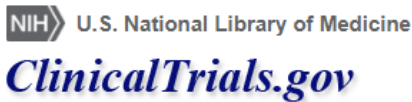





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Efficacy and Safety of 177Lu-edotreotide PRRT in GEP-NET Patients (COMPETE)



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: NCT03049189

[Recruitment Status](#) ⓘ : Active, not recruiting

[First Posted](#) ⓘ : February 9, 2017

[Last Update Posted](#) ⓘ : November 30, 2023

[View this study on the modernized ClinicalTrials.gov](#)

**Sponsor:**

ITM Solucin GmbH

**Collaborators:**

ABX CRO

PSI CRO

**Information provided by (Responsible Party):**

ITM Solucin GmbH

- Study Details
- Tabular View
- No Results Posted

Disclaimer

[How to Read a Study Record](#)

Study Description

Go to

Brief Summary:

The purpose of the study is to evaluate efficacy and safety of Peptide Receptor Radionuclide Therapy (PRRT) with 177Lu-Edotreotide compared to targeted molecular therapy with Everolimus in patients with inoperable, progressive, somatostatin receptor-positive (SSTR+), neuroendocrine tumours of gastroenteric or pancreatic origin (GEP-NET).

Condition or disease ⓘ	Intervention/treatment ⓘ	Phase ⓘ
Neuroendocrine Tumors	Drug: 177Lu-edotreotide PRRT Drug: Everolimus Other: Amino-Acid Solution	Phase 3

Study Design

Go to

Study Type ⓘ : Interventional (Clinical Trial)

Actual Enrollment ⓘ : 309 participants

Allocation: Randomized

Intervention Model: Parallel Assignment

Masking: None (Open Label)

Primary Purpose: Treatment

Official Title: A Prospective, Randomised, Controlled, Open-label, Multicentre Phase III Study to Evaluate Efficacy and Safety of Peptide Receptor Radionuclide Therapy (PRRT) With 177Lu-Edotreotide Compared to Targeted Molecular Therapy With Everolimus in Patients With Inoperable, Progressive, Somatostatin Receptor-positive (SSTR+), Neuroendocrine Tumours of Gastroenteric or Pancreatic Origin (GEP-NET)

Actual Study Start Date ⓘ : February 2, 2017

Estimated Primary Completion Date ⓘ : December 2024

Estimated Study Completion Date ⓘ : December 2029

Resource links provided by the National Library of Medicine

NIH>NLM

[Drug Information](#) available for: [Everolimus](#)



[Genetic and Rare Diseases Information Center](#) resources:

[Neuroendocrine Tumor](#) [Gastro-enteropancreatic Neuroendocrine Tumor](#)  
[Neuroepithelioma](#)


[U.S. FDA Resources](#)

## Arms and Interventions

Go to 

Arm 	Intervention/treatment 
<p>Experimental: 177Lu-edotreotide PRRT</p> <p>177Lu-edotreotide (177Lu-DOTATOC)</p> <p>A maximum of four cycles of <math>7.5 \pm 0.7</math> GBq (gigabequerel) 177Lu-edotreotide, each.</p> <p>Route of administration: Slow intravenous infusion/injection (i.v.) Duration of treatment: 4 cycles, 90 days apart (total duration: 270 days/9 months)</p>	<p>Drug: 177Lu-edotreotide PRRT</p> <p>PRRT using 177Lu-edotreotide will be performed 3-monthly. A maximum of four cycles will be administered.</p> <p>Other Names:</p> <ul style="list-style-type: none"> <li>• 177Lu-DOTATOC</li> <li>• 177Lu-Edo</li> </ul> <p>Other: Amino-Acid Solution</p> <p>The Amino-Acid Solution (AAS) to be used in this study will contain a mixture of 25 g lysine and 25 g arginine diluted in 2000 mL of electrolyte solution, infused over 4 - 6 h, starting 30 - 60 min before PRRT</p> <p>Other Name: Arginine-Lysine Solution</p>
<p>Active Comparator: Everolimus</p> <p>Everolimus (Afinitor®)</p> <p>Doses: 10 mg/d Route of administration: Oral</p> <p>Duration of treatment: Continuous daily treatment until diagnosis of progression or End of Study (EOS)</p>	<p>Drug: Everolimus</p> <p>Everolimus will be administered as a standard dosis of 10 mg daily which may be reduced where required for acceptable tolerability.</p> <p>Other Name: Afinitor</p>

