

ForPatients

by Roche

Non-Small Cell Lung Cancer (NSCLC) Non Small Cell Lung Carcinoma

A study to compare alectinib with chemotherapy in people with ALK-positive non-small cell lung cancer after surgery (ALINA)

A Phase III, Open-Label, Randomized Study to Evaluate the Efficacy and Safety of Adjuvant Alectinib Versus Adjuvant Platinum-Based Chemotherapy in Patients With Completely Resected Stage IB (Tumors Equal to or Larger Than 4cm) to Stage IIIA Anaplastic Lymphoma Kinase Positive Non-Small Cell Lung Cancer

Trial Status Active, not recruiting	Trial Runs In 27 Countries	Trial Identifier NCT03456076 2017-004331-37 BO40336
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The source of the below information is the publicly available website [ClinicalTrials.gov](https://clinicaltrials.gov). It has been summarised and edited into simpler language.

Trial Summary:

This randomized, active-controlled, multicenter, open-label, Phase III study is designed to investigate the efficacy and safety of alectinib compared with platinum-based in the adjuvant setting. Participants in the experimental arm will receive alectinib at 600 mg orally twice daily (BID) taken with food for 24 months. Participants in the control arm will receive one of the protocol specified platinum based chemotherapy regimens for 4 cycles. Following treatment completion, participants will be followed up for their disease until disease recurrence. At the time of disease recurrence, participants will enter a survival follow-up until death, withdrawal of consent or study closure, whichever occurs earlier.

Hoffmann-La Roche
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Phase 3
Phase

NCT03456076 2017-004331-37 BO40336
Trial Identifiers

Eligibility Criteria:

Gender
All

Age
>= 18 Years

Healthy Volunteers
No

1. Why is this study needed?

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Non-small cell lung cancer (NSCLC) is the most common type of lung cancer. NSCLC usually develops in the tissues lining the lungs and can spread to nearby lymph nodes and other organs.

Surgery is the first treatment for people with NSCLC that can be removed. Treatment, such as chemotherapy, can be given after surgery to reduce the risk of cancer coming back. However, treatment may not always work for people with different types of NSCLC. So, better treatments are needed.

Targeted therapy is a type of treatment that treats abnormal cells (e.g. cancer cells) in the body. It causes less harm to normal cells. This means it may cause fewer unwanted effects than chemotherapy. *ALK*-positive lung cancer is a specific type of NSCLC. It is caused by a mutation in a section of DNA (a gene) in the body called *anaplastic lymphoma kinase*, or *ALK*. A mutation is a change in a gene that can be sudden or passed on from parents so that the gene is different from what is found in healthy cells. The mutated version of *ALK* makes a protein that causes lung cells to start growing and multiplying in an uncontrolled and abnormal way. *ALK*-targeting medicines may work better than chemotherapy to stop NSCLC coming back after surgery.

This study is testing a medicine called alectinib. It is being developed to stop *ALK*-positive NSCLC coming back after a person has had surgery to remove it. Alectinib is an experimental medicine. This means health authorities (like the European Medicines Agency) have not approved alectinib for the treatment of people with *ALK*-positive NSCLC after they have had surgery. Alectinib is approved in many countries for treating *ALK*-positive NSCLC that has spread in the body.

This study aims to compare the effects of alectinib with chemotherapy in people with *ALK*-positive NSCLC after they have had surgery.

2. Who can take part in the study?

People of at least 18 years of age with *ALK*-positive NSCLC can take part in the study if they have had surgery to completely remove the cancer 1 to 3 months before starting the study. They must also be able to be given platinum-based chemotherapy (medicine that contains platinum).

People may not be able to take part in this study if they have been given an *ALK*-targeting medicine before, they require radiotherapy treatment after their lung cancer surgery, or if they have certain health problems, such as liver disease. People who are pregnant, or currently breastfeeding cannot take part in the study.

3. How does this study work?

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People will be screened to check if they are able to participate in the study. The screening period will take place from 1 month before the start of treatment.

Everyone in this study will join 1 of the 2 groups randomly (like flipping a coin) and be given either alectinib as a pill twice every day for 2 years OR standard chemotherapy, given as a drip into the vein every 3 weeks for 3 months. Participants will have an equal chance of being placed in either group.

This is an open-label study. This means everyone involved, including the participant and the study doctor, will know the study treatment the participant has been given.

During this study, the study doctor will see participants regularly. They will see how well the treatment is working and any unwanted effects participants may have. Participants will have a follow-up visit 1 month after completing the study treatment, during which the study doctor will check on the participant's wellbeing. If NSCLC comes back or they are diagnosed with a different type of NSCLC, participants will be asked to attend a clinic visit within 1 month. They will then receive follow-up telephone calls from the study doctor to check on their wellbeing every 6 months for as long as they agree to it. Total time of participation in the study could be more than 7 years depending on when they join the study. Participants have the right to stop study treatment and leave the study at any time, if they wish to do so.

4. What are the main results measured in this study?

The main result measured in the study to assess if the medicine has worked is the time between no signs of NSCLC on scans or tests after surgery and the signs that it has come back.

Other key results measured in the study include:

- How long people live
- The number and seriousness of unwanted effects
- How alectinib gets to different parts of the body, and how the body changes alectinib and gets rid of it
- Questionnaire answers directly from the participant on how well they are doing, and how their health and treatment impact their daily life and their ability to function and enjoy life

5. Are there any risks or benefits in taking part in this study?

Taking part in the study may or may not make participants feel better. But the information collected in the study can help other people with similar health conditions in the future.

It may not be fully known at the time of the study how safe and how well the study treatment works. The study involves some risks to the participant. But these risks are

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generally not greater than those related to routine medical care or the natural progression of the health condition. People interested in taking part will be informed about the risks and benefits, as well as any additional procedures or tests they may need to undergo. All details of the study will be described in an informed consent document. This includes information about possible effects and other options of treatment.

Risks associated with the study drugs Participants may have unwanted effects of the drugs used in this study. These unwanted effects can be mild to severe, even life-threatening, and vary from person to person. During this study, participants will have regular check-ups to see if there are any unwanted effects.

Alectinib and platinum-based chemotherapy Participants will be told about the known unwanted effects of alectinib and platinum-based chemotherapy, and possible unwanted effects based on human and laboratory studies or knowledge of similar medicines.

Known unwanted effects of alectinib include wanting to throw up, throwing up, a low number of red blood cells, tiredness, pain or discomfort in the head and muscle pain.

Known unwanted effects of platinum-based chemotherapy include throwing up, wanting to throw up, a low number of red blood cells, frequent watery stools and hair loss.

Platinum-based chemotherapy will be given as a drip into a vein. Known unwanted effects of a drip into a vein include throwing up, wanting to throw up, a feeling of coldness that makes the body shiver, low or high blood pressure, fever, pain or discomfort in the head, frequent watery stools, shortness of breath and cough .

The study medicine(s) may be harmful to an unborn baby. Women and men must take precautions to avoid exposing an unborn baby to the study treatment.