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Study to Evaluate Treatment Compliance, Efficacy and Safety of an Improved Deferasirox Formulation (Granules) in Pediatric Patients (2-<18 Years Old) With Iron Overload (CALYPSO)

11/08/2025 20:38:15

Main Information Primary registry identifying number Protocol number LBCTR2019020197 ICL670F2202 MOH registration number ص/6428 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 recently initiated, original file was previously submitted by Paper Date of registration in national regulatory agency 15/07/2015 **Primary sponsor** Primary sponsor: Country of origin Novartis Pharmaceuticals Novartis Pharma Services Inc. Date of registration in primary registry Date of registration in national regulatory agency 23/09/2019 15/07/2015 Public title Acronym Study to Evaluate Treatment Compliance, Efficacy and Safety of an CALYPSO Improved Deferasirox Formulation (Granules) in Pediatric Patients (2-<18 Years Old) With Iron Overload (CALYPSO) Scientific title Acronym A randomized, open-label, multicenter, two arm, phase II study to evaluate treatment compliance, efficacy and safety of an improved deferasirox formulation (granules) in pediatric patients with iron overload Brief summary of the study: English This is a randomized, open-label, multicenter, two arm, phase II study to evaluate treatment compliance and change in serum ferritin of a deferasirox granule formulation and a deferasirox DT formulation in children and adolescents aged ≥ 2 and < 18 years at enrollment with any transfusion-dependent anemia requiring chelation therapy due to iron overload, to demonstrate the effect of improved compliance on iron burden. Randomization will be stratified by age groups (2 to <10 years, 10 to <18 years) and prior iron chelation therapy (Yes/ No). There will be two study phases which include a 1 year core phase where patients will be randomized to a 48 week treatment period to either

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occurs first

Deferasirox DT or granules, and an optional extension phase where all patients will receive the granules up to 5 years. Patients who demonstrated benefit to granules or DT in the core phase, and/or express the wish to continue in the optional extension phase on granules, will be offered this possibility until there is local access to the new formulation (granules or FCT) or up to 5 years, whichever

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Brief summary of the study: Arabic

در اسة عشوانيَّة التوزيع، مفتوحة اللصاقة، متعددة المراكز، ذات مجموعتين، في المرحلة الثانية لتقييم الامتثال للعلاج بصيغة ديفيرازير وكس محمنة (حبيبات) وفعاليَتها وسلامتها لدى الأطفال المرضى الذين يعانون من الحديد الزائد

Health conditions/problem studied: Specify

Pediatric Patients (2-<18 Years Old) With Iron Overload

Interventions: Specify

•Drug: Deferasirox granule formulation Deferasirox granules will be provided as stick packs containing 90 mg, 180 mg and 360 mg granules for oral use.

Other Name: ICL670

•Drug: Deferasirox DT formulation Deferasirox DT will be provided as 125 mg, 250 mg and 500 mg dispersible tablets for oral use

Other Name: ICL670

Key inclusion and exclusion criteria: Inclusion criteria

•Written informed consent/assent before any study-specific procedures. Consent will be obtained from parent(s) or legal guardians. Investigators will also obtain assent of patients according to local guidelines.

•Male and female children and adolescents aged ≥ 2 and < 18 years. [France: Male and female children and adolescent aged ≥ 2 and < 18 years old, however children aged ≥ 2 and ≤ 6 years can be enrolled only when deferoxamine treatment is contraindicated or inadequate in these patients as per investigator decision. Applicable to core phase only. Once in the core phase patients can turn 18 years and still be considered eligible, also for participation in the optional extension phase.

•Any transfusion-dependent anemia associated with iron overload requiring iron chelation therapy and with a history of transfusion of approximately 20 PRBC units and a treatment goal to reduce iron burden (300mL PRBC = 1 unit in adults whereas 4 ml/kg PRBC is considered 1 unit for children).

Serum ferritin > 1000 ng/mL, measured at screening Visit 1 and screening Visit 2 (the mean value will be used for eligibility criteria).
 Patient has to have participated and completed the 48 weeks core phase treatment as per protocol (For optional extension phase eligibility only).

Key inclusion and exclusion criteria: Gender	Key inclusion and exclusion criteria: Specify gender
Both	
12 · · · · · · · · · · · · · · · · · · ·	
Key inclusion and exclusion criteria: Age minimum	Key inclusion and exclusion criteria: Age maximum

Key inclusion and exclusion criteria: Exclusion criteria

•Creatinine clearance below the contraindication limit in the locally approved prescribing information (using Schwartz formula) at screening visit 1 or screening visit 2.

•Serum creatinine > 1.5 xULN at screening measured at screening Visit 1 and or screening Visit 2

•ALT and/or AST > 3.0 x ULN at screening visit 1 or screening visit 2.

•(Criterion no longer applicable, removed as part of Amendment 1): Prior iron chelation therapy.

•Liver disease with severity of Child-Pugh class B or C.

•Significant proteinuria as indicated by a urinary protein/creatinine ratio > 0.5 mg/mg in a second morning urine sample at screening Visit 1 or screening Visit 2.

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

Other protocol-defined Inclusion/Exclusion may apply.

