

A Phase 3, Multi-center, Open-label, Randomized Study of Oral ABL001 Versus Bosutinib in Patients With Chronic Myelogenous Leukemia in Chronic Phase (CML-CP), Previously Treated With 2 or More Tyrosine Kinase Inhibitors

12/08/2025 18:20:25

**Main Information** 

Primary registry identifying number

LBCTR2019010185

MOH registration number

49983/2017

Study registered at the country of origin

Type of registration

Retrospective

Date of registration in national regulatory

21/12/2017

**Primary sponsor** 

Novartis Pharma Services Inc.

Date of registration in primary registry

27/01/2021

**Public title** 

A Phase 3, Multi-center, Open-label, Randomized Study of Oral ABL001 Versus Bosutinib in Patients With Chronic Myelogenous Leukemia in Chronic Phase (CML-CP), Previously Treated With 2 or More Tyrosine Kinase Inhibitors

Scientific title

A Phase 3, Multi-center, Open-label, Randomized Study of Oral ABL001 Versus Bosutinib in Patients With Chronic Myelogenous Leukemia in Chronic Phase (CML-CP), Previously Treated With 2 or More Tyrosine Kinase Inhibitors

Brief summary of the study: English

The purpose of this pivotal study is to compare the efficacy of ABL001 with that of bosutinib in the treatment of patients with CML-CP having previously been treated with a minimum of two prior ATP -binding site TKIs with BCR-ABL ratios ≥ 1% IS at screening.

Brief summary of the study: Arabic

عن طريق الفم مقابل دواء بوسوتينيب لدى المرضى ABL001 مفتوحة اللصاقة، متعددة المراكز حول دواء 3دراسة جزافية في المرحلة المصابين بسرطان الدم النقوي المزمن في المرحلة المزمنة، المعالجين سابقًا بمتبطين أو أكثر لكيناز النيروزين

Health conditions/problem studied: Specify

Chronic Myelogenous Leukemia

Interventions: Specify ABL001. Bosutinib

Protocol number

CABL001A2301

Study registered at the country of origin: Specify

Type of registration: Justify

LCTR was already initiated, original file was previously submitted

Primary sponsor: Country of origin

**Novartis Pharmaceuticals** 

Date of registration in national regulatory agency

21/12/2017

Acronym

**ASCEMBL** 

Acronym



#### Key inclusion and exclusion criteria: Inclusion criteria

Male or female patients with a diagnosis of CML-CP ≥ 18 years of age

Patients must meet all of the following laboratory values at the screening visit:

- •< 15% blasts in peripheral blood and bone marrow</p>
- •< 30% blasts plus promyelocytes in peripheral blood and bone marrow</p>
- •< 20% basophils in the peripheral blood
- •≥ 50 x 109/L (≥ 50,000/mm3) platelets
- •Transient prior therapy related thrombocytopenia (< 50,000/mm3 for ≤ 30 days prior to screening) is acceptable
- •No evidence of extramedullary leukemic involvement, with the exception of hepatosplenomegaly

BCR-ABL1 ratio ≥ 1% IS according to central laboratory at the screening examination

Prior treatment with a minimum of 2 prior ATP-binding site TKIs (i.e. imatinib, nilotinib, dasatinib, radotinib or ponatinib)

Failure (adapted from the 2013 ELN Guidelines Bacarrani 2013) or intolerance to the most recent TKI therapy at the time of screening •Failure is defined for CML-CP patients (CP at the time of initiation of last therapy) as follows. Patients must meet at least 1 of the following

