

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Monetary support: N/A

Sponsor type: Commercial

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Sites

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

Area Sanitaria Da Coruna E Cee

A Coruna

CORUÑA

Rheumatology

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

Hospital Clinico Universitario De Valencia

Valencia

VALENCIA

Rheumatology

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

Hospital De La Santa Creu I Sant Pau

Barcelona

BARCELONA

Rheumatology

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

Hospital Quironsalud Infanta Luisa

Sevilla

SEVILLA

Rheumatology

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

Hospital Universitario Fundacion Jimenez Diaz

Madrid

MADRID

Rheumatology

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

Hospital Universitario Regional De Malaga

Malaga

MÁLAGA

Rheumatology

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

Parc Tauli Hospital Universitari

Sabadell

BARCELONA

Rheumatology

Medication

PRD9519622
INJECTION
SUBCUTANEOUS USE

-

Active Principles: N/A

Experimental

No results