

Trial record **1 of 1** for: 02564614 | HCC | United States

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A Study of Hypoxia-inducible Factor 1a (HIF1A) Messenger Ribonucleic Acid (mRNA) Antagonist (RO7070179), to Demonstrate Proof-of-mechanism in Adult Participants With Hepatocellular Carcinoma (HCC)

The safety and scientific validity of this study is the responsibility of the study sponsor and investigators. Listing a study does not mean it has been evaluated by the U.S. Federal Government. Read our [disclaimer](#) for details.

ClinicalTrials.gov Identifier:

NCT02564614

[Recruitment Status](#) ⓘ:

Completed

[First Posted](#) ⓘ: October 1, 2015

[Last Update Posted](#) ⓘ: February 15, 2018

Sponsor:

Hoffmann-La Roche

Information provided by (Responsible Party):

Hoffmann-La Roche

[Study Details](#)

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[No Results Posted](#)

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Tracking Information

First Submitted Date <small>ICMJE</small>	September 28, 2015
First Posted Date <small>ICMJE</small>	October 1, 2015
Last Update Posted Date	February 15, 2018
Study Start Date <small>ICMJE</small>	May 2, 2016
Actual Primary Completion Date	January 22, 2018 (Final data collection date for primary outcome measure)
Current Primary Outcome Measures <small>ICMJE</small> (submitted: September 30, 2015)	Change From Baseline to Week 6 in HIF1A mRNA Level in Tumor Tissue [Time Frame: Pre-dose (baseline) and Week 6]
Original Primary Outcome Measures <small>ICMJE</small>	<i>Same as current</i>
Change History	Complete list of historical versions of study NCT02564614 on ClinicalTrials.gov Archive Site
Current Secondary Outcome Measures <small>ICMJE</small> (submitted: September 30, 2015)	<ul style="list-style-type: none"> • Change From Baseline to Week 6 in hypoxia-inducible factor 1a (HIF1A) Tumor Concentrations [Time Frame: Pre-dose (baseline) and Week 6] • Change From Baseline to Week 6 in HIF2 Tumor Concentrations [Time Frame: Pre-dose (baseline) and Week 6] • Change From Baseline to Week 6 in Vascular Endothelial Growth Factor (VEGF) Tumor Concentrations [Time Frame: Pre-dose (baseline) and Week 6] • Change From Baseline to Week 6 in Erythropoietin (EPO) Tumor Concentrations [Time Frame: Pre-dose (baseline) and Week 6] • Change From Baseline to Week 6 in Prolyl 4 Hydroxylase Tumor Concentrations [Time Frame: Pre-dose (baseline) and Week 6] • Change From Baseline to Week 6 in CD34/von Willebrand factor (VWF) Tumor Concentrations [Time Frame: Pre-dose (baseline) and Week 6]

- Change in Blood Alpha-fetoprotein (AFP) Concentrations from Baseline [Time Frame: Week 1 and Week 4 for Cycle 1 and at Week 1 for subsequent treatment cycles]
- Time to Progression (TTP) According to Response Evaluation Criteria in Solid Tumors (RECIST) and modified RECIST (mRECIST) [Time Frame: Every 12 weeks upto 24 Months]
- Percentage of Participants With Complete Response (CR) and Partial Response (PR) According to RECIST and mRECIST [Time Frame: Every 12 weeks upto 24 Months]
- Duration of Response (DOR) According to RECIST and mRECIST [Time Frame: Every 12 weeks upto 24 Months]
- Progression Free Survival (PFS) According to RECIST and mRECIST [Time Frame: Every 12 weeks upto 24 Months]
- Overall Survival (OS) According to RECIST and mRECIST [Time Frame: Every 12 weeks upto 24 Months]
- Percentage of Participants With Tumor Growth According to RECIST and mRECIST [Time Frame: Every 12 weeks upto 24 Months]
- Maximum Observed Plasma Concentration (Cmax) [Time Frame: pre- and post-dose at Week 1, Week 6]
- Time to Reach Maximum Observed Plasma Concentration (Tmax) [Time Frame: pre- and post-dose at Week 1, Week 6]
- Area under the Concentration-Time Curve From Zero to 168 Hours [AUC (0-168 hours)] [Time Frame: pre- and post-dose at Week 1, Week 6]
- Plasma Decay Half-Life (t1/2) [Time Frame: pre- and post-dose at Week 1, Week 6]

Original Secondary Outcome Measures <small>ICMJE</small>	<i>Same as current</i>
Current Other Outcome Measures <small>ICMJE</small>	<i>Not Provided</i>
Original Other Outcome Measures <small>ICMJE</small>	<i>Not Provided</i>
Descriptive Information	
Brief Title <small>ICMJE</small>	A Study of Hypoxia-inducible Factor 1a (HIF1A) Messenger Ribonucleic Acid (mRNA) Antagonist (RO7070179), to Demonstrate Proof-of-mechanism in Adult Participants With Hepatocellular Carcinoma (HCC)
Official Title <small>ICMJE</small>	A Phase 1b, Proof of Mechanism, Open-label Study of RO7070179, a Hypoxia-inducible Factor 1a (HIF1A) mRNA Antagonist in Adult Subjects With Hepatocellular Carcinoma (HCC)
Brief Summary	This open-label study will demonstrate proof-of-mechanism of HIF1A inhibition by a decrease of HIF1A mRNA after intravenous (IV) infusion of RO7070179 in participants with hepatocellular carcinoma (HCC) who have failed at least one line of systemic therapy. This will be a single arm study and all participants will receive RO7070179, 13 milligram per kilogram per week (mg/kg/week), 2-hour IV infusion on Days 1 and 4 during Week 1 of Cycle 1, followed by once weekly in 6 week cycle. Treatment with RO7070179 will be continued until disease progression or unacceptable toxicity.
Detailed Description	<i>Not Provided</i>
Study Type <small>ICMJE</small>	Interventional
Study Phase	Phase 1
Study Design <small>ICMJE</small>	Intervention Model: Single Group Assignment Masking: None (Open Label) Primary Purpose: Treatment
Condition <small>ICMJE</small>	Carcinoma, Hepatocellular
Intervention <small>ICMJE</small>	Drug: RO7070179

