ADVOCATE (CL010_168)

A randomized, double-blind, placebo-controlled, phase 3 study to evaluate the safety and efficacy of avacopan (CCX168) in patients with ANCA-associated vasculitis treated concomitantly with rituximab or cyclophosphamide/azathioprine.

Sponsor: Chemocentryx

Mount Sinai Hospital - Site Activation: June 2017

Site Primary Investigator: Dr. Christian Pagnoux (christian.pagnoux@sinaihealthsystem.ca)

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Objective and Background:

To evaluate the efficacy of avacopan to induce and sustain remission when used in combination with CYC/AZA or RITUX in patients with active newly-diagnosed or relapsing ANCA-associated vasculitis.

Study Design:

- Phase 3 randomized, double-blind, double-dummy, placebo controlled trial for 52 weeks followed by an 8 week follow up period.
- Stratification factors:
- 1. Treatments:
 - I. IV RITUX 4 weekly infusions
 - II. IV CYC 6 infusions at specific intervals followed by oral AZA at week 15
- III. PO CYC daily followed by oral AZA at week 15
- 2. PR3 vs. MPO disease
- 3. Newly diagnosis vs. relapsing disease
- Randomization in a 1:1 ratio to one of two groups:
- Group A: Placebo avacopan + CYC/AZA or RITUX with full starting dose of prednisone
- Group B: avacopan + CYC/AZA or RITUX with placebo prednisone
- avacopan or placebo PO taken in the morning and
 hours later in the evening with food
- Prednisone and placebo-prednisone tapered according to protocol, and stopped at week 20
- Endpoint: patients achieving remission at week 26 (off prednisone) and maintaining remission until week
 52

Needed number of patients to enroll:

Approximately 300 patients will be enrolled

Inclusion Criteria:

- 1. Age ≥ 18 years
- 2. Newly-diagnosed or relapsed GPA or MPA where treatment with CYC or RITUX is needed
- 3. Current or historic PR3 or MPO-ANCA + result
- 4. BVAS: 1 major <u>or</u> ≥3 minor <u>or</u> ≥ proteinuria and hematuria
- 5. eGFR \geq 15ml/min/1.73m² at screening

Exclusion criteria:

- 1. Other known multi-system auto-immune disease or have had a kidney transplant
- Required dialysis, plasma exchange or CYC 12 weeks prior to screening or >3000 mg of IV methylprednisolone 4 weeks prior to screening or RITUX within 52 weeks to screening
- Taking PO prednisone of >10mg for more than 6 continuous weeks prior to screening
- 4. If on AZA, MMF, MTX, these drugs need to be stopped prior to on Day 1
- 5. Active cancer/history of malignancy within 5 years prior to screening
- 6. Positive HBV, HCV or HIV within 6 weeks of screening or received a live vaccine with 4 weeks of screening
- 7. Abnormal laboratory results prior to dosing or previous participation in CCX168 study
- 8. Pregnant/breast-feeding women

For more information on the study or enrollment procedure, please contact study site PI, sub-I or study coordinator using emails above, or by phone at 416-586-4800 ext. 8549 or 5519 or 2210

Study Schema for ADVOCATE Trial

Two primary endpoints (analyzed after 12 months):

Remission rate (based on BVAS) at 6 months

Sustained remission rate (based on BVAS) at 12 months



1 year treatment period

Avacopan, 30 mg twice daily

Test Group

(N = 150)

CYC, 12 weeks followed by AZA, or RTX, 4 weeks

Prednisone-matching placebo

Control Group (N = 150)

Avacopan-matching placebo twice daily

CYC, 12 weeks followed by AZA, or RTX, 4 weeks

Prednisone, 60 mg/day tapered to 0 over 20 weeks.