- •Three months after the initiation of therapy: No CHR or > 95% Ph+ metaphases
- $\bullet$ Six months after the initiation of therapy: BCR-ABL1 ratio > 10% IS and/or > 65% Ph+ metaphases
- •Twelve months after initiation of therapy: BCR-ABL1 ratio > 10% IS and/or > 35% Ph+ metaphases
- •At any time after the initiation of therapy, loss of CHR, CCyR or PCyR
- •At any time after the initiation of therapy, the development of new BCR-ABL1 mutations which potentially cause resistance to study treatment
- •At any time after the initiation of therapy, confirmed loss of MMR in 2 consecutive tests, of which one must have a BCR-ABL1 ratio ≥ 1% IS
- At any time after the initiation of therapy, new clonal chromosome abnormalities in Ph+ cells: CCA/Ph+
- Intolerance is defined as:
- •Non-hematologic intolerance: Patients with grade 3 or 4 toxicity while on therapy, or with persistent grade 2 toxicity, unresponsive to optimal management, including dose adjustments (unless dose reduction is not considered in the best interest of the patient if response is already suboptimal)
- •Hematologic intolerance: Patients with grade 3 or 4 toxicity (absolute neutrophil count [ANC] or platelets) while on therapy that is recurrent after dose reduction to the lowest doses recommended by manufacturer

Key inclusion and exclusion criteria: Gender

Key inclusion and exclusion criteria: Specify gender

**Both** 

18

Key inclusion and exclusion criteria: Age minimum

Key inclusion and exclusion criteria: Age maximum

99

### Key inclusion and exclusion criteria: Exclusion criteria

Known presence of the T315I or V299L mutation at any time prior to study entry Known second chronic phase of CML after previous progression to AP/BC Previous treatment with a hematopoietic stem-cell transplantation Patient planning to undergo allogeneic hematopoietic stem cell transplantation

Cardiac or cardiac repolarization abnormality, including any of the following:

- History within 6 months prior to starting study treatment of myocardial infarction (MI), angina pectoris, coronary artery bypass graft (CABG)
- · Clinically significant cardiac arrhythmias
- QTcF at screening ≥450 msec (male patients), ≥460 msec (female patients)
- · Long QT syndrome, family history of idiopathic sudden death or congenital long QT syndrome, or any of the following:
- Risk factors for Torsades de Pointes (TdP)
- · Concomitant medication(s) with a known risk of Torsades de Pointes per www.qtdrugs.org that cannot be discontinued or replaced 7 days prior to starting study drug by safe alternative medication.
- Inability to determine the QTcF interval
- Severe and/or uncontrolled concurrent medical disease
- · History of acute pancreatitis within 1 year of study entry or past medical history of chronic pancreatitis
- · History of acute or chronic liver disease
- Treatment with medications that meet one of the following criteria and that cannot be discontinued at least one week prior to the start of treatment with study treatment
- · Moderate or strong inducers of CYP3A
- Moderate or strong inhibitors of CYP3A and/or P-gp
- · Women of child-bearing potential, unless they are using highly effective methods of contraception during dosing and for 3 days after last dose
- Sexually active males unless they use a condom during intercourse while taking the drug during treatment and for 3 days after stopping treatment and should not father a child in this period. A condom is required to be used also by vasectomized men as well as during intercourse with a male partner in order to prevent delivery of the drug via semen.

#### Type of study

Interventional

Pharmaceutical

Type of intervention

Type of intervention: Specify type

N/A





Trial scope: Specify scope

Study design: Masking

Open (masking not used)

Year of authorization

Study design: Specify purpose

Study design: Specify assignment

IMP has market authorization: Specify

Month of authorization

Study phase

N/A

Trial scope

Therapy

**Study design: Allocation**Randomized controlled trial

Study design: Control

Active

Study design: Purpose

Treatment

Study design: Assignment

Other

IMP has market authorization

No

Name of IMP

ABL001

Type of IMP

Cell therapy

Pharmaceutical class

orally bioavailable specific BCR-ABL inhibitor with a novel mechanism of action.

Therapeutic indication

patients with Chronic Myelogenous Leukemia-CP who had prior treatment with two or more ATP

binding site TKIs

Therapeutic benefit

increase OS & PFS

Study model Study model: Explain model

N/A

Study model: Specify model

N/A

Time perspective: Explain time perspective

N/A N/A

Time perspective: Specify perspective

N/A

Target follow-up duration Target follow-up duration: Unit

Number of groups/cohorts

Biospecimen retention Biospecimen description



Samples without DNA

Bone marrow aspirate samples, Hematology , chemistry , coagulation, hepatitis , Liver function tests , are sent to Covance central laboratory, Navigate biopharma, molecular MD and Histogene X .

