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Open-label, Multicenter, Single Arm, Phase II Study Assessing Treatment Patient Preference for New Deferasirox Formulation (Film-coated Tablet) Compared to the Reference Deferasirox Dispersible Tablet Formulation

07/08/2025 22:43:09

Primary registry identifying number	Protocol number
BCTR2019020189	CICL670FIC05
MOH registration number	
29858/2018	
Study registered at the country of origin	Study registered at the country of origin: Specify
Yes	
Type of registration	Type of registration: Justify
Retrospective	LCTR was already initiated, original file was previously submitted by paper
Date of registration in national regulatory agency 13/07/2018	
Primary sponsor	Primary sponsor: Country of origin
Novartis Pharma Services Inc.	Novartis Pharmaceuticals
Date of registration in primary registry	Date of registration in national regulatory agency
08/07/2019	13/07/2018
Public title	Acronym JUPITER
Open-label, Multicenter, Single Arm, Phase II Study Assessing Treatment Patient Preference for New Deferasirox Formulation (Film-coated Tablet) Compared to the Reference Deferasirox Dispersible Tablet Formulation	JOFITER
Scientific title	Acronym
Open-label, Multicenter, Single Arm, Phase II Study Assessing Treatment Patient Preference for New Deferasirox Formulation (Film-coated Tablet) Compared to the Reference Deferasirox Dispersible Tablet Formulation	
Brief summary of the study: English	
Study to evaluate patient preference of deferasirox FCT or deferasirox DT in patient with transfusion - dependent thalassemia or non-transfusion -dependent thalassemia as measured by preference questionnaire at Week 48	
Brief summary of the study: Arabic	
وحيدة المجموعة، في المرحلة الثانية لتقييم الأفضليّة العلاجيّة للمريض لصيغة ديفير از يروكس الجديد: (قرص مغلف بطبقة رقيقة) مقارنة بصيغة ديفير ازيروكس المرجعيّة من قرص قابل للتفتت	در اسة مفتوحة اللصاقة، متعددة المراكز،
Health conditions/problem studied: Specify	
Transfusion-dependent Thalassemia Non-transfusion-dependent Thalassemia	
Interventions: Specify	

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Key inclusion and exclusion criteria: Inclusion criteria

1. Prior to any screening procedures are performed, written informed consent/assent must be provided.

Male and female patient aged ≥ 2 years 3. Exjade naïve patient or chelated naive patient or treated by other chelators for at least 6 months, such as: a. Deferiprone/ DFP b. Deferoxamine /DFO c. Combination (DFO + DFP)

4. Subject is willing to discontinue current iron chelation therapy at least 7 days prior to the first day and for the duration of the study

5. Patients with transfusion-dependent thalassemia (independent of underlying condition) with transfusional iron overload as shown by: -a

serum ferritin level of > 1000 ng/ml at screening and if available, LIC > 3 mg Fe/g dw until 6 months prior to screening

6. Patients with non-transfusion-dependent thalassemia with iron overload as shown by: -a serum ferritin level of ≥ 800 ng/ml at screening and if available, LIC \geq 5 mg Fe/g dw until 6 months prior to screening

Key inclusion and exclusion criteria: Gender

Key inclusion and exclusion criteria: Specify gender

Both

2

Key inclusion and exclusion criteria: Age minimum

Key inclusion and exclusion criteria: Age maximum 99

Key inclusion and exclusion criteria: Exclusion criteria

1. Male and female patient aged < 2 years

2. Written consent/assent from patients/parents/legal representative is not obtained

3. Creatinine clearance below the contraindication limit in the locally approved prescribing information.

4. Serum creatinine level > 1.5 x ULN (upper limit of normal)

5. AST (SGOT) /ALT (SGPT) > 5 x ULN, unless if LIC confirmed as <10 mg Fe/dw within 6 months prior to screening visit.

6. Significant proteinuria as indicated by a urinary protein/creatinine ratio > 0.5 mg/mg in a non-first void urine sample.

7. Patients with significant impaired gastrointestinal (GI) function or GI disease that may significantly alter the absorption of oral defension (e.g. ulcerative diseases, uncontrolled nausea, vomiting, diarrhea, malabsorption syndrome, or small bowel resection).

8. Clinical or laboratory evidence of active Hepatitis B or Hepatitis C (HBsAg in the absence of HBsAb OR HCV Ab positive with HCV RNA positive).

9. Patients with psychiatric or addictive disorders which prevent them from giving their informed consent or undergoing any of the treatment options or patients unwilling or unable to comply with the protocol (including use of electronic devices for ePRO).

10. Patients with a known history of HIV seropositivity (Elisa or Western blot).

11. History of malignancy of any organ system, treated or untreated, within the past 5 years whether or not there is evidence of local recurrence

or metastases, with the exception of localized basal cell carcinoma of the skin. 12. Patients participating in another clinical trial or receiving an investigational drug.

13. History of hypersensitivity to any of the study drug or excipients.

14. Significant medical condition interfering with the ability to partake in this study (e.g. systemic uncontrolled hypertension, unstable cardiac disease not controlled by standard medical therapy, systemic disease (cardiovascular, renal, hepatic, etc.).

