


Titre	A Randomized, Multi-center, Double-blind, Placebo-controlled Phase 3 Study of Bemarituzumab Plus Chemotherapy Versus Placebo Plus Chemotherapy in Subjects With Previously Untreated Advanced Gastric or Gastroesophageal Junction Cancer With FGFR2b Overexpression
Protocole ID	FORTITUDE-101
ClinicalTrials.gov ID	<a href="https://clinicaltrials.gov/ct2/show/study/NCT05052801">NCT05052801</a>
Type(s) de cancer	Estomac Oesophage
Phase	Phase III
Type étude	Clinique
Médicament	Bemarituzumab + chimiothérapie versus placebo + chimiothérapie
Institution	CIUSSS DU CENTRE-OUEST-DE-L'ILE-DE-MONTREAL  HOPITAL GENERAL JUIF SIR MORTIMER B.DAVIS 3755 rue de la Côte Ste. Catherine, Montréal, QC, H3T 1E2
Ville	
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Statut	Actif en recrutement
Date d'activation	05-01-2023
But étude	The main objective of this study is to compare efficacy of bemarituzumab combined with oxaliplatin, leucovorin, and 5-fluorouracil (5-FU) (mFOLFOX6) to placebo plus mFOLFOX6 as assessed by overall survival (OS).
Critères d'éligibilité	<ul style="list-style-type: none"><li>• Adults with unresectable, locally advanced or metastatic gastric or gastroesophageal junction cancer not amenable to curative therapy</li><li>• Fibroblast growth factor receptor 2b (FGFR2b) overexpression positive as determined by centrally performed immunohistochemistry (IHC) testing, based on tumor sample either archival (obtained within 6 months/180 days prior to signing pre-screening informed consent) or a fresh biopsy</li><li>• Eastern Cooperative Oncology Group (ECOG) less than or equal to 1</li><li>• Measurable disease or non-measurable, but evaluable disease, according to Response Evaluation Criteria in Solid Tumors (RECIST) v 1.1</li><li>• Participant has no contraindications to mFOLFOX6 chemotherapy</li><li>• Adequate organ and bone marrow function:<ul style="list-style-type: none"><li>• absolute neutrophil count greater than or equal to 1.5 times <math>10^9/L</math></li><li>• platelet count greater than or equal to 100 times <math>10^9/L</math></li><li>• hemoglobin <math>\geq 9</math> g/dL without red blood cell (RBC) transfusion within 7 days prior to the first dose of study treatment</li><li>• aspartate aminotransferase (AST) and alanine aminotransferase (ALT) less than 3 times the upper limit of normal (ULN) (or less than 5 times ULN if liver involvement). Total bilirubin less than 1.5 times ULN (or less than 2 times ULN if liver involvement); with the exception of participants with Gilbert's disease)</li><li>• calculated or measured creatinine clearance (CrCl) of <math>\geq 30</math> mL/minute calculated using the formula of Cockcroft and Gault (<math>[140 - \text{Age}] \times \text{Mass [kg]} / [72 \times \text{Creatinine mg/dL}]</math>) (x 0.85 if female)</li><li>• international normalized ratio (INR) or prothrombin time (PT) less than 1.5 times ULN</li></ul></li></ul>

except for participants receiving anticoagulation, who must be on a stable dose of anticoagulant therapy for 6 weeks prior to enrollment

Critères d'exclusion

- Prior treatment for metastatic or unresectable disease (Note: prior adjuvant, neo-adjuvant, and peri-operative therapy is allowed if completed more than 6 months prior to first dose of study treatment)
- Prior treatment with any selective inhibitor of fibroblast growth factor - fibroblast growth factor receptor (FGF-FGFR) pathway
- Known human epidermal growth factor receptor 2 (HER2) positive
- Untreated or symptomatic central nervous system (CNS) disease or brain metastases
- Peripheral sensory neuropathy greater than or equal to Grade 2
- Clinically significant cardiac disease
- Other malignancy within the last 2 years (exceptions for definitively treated disease)
- Chronic or systemic ophthalmological disorders
- Major surgery or other investigational study within 28 days prior to first dose of study treatment
- Palliative radiotherapy within 14 days prior to the first dose of study treatment
- Abnormalities of the cornea that may pose an increased risk of developing a corneal ulcer