CLINICAL TRIALS

Office based non-oncology urology trials

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BENIGN PROSTATIC HYPERPLASIA

A PHASE III STUDY OF CETRORELIX PAMOATE INTERMITTENT IM DOSAGE REGIMENS IN PATIENTS WITH SYMPTOMATIC BPH: A 1-YEAR PLACEBO-CONTROLLED EFFICACY STUDY AND LONG-TERM

D-20762-Z033
CMX Research
To develop a safe and tolerable intermittent dosage regimen of cetrorelix pamoate,
that provides prolonged improvement in BPH-related signs and symptoms.
Benign prostatic hyperplasia, voiding symptoms: IPSS ≥ 13.
n = 594, primary endpoint: absolute change in IPSS between baseline (week -1) and
week 52. Primary safety endpoint: incidence of treatment-emergent AEs.
C T T T

A PHASE II STUDY ASSESSING THE SAFETY AND EFFICACY OF A SINGLE TREATMENT OF 100 U, 200 U, or 300 U BOTOX® COMPARED WITH PLACEBO INJECTED INTO THE PROSTATE TO TREAT LOWER URINARY TRACT SYMPTOMS (LUTS) IN PATIENTS DUE TO BENIGN PROSTATIC HYPERPLASIA

TRACE STWIFTEND (LETS) IN TREEND DEL TO DENIGN TROUMTIE THE ER EROM	
Trial ID:	191622-517-05
Coordination:	CMX Research
Trial design:	A phase II study assessing the safety and efficacy of a single treatment of BOTOX® compared with placebo injected into the prostate.
Detiont nonulation.	
Patient population:	Lower urinary tract symptoms due to benign prostatic hyperplasia.
Sample size:	n = 300

ERECTILE DYSFUNCTION

PIVOTAL PHASE III TRIAL TO INVESTIGATE THE EFFICACY AND SAFETY OF AN ORODISPERSIBLE TABLET VARDENAFIL VERSUS PLACEBO IN THE TREATMENT OF MEN WITH ERECTILE DSYFUNCTION (ED) - A FIXED-DOSE, DOUBLE-BLIND, RANDOMIZED MULTI-CENTER TRIAL N- POTENT 2 Trial ID: 12094 **Coordination:** CMX Research Inc. Trial design/treatment: This randomized double-blind, placebo controlled, parallel-arm international, multi-center study will examine the efficacy and safety of BAY 389456 Orodispersible tablet versus placebo in males 18 years and older with erectile dysfunction. **Patient population:** Male subject 18 years of age and older and have a clinical diagnosis of ED and who meet eligibility criteria. Sample size: n = 280

OVERACTIVE BLADDER

A DOUBLE-BLIND, RANDOMIZED, PARALLEL, PLACEBO-CONTROLLED, MULTICENTER STUDY EVALUATING THE EFFECT OF TREATMENT WITH TOPICALLY ADMINISTERED OXYBUTYNIN GEL IN PATIENTS WITH URINARY FREQUENCY, AND URGE AND MIXED URINARY INCONTINENCE WITH A PREDOMINANCE OF URGE INCONTINENCE EPISODES Trial ID: 20070060

Trial ID:	20070060
Coordination:	CMX Research
Trial design:	To evaluate the effects of oxybutynin gel (at doses of 56 mg oxybutynin/day and
	84 mg oxybutynin/day), relative to placebo in patients with urge and mixed
	urinary incontinence with a predominance of urge incontinence on:
Patient population:	Patients with urge and/or mixed urinary incontinence with a predominance of urge
	incontinence episodes (at least 2:1 urge to stress incontinence episodes).
Sample size & endpoint:	n = 600, the change from baseline to week 12 in the number of urinary incontinence
	episodes (UIE) per week, as determined from a 3-day patient daily diary.

RANDOMIZED, DOUBLE-BLIND, PLACEBO-CONTROLLED, PARALLEL GROUP STUDY OF VARDENAFIL 10 MG TWICE DAILY TO ASSESS THE EFFECT ON URODYNAMICS IN PATIENTS WITH OVERACTIVE BLADDER (DETRUSOR OVERACTIVITY)

Trial ID:	BAY-38-9456
Coordination:	CMX Research
Trial design:	To determine the therapeutic effect of vardenafil 10 mg taken twice daily (BID) on
	overactive bladder by means of urodynamic measurements (filling cystometry and
	pressure flow investigations).
Patient population:	Subjects with overactive bladder (with or without urge incontinence) for at least
	6 months. Forty percent subjects recruited should be male.
Sample size & endpoint:	n = 481, change from baseline in bladder volume at first detrusor contraction. Change
	in the number of daily micturition as reported in the patient diaries.

