This month's newsletter will focus on the Chronic lymphocytic leukemia (CLL) trials we have open to recruitment and those we are currently in the process of setting up and hope to be opening in the next few months. These will be updated on the website once they are open.

What is chronic lymphocytic leukaemia?

• Chronic lymphocytic leukaemia (CLL) is the most common type of leukaemia. About 2,400 people in the UK are diagnosed with it each year.
• CLL usually develops very slowly and many people don’t need treatment for months or years. However, some people need to have treatment straight away.
• People with CLL make too many white blood cells called lymphocytes. When examined under a microscope, the lymphocytes look normal, but they aren’t fully developed (immature) and don’t work properly. Over time these abnormal lymphocytes build up in the lymphatic system and cause large, swollen lymph nodes. They may also fill the bone marrow, reducing the number of normal white cells, red cells and platelets that can be made.

For further information about CLL please speak to the consultants or contact the research office who will be happy to provide information booklets or useful websites.
**Trials open to recruitment**

**CHOP-OR**
PI: Prof David Oscier  
Single arm NCRI feasibility study of CHOP in combination with ofatumumab, in induction and maintenance for patients with newly diagnosed Richter’s Syndrome

**Trial Design**
- Phase II, multi-centre, open-label, non-randomised feasibility study
- For patients with newly diagnosed Richter’s Syndrome
- Primary Objective is to determine objective response to ofatumumab plus CHOP at week 20 as measured from start of treatment according to the Revised Response Criteria for Malignant Lymphoma (Cheson criteria)
- 35 patients over 2 years
- Sponsor: University of Oxford

**Current Status**
- Opened to recruitment April 2011
- 6 patients recruited, on target for 10 patients in the first year
- 8 out of 10 centres across the UK now open to recruitment
- RBH have recruited 3 patients to this study

**Key Eligibility Criteria**
- Patients with B-CLL and newly diagnosed not previously treated and biopsy proven DLBCL Richter’s transformation.
- ECOG Performance Status of 0, 1, 2 or 3.

**INDUCTION**
CHOP-0 every 3 weeks for 6 cycles

**MAINTENANCE**
Ofatumumab every 8 weeks for 6 cycles

**FOLLOW UP**
Until week 72 (no treatment)

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**PICLLLe**
PI: Prof David Oscier  
Phase I/II clinical trial to assess the efficacy and safety of olaparib, a PARP-inhibitor, in relapsed and refractory Chronic Lymphocytic Leukaemia patients with an 11q deletion or ATM mutation and relapsed/refractory patients with T-Prolymphocytic Leukaemia and Mantle Cell Lymphoma

**Trial Design**
- Open label, multi-centre phase I/II study of olaparib given continuously
- For patients with relapsed/refractory CLL who are proven carriers of chromosome 11q deletion or ATM mutation and relapsed/refractory patients with T-PLL and MCL
- Primary objective Phase 1 – to determine the maximum tolerated dose (MTD) of olaparib in this group of patients
- Primary objective Phase 2 – demonstration of sufficient efficacy of olaparib (defined as response rate of 20% after 16 weeks of treatment) at the MTD
- Up to 70 patients over 4 years
- Sponsor: University of Birmingham. Managed by the Cancer Research UK Clinical Trials Unit

**Current Status**
- Opened to recruitment January 2011
- 5 centres open. 6 further centres opening soon
- 1st cohort (200mg olaparib BD) in Phase 1 completed treatment.
  An expanded cohort 1 has recently opened with patients due to complete treatment at the end of 2011

**Key Eligibility Criteria**
- Relapsed or refractory CLL, Mantle Cell Lymphoma or T-PLL patients (Hallek et al, 2008: WHO Classification of Haematopoietic and Lymphoid Tissues, Fourth Edition) who are not considered to be appropriate for further conventional treatment
- CLL patients only: confirmation of chromosome 11q deletion by FISH or an ATM mutation (requires presence of a predicted ATM mutation and demonstration of reduced ATM dependent phosphorylation)
- Expected life expectancy of greater than 16 weeks
CLL210
PI Professor David Oscier
A randomised phase II trial of alemtuzumab, dexamethasone and lenalidomide induction followed by lenalidomide maintenance or no further treatment for high risk CLL