	<p>RO7070179 (13 mg/kg/week) will be administered as 2-hour IV infusion.</p> <p>Other Name: SPC2968/EZN-2968</p>
Study Arms	<p>Experimental: RO7070179</p> <p>Participants will receive RO7070179, 13 mg/kg/week, 2-hour IV infusion every week in a 6-week cycle, after two loading doses in Week 1 of Cycle 1 on Day 1 and Day 4. If a dose-limiting toxicity (DLT) occurs in more than 33% of participants at any time, the dose will be reduced to 10 mg/kg/week. The dose will be further reduced to 6 mg/kg/week if more than 33% of treated participants have a DLT.</p> <p>Intervention: Drug: RO7070179</p>
Publications *	<i>Not Provided</i>
<p>* Includes publications given by the data provider as well as publications identified by ClinicalTrials.gov Identifier (NCT Number) in Medline.</p>	
Recruitment Information	
Recruitment Status <small>ICMJE</small>	Completed
Actual Enrollment <small>ICMJE</small> (submitted: July 7, 2017)	9
Original Estimated Enrollment <small>ICMJE</small> (submitted: September 30, 2015)	12
Actual Study Completion Date	January 22, 2018
Actual Primary Completion Date	January 22, 2018 (Final data collection date for primary outcome measure)
Eligibility Criteria <small>ICMJE</small>	<p>Inclusion Criteria:</p> <ul style="list-style-type: none"> Male or female of ≥ 18 years of age with the Eastern Cooperative Oncology Group (ECOG) performance status

0-1, Child-Pugh score of 5-7, and Life expectancy of 3 months or greater.

- Confirmed to have HCC as described by the American Association for the Study of Liver Disease (AASLD).
- Participants who have failed at least one line of systemic therapy for advanced stage HCC or participants who are ineligible or unable to tolerate the standard of care treatment.
- Have measurable or evaluable disease.
- Participants with normal major organ functions as defined by hemoglobin (HgB) ≥ 8.5 gram/deciliter (dL), absolute neutrophil count (ANC) ≥ 1000 /microliter (mcL), platelet $\geq 60,000$ /micL, aspartate aminotransferase/alanine transaminase (AST/ALT) ≤ 3 x Upper Limit of Normal (ULN), total Bilirubin ≤ 2 x ULN, creatinine ≤ 2 x ULN.
- Willingness to undergo two tumor biopsies: before and after administration of RO7070179.

Exclusion Criteria:

- Concurrent serious medical illness that could potentially interfere with protocol compliance (such medical illness will not include hepatitis or cirrhosis, as the degree of liver impairment caused by these diseases are covered by other exclusion criteria).
- Active hepatitis B or C, but participants on stable medications for hepatitis B or C.
- Bleeding esophageal or gastric varices within 2 months before enrollment.
- Participants who need to take therapeutic anti-coagulation or anti-platelet therapy.
- Presence of ascites that preclude biopsy of liver lesions.
- History of unstable angina or myocardial infarction within 12 months prior to Day 1 or ischemic heart disease.
- Known HIV positive and positive screening pregnancy test or is breast-feeding.

	<ul style="list-style-type: none"> • Female or male of reproductive capacity unwilling to use methods of contraception to prevent pregnancy during this study. Participants unwilling to use methods of contraception to prevent pregnancy for 6 months after the last dose of RO7070179 due to the potential for prolonged half-life of RO7070179 in the liver. • Known, clinically suspected, or history of CNS tumor involvement. • Prior chemotherapy, immunotherapy, investigational therapeutic agent, or other therapy used to treat HCC within 4 weeks before the first scheduled administration of RO7070179. • Participants who have not recovered from any reversible side effects (except alopecia) to Grade 0 or 1 toxicity attributed to the administration of an investigational therapeutic agent, chemotherapy, immunotherapy, radiotherapy, or other agents previously used to treat the cancer. • Any condition that, in the opinion of the investigator or the Sponsor, makes the patients unsuitable for the study. • Inability to comply with the study protocol.
Sex/Gender	Sexes Eligible for Study: All
Ages	18 Years and older (Adult, Older Adult)
Accepts Healthy Volunteers	No
Contacts <small>ICMJE</small>	<i>Contact information is only displayed when the study is recruiting subjects</i>
Listed Location Countries <small>ICMJE</small>	United States
Removed Location Countries	
Administrative Information	
NCT Number <small>ICMJE</small>	NCT02564614

Other Study ID Numbers <small>ICMJE</small>	NP29700
Has Data Monitoring Committee	<i>Not Provided</i>
U.S. FDA-regulated Product	<i>Not Provided</i>
IPD Sharing Statement	<i>Not Provided</i>
Responsible Party	Hoffmann-La Roche
Study Sponsor <small>ICMJE</small>	Hoffmann-La Roche
Collaborators <small>ICMJE</small>	<i>Not Provided</i>
Investigators <small>ICMJE</small>	Study Director: Clinical Trials Hoffmann-La Roche
PRS Account	Hoffmann-La Roche
Verification Date	February 2018
<small>ICMJE</small> Data element required by the International Committee of Medical Journal Editors and the World Health Organization ICTRP	