A RANDOMIZED, DOUBLE-BLIND, PARALLEL GROUP, ACTIVE CONTROLLED, MULTICENTER LONG-TERM STUDY TO ASSESS THE SAFETY AND EFFICACY OF THE BETA-3 AGONIST YM178 (50 MG QD AND 100 MG QD) IN SUBJECTS WITH SYMPTOMS OF OVERACTIVE BLADDER

100 110 QD/ 11000 JLC1	
Trial ID:	YM178-CL-049
Coordination:	CMX Research
Trial design:	To assess the safety and tolerability of long-term treatment with YM178 (50 mg qd
	and 100 mg qd) in subjects with symptoms of overactive bladder.
Patient population:	The study will randomize female and male subjects at least 18 years of age, who have
	symptoms of overactive bladder (urinary frequency and urgency with or without
	incontinence for at least 3 months).
Sample size & endpoint:	n = 2500, approximately 2500 subjects will be enrolled. This number is not based on
	a formal sample size calculation. Primarily, subjects who completed the pivotal studies
	(178-CL-046 or 178-CL-047) will be enrolled. However, subjects not participating in
	these studies may be enrolled as well.

THE EFFECTS OF INTRAVESICAL INJECTION OF BOTOX® ON PATIENTS WITH URINARY URGENCY AND FREQUENCY WITHOUT INCONTINENCE DUE TO OVERACTIVE BLADDER

FREQUENCY WITHOUT	INCONTINENCE DUE TO OVERACTIVE BLADDER
Trial ID:	ALG-CMX-01
Coordination:	CMX Research
Trial design:	The study proposes to examine the efficacy of Botox® in dry OAB patients by using standard voiding diaries and quality of life (QOL) questionnaires. In addition, safety and the duration of the clinical response will be monitored.
Patient population:	Urinary frequency and urgency without incontinence.
Sample size & endpoint:	n = 20, the primary endpoint is the number of urinary urgency episodes per day as recorded in a 3-day bladder diary at 3 months.
	IDOMIZED, DOUBLE-BLIND, PARALLEL GROUP STUDY TO EVALUATE THE OF TWO DOSES OF DR-3001 VERSUS PLACEBO IN WOMEN WITH OVERACTIVE
Trial ID:	DR-OXY-301
Coordination:	Duramed Research Inc.
Trial design:	Phase III to evaluate the efficacy and safety of DR-3001 (Oxybutynin Vaginal Ring releasing 4 mg or 6 mg/day) versus placebo over 12 weeks, in women diagnosed with overactive bladder who have symptoms of pure or predominantly urge incontinence, urgency and frequency.
Patient population:	1161
Sample size & endpoint:	n = 1548, the primary measure of efficacy will be the change from Visit 1 (Baseline) to Visit 5 (Treatment Week 12/Early Withdrawal) in total weekly number of incontinence episodes.
A PHASE IIIb STUDY COMPARING THE EFFICACY OF FESOTERODINE TO PLACEBO AND TOLTERODINE ER IN SUBJECTS WITH OVERACTIVE BLADDER AFTER 12 WEEKS OF TREATMENT Trial ID: A0221008	
Coordination:	CMX Research
Trial design:	A 12-week, randomized, double-blind, double-dummy, placebo-controlled, parallel- group, multicenter trial to evaluate the efficacy and safety of fesoterodine in comparison to tolterodine ER in patients with overactive bladder.
Patient population: Sample size & endpoint:	Overactive bladder with symptoms of frequency, urgency, and urgency incontinence. n = 1675, primary endpoint: change in mean number of urgency urinary incontinence
	(UUI) episodes per 24 hours at week 12 relative to the baseline.
TREATMENT OF MEN WI ERECTILE DYSFUNCTIO	ASSESS THE EFFICACY AND SAFETY OF MODIFIED RELEASE UK-369,003 IN THE ITH STORAGE LOWER URINARY TRACT SYMPTOMS (LUTS) WITH AND WITHOUT IN (ED).
TREATMENT OF MEN WI ERECTILE DYSFUNCTIO Trial ID:	ASSESS THE EFFICACY AND SAFETY OF MODIFIED RELEASE UK-369,003 IN THE ITH STORAGE LOWER URINARY TRACT SYMPTOMS (LUTS) WITH AND WITHOUT IN (ED). A3711047
TREATMENT OF MEN WI ERECTILE DYSFUNCTIO	ASSESS THE EFFICACY AND SAFETY OF MODIFIED RELEASE UK-369,003 IN THE ITH STORAGE LOWER URINARY TRACT SYMPTOMS (LUTS) WITH AND WITHOUT IN (ED).