Trial Design and Status
• Phase II, multi-centre, randomised
• Primary endpoints are the complete response rates after 6 months of induction therapy and the progression-free rate after 2 years of maintenance therapy
• This trial is open to recruitment at The Royal Bournemouth Hospital, following all the relevant regulatory approvals

Key Eligibility Criteria
• CLL/SLL requiring therapy by IWCLL 2008 criteria
• TP53 deletion/mutation affecting at least 20% of CLL cells or resistant to fludarabine-containing combination therapy or relapse within 12 months of responding to fludarabine containing combination therapy
• No prior treatment with alemtuzumab, lenalidomide or high-dose glucocorticoids
• No more than 3 previous treatment episodes for CLL
  • WHO performance status 0-2
** trial design **

** RIAltO **

PI: Dr Helen McCarthy

- RIAltO: A Randomised Investigation of Alternative Ofatumumab-containing regimens in less fit patients with CLL

** Trial Design **

- Phase III, multi-centre, randomised, open-label
- Principal trial objective is to compare O-Chl and O-B in patients considered not fit enough for R-FC with respect to progression free survival.
- 670 patients over 48 months
- Sponsor: Co-sponsored by the University of Liverpool and the Royal Liverpool and Broadgreen University Hospitals NHS Trust

** Study Design **

- ** CLL requiring first-line treatment **
- Consent and confirmation of eligibility
- Randomisation

** O-Chl q28d **

- O 1000mg iv d1*
- Chl 10mg/m2 po d1-7
- 6-12 cycles

** O-Chl q28d **

- O 1000mg iv d1*
- Chl 10mg/m2 po d1-7
- 6-12 cycles

** Current Status **

This trial is open to recruitment at The Royal Bournemouth Hospital, following all the relevant regulatory approvals

** Key Eligibility Criteria **

- CLL requiring first-line treatment by 2008 IWCLL criteria
- Full dose R-FC inappropriate
- Able to tolerate chlorambucil at the dose used in the LRF CLL4 trial.

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** OMB114242 **

PI: Dr Helen McCarthy

- Ofatumumab versus physicians choice in BFR CLL (NCRN 166)

** Re: An Open Label, Multicenter Study Investigating the Safety and Efficacy of Ofatumumab Therapy versus Physicians Choice in Patients with Bulky Fludarabine Refractory Chronic Lymphocytic Leukaemia (CLL) **

** Study Design **

- ** Ofatumumab Arm **
- ** Physician's Choice Arm (Non-Ofatumumab) **

** CR (Complete Remission) **

** PR (Partial Remission) **

** SD (Stable Disease) **

** PD (Disease Progression) **

** Current Status **

This trial is open to recruitment at The Royal Bournemouth Hospital, following all the relevant regulatory approvals
Clinical Trials: Frequently Asked Questions

Are trials safe?

Thousands of people take part in a large number of clinical trials in the UK every year. Rigorous processes, including review by an NHS Research Ethics Committee, are in place to protect the rights, dignity, safety and well-being of participants.

No one can include you in a clinical trial without asking you. A doctor, nurse or other researcher will ask your permission and they cannot enter you into the trial if you do not give your consent.

What is a randomised trial?

Randomisation means that a computer randomly puts patients into the treatment groups in the trial. Each group has a similar mix of patients of different ages, sex and state of health. This ensures the members of each group can be matched so that both groups are similar.

If one group does better than the other group, it is likely to be because of the treatment, as the two groups are the same.

What do I do if I want to take part in a Haematology trial?

If you would like to take part in a clinical trial you should discuss this with the doctor in charge of your care, who will have the information on trials that are currently being run at The Royal Bournemouth Hospital. Entrance into a clinical trial will depend on whether you meet the trials eligibility criteria.

Haematology Research - in summary

At Bournemouth we are involved in running a large number of clinical trials for haematology patients. This is beneficial not only for patients by offering cutting edge therapies, but also for the hospital and primary care trust by saving significant funds (cost of the drugs is covered by the trials). Clinical trials are medical research trials involving patients. They are carried out to try and find new and better treatments. Carrying out clinical trials is the only way to find out if a new approach to cancer care is better than the standard treatments currently used.

Clinical trials may also be carried out to:

See if new combinations of drugs are more effective or give fewer side effects

Find out how cancer treatments work

See which treatments have less impact on patients’ everyday activities

The trials offered within the Haematology department at the Royal Bournemouth & Christchurch Hospitals NHS Foundation Trust are run by both academic institutions and by commercial companies.