15. Women of child-bearing potential, defined as all women physiologically capable of becoming pregnant, unless they are using effective methods of contraception during dosing of study treatment

16. Women are considered post-menopausal and not of child bearing potential if they have had 12 months of natural (spontaneous) amenorrhea with an appropriate clinical profile (e.g. age appropriate, history of vasomotor symptoms) or have had surgical bilateral oophorectomy (with or without hysterectomy) or tubal ligation at least six weeks ago. In the case of oophorectomy alone, only when the reproductive status of the woman has been confirmed by follow up hormone level assessment is she considered not of child bearing potential. 17. Sexually active males unless they use a condom during intercourse while taking drug and for 28 days after stopping study medication and should not father a child in this period. A condom is required to be used also by vasectomized men in order to prevent delivery of the drug via seminal fluid.

Type of study

Interventional

Type of intervention	Type of intervention: Specify type
Pharmaceutical	N/A
Trial scope	Trial scope: Specify scope
Therapy	N/A
Study design: Allocation N/A: Single arm study	Study design: Masking Open (masking not used)
Study design: Control	Study phase
Active	2
Study design: Purpose	Study design: Specify purpose
Treatment	N/A

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Study design: Assignment Other		t Patient Preference for New Im-coated Tablet) Compared to the
IMP has market authorization	IMP has market authorizat	
Yes, Worldwide	Albania, Argentina, Canada	, United states, United Arab Emira d, Saudi Arabia, Oman, Mexico ,
Name of IMP Deferasirox (ICL670)	Year of authorization 2017	Month of authorization
Type of IMP Others		
Pharmaceutical class		
Non-chiral, Tridentate ligand iron chelator		
Therapeutic indication Male or female with transfusion-dependent thalassemia or non-tra requiring chelation therapy due to iron overload will be included in		
Therapeutic benefit	ano otaay.	
Symptomatic treatment of Thalassemia		
Study model	Study model: Explain mod	del
N/A	N/A	
Study model: Specify model N/A		
Time perspective N/A	Time perspective: Explain N/A	time perspective
Time perspective: Specify perspective N/A		
Target follow-up duration	Target follow-up duration:	: Unit
Number of groups/cohorts		
Biospecimen retention	Biospecimen description	
None retained	Local lab samples are done or shipped outside Lebanon	at local lab, no samples are retair ı.
Target sample size	Actual enrollment target s	ize
10	5	

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Date of first enrollment: Type Actual	Date of first enrollment: Date 18/10/2018
Date of study closure: Type Actual	Date of study closure: Date 17/03/2020
Recruitment status Complete	Recruitment status: Specify
Date of completion 28/02/2019	
IPD sharing statement plan	IPD sharing statement description
Yes	There is a plan to share IPD , however not mentioned yet on clinical trials.gov
Additional data URL	
https://clinicaltrials.gov/ct2/show/record/NCT02993224?id=CICL670FIC058	krank=1
Admin comments	

Trial status

Approved

Secondary Identifying Numbers	
Full name of issuing authority	Secondary identifying number
National Institute of Health (clinicaltrials.gov)	NCT02993224

Sources of Monetary or Material Support		
Name		
Novartis Pharma Services Inc.		

Secondary Sponsors

Name NA

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Contac	Contact for Public/Scientific Queries					
Contact type	Contact full name	Address	Country	Telephone	Email	Affiliation
Public	Ali Taher	Baabda	Lebanon	009613755 669	ataher@aub.edu. lb	Chronic Care Center
Scientific	Hind Khairallah	Beirut	Lebanon	+961 1 512002 Ext. 271	Hind.Khairallah@ fattal.com.lb	Khalil Fattal et Fils s.a.l.

Centers/Hospitals Involved in the Study			
Center/Hospital name	Name of principles investigator	Principles investigator speciality	Ethical approval
Chronic Care Center	Dr Ali Taher	Hematology	Approved

Ethics Review				
Ethics approval obtained	Approval date	Contact name	Contact email	Contact phone
Chronic Care Center	15/05/2018	Michele Abi saad	cccmas@chroniccare.org.lb	+961 3 664 310
American University of Beirut Medical Center	07/11/2017	Fuad Ziyadeh	fz05@aub.edu.lb	+9611350000#5445

Countries of Recruitment
lame
gypt
ebanon
Saudi Arabia
hailand
urkey
/iet Nam
Igeria
Логоссо



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Health Conditions or Problems Studied			
Condition	ı	Code	Keyword
Thalasser	nia	Thalassaemia, unspecified (D56.9)	Thalassemia

Interventions		
Intervention	Description	Keyword
Audiometry, ECG, Chest X ray, Lab test	Audiometry, ECG, Chest X ray, Lab test	ICF, Lab, Audiometry, IMP administration

Primary Outcomes		
Name	Time Points	Measure
Percentage of patient preference for deferasirox FCT vs deferasirox DT	Week 48	week 48

Key Secondary Outcomes		
Name	Time Points	Measure
Percentage of patient preference for deferasirox FCT vs deferasirox DT vs previous previous iron chelation	Week 28	Week 28
Percentage of patient preference for deferasirox DT vs previous iron chelation	Week 4 and week 24	Week 4 and week 24
Percentage of reasons for preference of deferasirox FCT vs. deferasirox DT	Week 28 and week 48	Week 28 and week 48
Pill counts to assess drug compliance for deferasirox DT vs FCT	Baseline to wk 24, wk 25 to wk 48	Baseline to wk 24, wk 25 to wk 48



Trial Results Summary results Study results globally Date of posting of results summaries Date of posting of results summaries Date of first journal publication of results Results URL link Baseline characteristics Participant flow Adverse events Outcome measures URL to protocol files