- Patient population:group phase II study with five treatment arms.Patient population:Male aged 18 and above, with documented clinical diagnosis of OAB, with mean
urinary frequency ≥ 8 times/24 hours, and mean number of urgency episodes with
or without urgency incontinence ≥ 1 episode/24 hours.
- Sample size & endpoint:
 n = 300, efficacy endpoints based on: LUTS diary scores, International Prostate Symptom

 Score,
 Overactive Bladder questionnaire, Patient Perception of Bladder Condition,

 International Consultation on Incontinence Questionnaire, Erectile Function domain of

 International Index of Erectile Function, Quality of Erection questionnaire, Patient Reported

 Treatment Impact questionnaire, Population Pharmacokinetics.

INTERSTITIAL CYSTITIS

A MULTI-CENTER, RANDOMIZED, DOUBLE-BLIND, PARALLEL GROUP EVALUATION OF THE EFFICACY AND SAFETY OF URACYST® (INTRAVESICAL SODIUM CHONDROITIN SULFATE) VERSUS VEHICLE		
PLACEBO IN PATIENTS WITH INTERSTITIAL CYSTITIS/PAINFUL BLADDER SYNDROME (IC/PBS)		
Trial ID:	UR07001	
Coordination:	CMX Research	
Trial design:	Prospective, randomized, double-blind, vehicle placebo-controlled, 12-week study, including a 6-week treatment period, followed by a 6-week follow-up period.	
Patient population:	Male and females at least 18 years of age and have a clinical diagnosis of IC/PBS and who meet eligibility criteria.	
Sample size:	n = 50	
A PLACEBO CONTROLLED RANDOMIZED, 12-WEEK, DOSE-RANGING, DOUBLE-BLIND STUDY VERSUS PLACEBO USING TOLTERODINE AS A STUDY CALIBRATOR, TO EVALUATE EFFICACY AND SAFETY OF SSR240600C IN WOMEN WITH OVERACTIVE BLADDER INCLUDING URGE URINARY INCONTINENCE		
Trial ID:	DRI6271	
Coordination:	CMX Research	
Trial design: Patient population:	A multi-center randomized, double-blind, 5-arm, parallel group study comparing three doses of SSR240600 (25, 50, and 100 mg) to placebo using tolterodine as a calibrator. The study consists of 3 phases: a) screening period of 1 week, b) double-blind treatment period of 12 weeks, and c) follow-up period of 2 weeks. Females \geq 18 and \leq 70 years of age with diagnosis of overactive bladder with symptoms of urgency with urge incontinence and frequency (\geq 1 urgency episode per day, \geq 8 micturitions per day, \geq 5 urge urinary incontinence (UUI) episodes/week), which may be associated with nocturia, but without bladder pain.	
Sample size:	n = 800	

PREMATURE EJACULATION

A PHASE IIb, MULTI-CENTER, RANDOMIZED, DOUBLE-BLIND, PLACEBO-CONTROLLED STUDY, WITH OPEN-LABEL FOLLOW ON, TO EVALUATE THE EFFICACY, SAFETY AND TOLERABILITY OF PSD502 IN SUBJECTS WITH PREMATURE EJACULATION (PE)

Trial ID:	PSD502-PE-002
Coordination:	CMX Research
Trial Design:	Phase IIb, multi-center, randomized, double-blind, placebo-controlled study. Subjects
	will be randomized to PSD502 or placebo in a 2:1 ratio.
Patient Population:	Male subjects with PE according to Diagnostic and Statistical Manual of Mental
	Disorders (DSM IV) criteria, aged 18 and over.
Sample Size:	n = 240-300