## Outcome Measures

Go to 

### Primary Outcome Measures :

1. progression-free survival (PFS) [ Time Frame: 12 weeks +/- 14 days, up to 30 months ]

PFS will be assessed individually per patient from date of randomization until the date of first documented progression, assessed up to 30 months, primary outcome will be measured by CT/MRI every 12 weeks +/- 14 days

### Secondary Outcome Measures :

## 1. overall survival (OS) [ Time Frame: every 3 months for a period of at least 30 months ]

OS as secondary outcome measure will be assessed per patient from date of randomization until the date of death, whichever came first

**Eligibility Criteria**Go to **Information from the National Library of Medicine**

*Choosing to participate in a study is an important personal decision. Talk with your doctor and family members or friends about deciding to join a study. To learn more about this study, you or your doctor may contact the study research staff using the contacts provided below. For general information, [Learn About Clinical Studies](#).*

Ages Eligible for Study: 18 Years and older (Adult, Older Adult)

Sexes Eligible for Study: All

Accepts Healthy Volunteers: No

**Criteria**

## Inclusion Criteria:

- Histologically confirmed diagnosis of well-differentiated neuro-endocrine tumour of non-functional gastroenteric origin (GE-NET) or both functional or non-functional pancreatic origin (P-NET)
- Measurable disease per RECIST 1.1
- Somatostatin receptor positive (SSTR+) disease
- Progressive disease based on RECIST 1.1. criteria as evidenced by two morphological imaging examinations made with the same imaging method (either CT or MRI)

## Exclusion Criteria:

- Known hypersensitivity to edotreotide or everolimus
- Known hypersensitivity to DOTA, lutetium-177, or any excipient of edotreotide or everolimus or any other Rapamycin derivative
- Prior exposure to any peptide receptor radionuclide therapy (PRRT)
- Prior therapy with mTor inhibitors
- Prior EFR (external field radiation) to GEP-NET lesions within 90 days before randomisation or radioembolisation therapy
- Therapy with an investigational compound and/or medical device within 30 days prior to randomisation

- Indication for surgical lesion removal with curative potential
- Planned alternative therapy (for the period of study participation)
- Serious non-malignant disease
- Clinically relevant renal, hepatic, cardiovascular, or haematological organ dysfunction, potentially interfering with the safety of the study treatments
- Pregnant or breast-feeding women
- Subjects not able to declare meaningful informed consent on their own (e.g. with legal guardian for mental disorders) or any other vulnerable population to that sense (e.g. persons institutionalised, incarcerated etc.).

## Contacts and Locations

Go to 

### Information from the National Library of Medicine



*To learn more about this study, you or your doctor may contact the study research staff using the contact information provided by the sponsor.*

*Please refer to this study by its ClinicalTrials.gov identifier (NCT number):*  
**NCT03049189**

### Locations

► Show 52 study locations

### Sponsors and Collaborators

ITM Solucin GmbH

ABX CRO

PSI CRO

## More Information

Go to 

Responsible Party: ITM Solucin GmbH  
ClinicalTrials.gov Identifier: [NCT03049189](#) [History of Changes](#)  
Other Study ID Numbers: ITM-LET-01  
First Posted: February 9, 2017 [Key Record Dates](#)  
Last Update Posted: November 30, 2023  
Last Verified: November 2023

Studies a U.S. FDA-regulated Drug Product: Yes

Studies a U.S. FDA-regulated Device Product: No

**Keywords provided by ITM Solucin GmbH:**

non-functional and functional P-NET  
non-functional GE-NET

**Additional relevant MeSH terms:**

Neuroendocrine Tumors	MTOR Inhibitors
Neuroectodermal Tumors	Protein Kinase Inhibitors
Neoplasms, Germ Cell and Embryonal	Enzyme Inhibitors
Neoplasms by Histologic Type	Molecular Mechanisms of Pharmacological Action
Neoplasms	Immunosuppressive Agents
Neoplasms, Nerve Tissue	Immunologic Factors
Everolimus	Physiological Effects of Drugs
Pharmaceutical Solutions	Antineoplastic Agents
Edotreotide	Radiopharmaceuticals
Edotreotide lutetium LU-177	