Target sample size

5

Date of first enrollment: Type

Actual

Date of study closure: Type

Actua

Recruitment status

Complete

Date of completion

31/10/2019

IPD sharing statement plan

Yes

Actual enrollment target size

3

Date of first enrollment: Date

05/09/2018

Date of study closure: Date

21/12/2022

Recruitment status: Specify

#### IPD sharing statement description

Novartis is committed to sharing with qualified external researchers, access to patient-level data and supporting clinical documents from eligible studies. These requests are reviewed and approved by an independent review panel on the basis of scientific merit. All data provided is anonymized to respect the privacy of patients who have participated in the trial in line with applicable laws and regulations.

### Additional data URL

https://clinicaltrials.gov/ct2/show/record/NCT03106779?id=cabl001a2301&rank=1

Admin comments

Trial status

Approved

Secondary Identifying Numbers	
Full name of issuing authority	Secondary identifying number
Clinical Trials.Gov	NCT03106779

### **Sources of Monetary or Material Support**

Name

Novartis Pharma Services Inc.





Secondary Sponsors	
Name	
NA NA	

Contact for Public/Scientific Queries						
Contact type	Contact full name	Address	Country	Telephone	Email	Affiliation
Public	Ali Bazarbachi	Beirut	Lebanon	009613612 434	bazarbac@aub.e du.lb	American University of Beirut Medical Center
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Public	Joseph Kattan	Beirut	Lebanon	009613635 913	jkattan62@hotm ail.com	Hotel Dieu De France
Public	Dany ABi Gerges	Mansourieh	Lebanon	009613341 960	abgerges@idm.n et.lb	Bellevue Medical Center

Centers/Hospitals Involved in the Study			
Center/Hospital name	Name of principles investigator	Principles investigator speciality	Ethical approval
Bellevue Medical Center	Dr Dany Abi Gerges	Hematology Oncology	Approved
American University of Beirut Medical Center	Dr. Ali Bazarbachi	Hematology Oncology	Approved
Hotel Dieu De France	Dr Joseph Kattan	Hematology Oncology	Approved

Ethics Review				
Ethics approval obtained	Approval date	Contact name	Contact email	Contact phone
American University of Beirut Medical Center	05/06/2018	Fuad Ziyadeh	fz05@aub.edu.lb	+961 (0) 1 350 000 ext:5445
Hotel Dieu de France	02/10/2017	Sami Richa	cue@usj.edu.lb	961421229
Bellevue Medical Center	23/11/2017	Ghassan Maalouf	gmaalouf@bmc.com.lb	+961 1 682666 ext 5006



Countries of Recruitment
Name
Lebanon
Argentina
Australia
Belgium
Bulgaria
Canada
Czech Republic
France
Germany
Hungary
Italy
Japan
Republic of Korea
Netherlands
Turkey
United States of America
Saudi Arabia
United Kingdom

Health Conditions or Problems Studied		
Condition Code Keyword		
Chronic Myelogenous Leukemia	Leukaemia, unspecified (C95.9)	CML



Interventions			
Intervention	Description	Keyword	
Physical examination, Vital Sign, Height and weight, ECOG performance status, Laboratory chemistry and hematology, Serology, Electrocardiogram (ECG), Echocardiogram, Pulmonary function tests, PK sampling (full/sparse), Bone Marrow Biopsy, Patient Report Outcomes (MDASI-CML, PGIC, WPAI, EQ5D-5L, resource	ICF, Lab tests, physical examination, ECG	Lab, ECG, ICF, BMA	

Primary Outcomes		
Name	Time Points	Measure
Major Molecular Response (MMR) rate	24 weeks	24 wks

Key Secondary Outcomes		
Name	Time Points	Measure
Major Molecular Response (MMR) rate	96 weeks after the last patient received the first study dose	96 weeks after first dose
Complete Cytogenetic response rate	24,48,96 weeks	24,48,96 weeks



Trial Results	
Summary results	
Study results globally	
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	