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# Clinical Trials

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# Objectives

- ◆ Define Clinical Trials/Research
- ◆ Why do we participate in clinical trials?
- ◆ Who can participate in a clinical trial?
- ◆ Ethical considerations of clinical trials
- ◆ Define the phases of clinical research
- ◆ How do we monitor safety/efficacy?
- ◆ What are the pros/cons?
- ◆ Where can one obtain trial info for WM?

# What is a clinical trial?

- ◆ A clinical trial involves research using human volunteers and is intended to add to medical knowledge/advance treatment
  - Interventional
  - Observational

# Why do we participate in clinical trials?

- ◆ To evaluate an intervention, such as a medication or medical device, for treating a certain disease
- ◆ To obtain information about the way diseases behave and why (genetics)
- ◆ To assess safety and toxicity in a group of patients
- ◆ To determine new drug combinations

# Who can participate in a trial?

- ◆ There are standards outlining who can participate
  - Inclusion Criteria
    - Must be older than 18 years
    - Must have a diagnosis of Waldenstrom's Macroglobulemia
    - Must be symptomatic from the disease (ex: anemia, fatigue)
  - Exclusion Criteria
    - Cannot be pregnant
    - May not have GFR < 30 (kidney function)
    - May not have LFT > 2.5x ULN (liver function)
- ◆ Participant must provide informed consent

# Ethical Considerations

## ◆ Informed Consent

- Intended to protect participants and give him/her enough information to understand:
  - What is the purpose of the study?
  - Risks
  - Potential benefits
  - Alternatives to participating in the study

## ◆ Institutional Review Board (IRB)

- 3<sup>rd</sup> party responsible for making sure the trial is ethical and safety is maximized
- Advocates for the safety of the study participant

## ◆ Study participation is 100% voluntary

- You can come off the study **at any time for any reason**

# Phases of Clinical Trials

## ◆ Phase I:

- Treatment is tested in a small group of people for the first time
  - To evaluate for safety and to determine a safe dose range
  - Evaluate/determine side effects

## ◆ Phase II:

- Treatment is given to a larger group of people to look for effectiveness and further evaluate safety

# Phases of Clinical Trials (cont.)

## ◆ Phase III:

- The treatment is given to large groups to:
  - Confirm its effectiveness
  - Monitor side effects
  - Compare to commonly used treatments
  - Collect information so the treatment can be used safely

## ◆ Phase IV:

- Studies are done after the drug has been marketed/FDA approved to gather data in various populations and to determine safety in long term use



# How do we monitor safety?

- ◆ Frequent assessment of side effects
  - Laboratory/radiology information
  - Patient reporting of symptoms
  - We follow the CTCAE (Common Terminology Criteria for Adverse Events) v4.0 guidelines.

Gastrointestinal disorders					
Adverse Event	Grade				
	1	2	3	4	5
Diarhea	Increase of <4 stools per day over baseline; mild increase in ostomy output compared to baseline	Increase of 4 - 6 stools per day over baseline; moderate increase in ostomy output compared to baseline	Increase of >=7 stools per day over baseline; incontinence; hospitalization indicated; severe increase in ostomy output compared to baseline; limiting self care ADL	Life-threatening consequences; urgent intervention indicated	Death
Definition: A disorder characterized by frequent and watery bowel movements.					

# How do we monitor efficacy?

- ◆ Endpoints are determined before the study starts
  - What research questions are being asked?
    - Example #1: Will this treatment improve progression free survival? (amount of time before the disease recurs)
    - Example #2: Will this treatment prolong overall survival? (does the treatment prolong life)
  - Data is gathered to assess disease response:
    - CT scans to measure the tumor size
    - Labs to look for change in IgM

# What are the pros/cons?

## Pros

- ◆ Access to a new treatment not currently FDA approved
- ◆ Contribute to science/gathering of new medical information
- ◆ Advance science/treatment becomes FDA approved
- ◆ More oversight from 3<sup>rd</sup> party (IRB, data monitoring committees)
- ◆ Closer evaluation by providers (more frequent visits/imaging)
- ◆ Medication may be provided free of charge

## Cons

- ◆ May have to follow a more rigorous schedule
- ◆ More time intensive
- ◆ Less flexibility with schedule
- ◆ Treatment may have unknown/undiscovered side effects

# Where can I find info re: clinical trials for WM?

- ◆ Your healthcare provider may have info, especially if they participate in research
- ◆ If he/she doesn't:
  - Consider obtaining a second opinion at a site that participates in clinical research
  - Look online at [www.clinicaltrials.gov](http://www.clinicaltrials.gov).
    - Search “Waldenstrom’s Macroglobulemia”

# ClinicalTrials.gov

A service of the U.S. National Institutes of Health

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- Non-U.S. only (54%)
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2	Recruiting	<a href="#">Phase 1/2 Dose Escalation Study in Patients With Relapsed or Refractory Waldenstrom's Macroglobulinemia</a> Condition: Waldenstrom's Macroglobulinemia Intervention: Drug: IMO-8400
3	Recruiting	<a href="#">Study of Phosphatidylinositol-3-kinase (PI3K) Inhibitor Idelalisib (GS-1101) in Waldenström Macroglobulinemia</a> Condition: Waldenstrom's Macroglobulinemia Intervention: Drug: GS-1101
4	Recruiting	<a href="#">Trial of Ixazomib, Dexamethasone and Rituximab in Patients With Untreated Waldenstrom's Macroglobulinemia</a> Condition: Waldenstrom's Macroglobulinemia Interventions: Drug: Ixazomib; Drug: Dexamethasone; Drug: Rituximab
5	Recruiting	<a href="#">Study of Ibrutinib in Patients With Symptomatic, Previously Untreated Waldenstrom's Macroglobulinemia, and Impact on Tumor Genomic Evolution Using Whole Genome Sequencing</a>



◆ Q & A

◆ Thank you!