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	Study design: Masking
Randomized controlled trial	Open (masking not used)

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Study design: Control	Study phase		
Active	2		
Study design: Purpose Treatment	Study design: Specify purpose N/A		
Study design: Assignment Single	Study design: Specify assignm	ent	
IMP has market authorization Yes, Lebanon and Worldwide	IMP has market authorization: 3	Specify	
Name of IMP Jadenu (ICL670) / Deferasirox	Year of authorization 2017	Month of authorization	
Type of IMP Others			
Pharmaceutical class Deferasirox is an N-substituted bis-hydroxyphenyl-triazole, a class of tridenta	ate iron chelators.		
Therapeutic indication			
Patients with Iron Overload/ Transfusion Dependent Anemia			
Therapeutic benefit			
 Change in serum ferritin in ICT naïve patients. The comparison of means between the two treatment arms of change from treatment in serum ferritin in pediatric ICT naïve patients with iron overload. 	baseline to week 24 of		
Study model	Study model Study model: Explain model		
N/A	N/A		
Study model: Specify model N/A			
Time perspective	Time perspective: Explain time	perspective	
Time perspective: Specify perspective			
Target follow-up duration	Target follow-up duration: Unit		
	,		
Number of groups/cohorts			
Biospecimen retention Samples with DNA**	Biospecimen description		



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Target sample size Actual enrollment target size 23 23 Date of first enrollment: Type Date of first enrollment: Date Actual 13/10/2016 Date of study closure: Type Date of study closure: Date Actual 31/12/2019 Recruitment status Recruitment status: Specify Complete		 MCHC, MCV, Platelets, Red blood cells, White blood cells(WBC) count with differential, RBC Morphology with Differential (Basophils, Eosinophils, Lymphocytes, Monocytes, Neutrophils) Biochemistry Albumin, Alkaline phosphatase, ALT, AST, Bicarbonate, Calcium, Chloride, Creatinine, Creatine kinase, Direct (conjugated) Bilirubin, Indirect Bilirubin, Total Bilirubin, Total Cholesterol, LDL, HDL, Lactate Dehydrogenase (LDH), Total Protein, Triglycerides, Blood Urea Nitrogen (BUN) or Urea, Uric Acid, C Reactive Protein (CRP), Urinalysis Microscopic Panel: Red Blood Cells, White Blood Cells, Casts, Crystals, Bacteria, Epithelial cells Macroscopic Panel (Dipstick): Color, Bilirubin, Blood, Glucose, Ketones, Leukocytes esterase, Nitrite, pH, Protein, Specific Gravity, Urobilinogen Hepatitis markers HbsAg, HbsAb, HbcAb, HCV RNA, Anti-HCV Additional tests Serum ferritin, creatinine clearance, urine protein/creatinine ratio, serum pregnancy test
Date of first enrollment: TypeDate of first enrollment: DateActual13/10/2016Date of study closure: TypeDate of study closure: DateActual31/12/2019Recruitment statusRecruitment status: SpecifyCompleteDate of completion21/12/2017IPD sharing statement planNoIPD sharing statement planNoNovartis 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. This trial data availability is according to the criteria and process described on www.clinicalstudydatarequest.comAdditional data URLThis trial data availability is according to the criteria and process described on www.clinicalstudydatarequest.com	Target sample size	Actual enrollment target size
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https://clinicaltrials.gov/ct2/show/NCT02435212?term=2013-004739-55&rank=1	Additional data URL	-
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Admin comments

Trial status

Approved

Secondary Identifying Numbers	
Full name of issuing authority	Secondary identifying number
Clinical Trials. gov	NCT02435212





Sources of Monetary or Material Support

Name

Novartis Pharma Services Inc.

Secondary Sponsors

Name

NA

Contact for Public/Scientific Queries						
Contact type	Contact full name	Address	Country	Telephone	Email	Affiliation
Public	Ali Taher	Beirut	Lebanon	01-350000 ext 5392	ataher@aub.edu. lb	Chronic Care Center
Scientific	Hind Khairallah	Sin El Fil	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			Ethical approval
Chronic Care Center	Dr Ali Taher	Hematology	Approved

Ethics Review				
Ethics approval obtained	Approval date	Contact name	Contact email	Contact phone
American University of Beirut Medical Center	15/06/2016	Fouad Ziyadeh	fz05@aub.edu.lb	+961 (0) 1 350 000 ext:5445
Chronic Care Center	11/07/2016	Michele Abi saad	cccmas@chroniccare.org.lb	+961 3 664 310



Countries of Recruitment

Name
Lebanon
Belgium
Bulgaria
Egypt
Oman
United States of America
India
Italy
France
Tunisia
Turkey

Health Conditions or Problems Studied			
Condition Code Keyword		Keyword	
Patients with Iron Overload/ Transfusion Dependent Anemia	Anaemia, unspecified (D64.9)	Transfusion Dependent Anemia	

Interventions			
Intervention	Description	Keyword	
Physical examination, height, weight, Hematology, Chemistry, Ferritin, Creatinine, Cleatinine Clearance, Hepatitis, Pregnancy Test, Urine Dipstick, Microscopic Urinalysis, Proteinuria, Urine Pregnancy Test, Liver function test, Ocular exam, audiometry, ECG, Electrocardiogram, PK sampling, vital signs, Growth and development	ICF, IMP, Lab tests and ECG , diary completion	ICF, IMP, Lab tests and ECG , diary completion	

Primary Outcomes			
Name	Time Points	Measure	
•Compliance (using stick/pack tablet count).	24 weeks	24 wks	
•Change in serum ferritin in ICT naive patients	baseline, 24 wks	baseline, 24 wks	



Key Secondary Outcomes		
Name	Time Points	Measure
•Compliance (using stick/pack tablet count)	48 weeks	48 wks
•Change in serum ferritin in ICT naive patients	baseline, 24 wks, 48 wks	baseline, 24 wks, 48 wks
•Overall safety, as measured by frequency and severity of adverse	from baseline to 48 wks	from baseline to 48 wks

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	