CLINICAL STUDY RESULTS

Study of somatuline autogel (lanreotide autogel) in non-functioning neuroendocrine tumours of the pancreas, intestines or unknown origin (CLARINET)

Overall, the results provide evidence to suggest that lanreotide autogel injections may be an effective treatment for patients with non-functioning tumours of the pancreas, intestines or unknown origin.

The results shown in this summary represent one clinical study. Please be aware that other clinical studies either singularly or combined may produce different results.

This layperson summary has been produced by a company independent of Ipsen.
It has been reviewed by employees of Ipsen, as well as a group of laypersons and patients.

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WHAT WAS THE STUDY ABOUT?

Non-functioning tumours of the pancreas, intestines or unknown origin (referred to as neuroendocrine tumours) are a rare group of slow growing tumours found in the digestive system including the intestines and the pancreas, which often have no specific symptoms.

Not all neuroendocrine tumours can be removed by surgery, so medical treatments are often used to help control the growth and spread (progression) of the tumour. In clinical studies of cancer treatments, one way to see if a new treatment may work is by measuring progression-free survival. Progression-free survival is calculated as the time from the beginning of treatment until a patient has a sign that the disease has progressed.

The aim of this study was to measure on average whether patients who were given lanreotide autogel injections had a longer progression-free survival than patients who were given placebo injections (a dummy treatment).*

** The average used in this study was the median ("middle value").*

The study took place between June 2006 and April 2013. In total, 204 patients took part in the study; 170 patients from Europe (Austria, Belgium, Czech Republic, Denmark, France, Germany, Italy, Poland, Slovakia, Spain, Sweden, the Netherlands, and United Kingdom), 30 patients from the United States, and 4 patients from India.

A computer selected at random which patients received lanreotide autogel injections and which patients received placebo injections (known as randomisation).

Neither the patients nor the study team were told which treatments were administered (known as double-blind) until the study had finished.

WHO COULD TAKE PART IN THE STUDY?

To take part in the study, patients had to be aged 18 years or older

diagnosed with non-functioning neuroendocrine tumour(s) of the pancreas, intestines or unknown origin

have a "well-differentiated" tumour (these tumours have cancer cells that look like normal cells and tend to grow and spread slowly)

have at least one tumour that could be measured by a CT or MRI scan (these provide internal images of the body)

WHO WAS UNABLE TO TAKE PART IN THE STUDY?

Patients were unable to take part in the study if they had previously taken treatment similar to lanreotide autogel (known as somatostatin analogues) at any time, or received other cancer treatments (such as chemotherapy) within 6 months before the start of the study.

WHO TOOK PART IN THE STUDY?

204 PATIENTS

107 MEN

97 WOMEN

63 YEARS AVERAGE AGE

TREATMENTS

101 LANREOTIDE AUTOGEL

103 PLACEBO

TUMOUR LOCATION

91 PANCREAS

87 INTESTINES

26 UNKNOWN

WHAT TREATMENTS WERE USED?

STUDY TREATMENT

Lanreotide autogel (120mg dose) administered via an injection every month for a maximum of 24 months.

VS

PLACEBO TREATMENT

Salt and water solution administered via an injection every month for a maximum of 24 months.

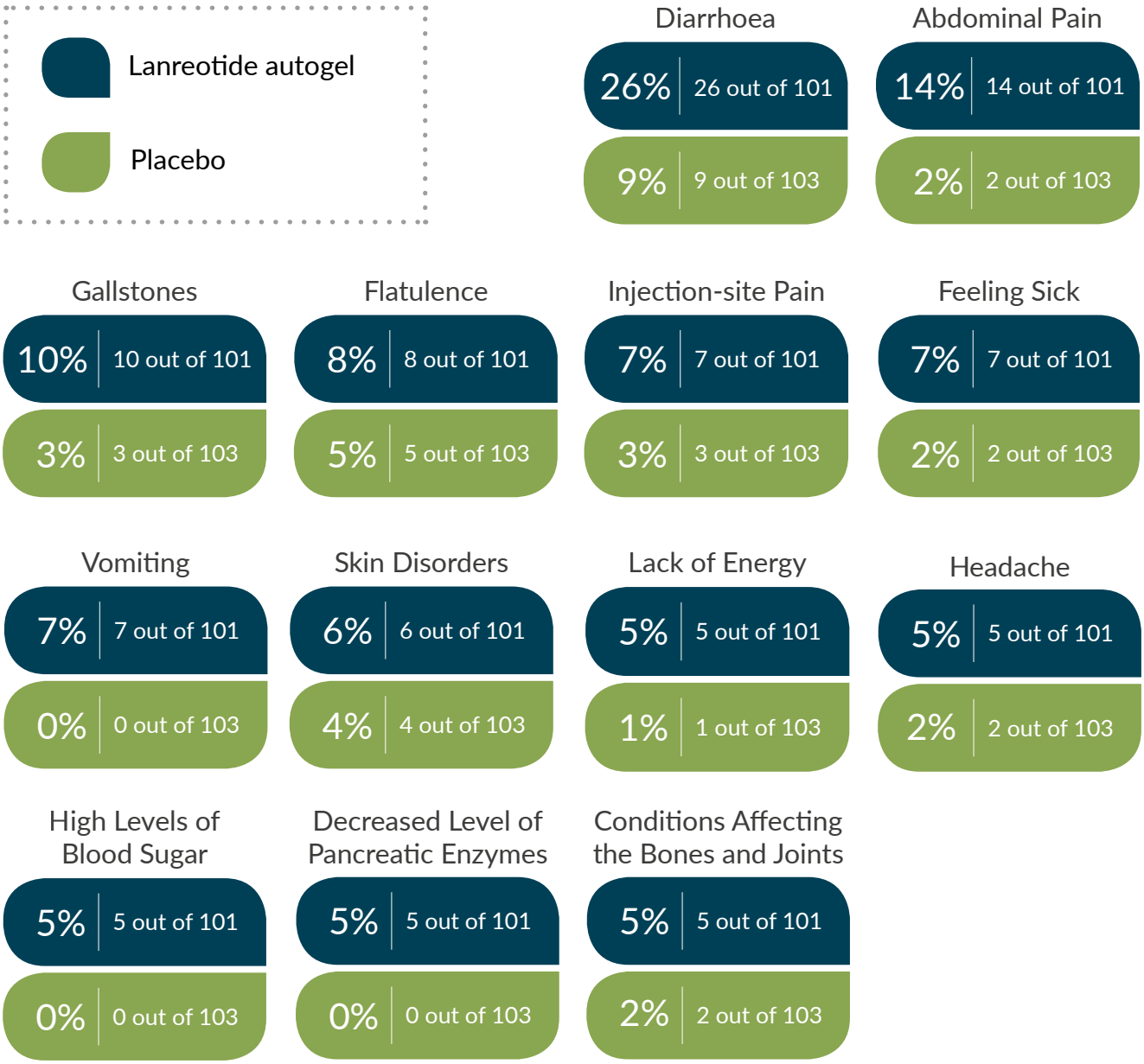
HOW DID THE TREATMENT MAKE PATIENTS FEEL?

During clinical studies, patients are asked to report if they feel unwell or notice anything different about their bodies. If the study doctor thinks these feelings or changes may be related to the treatment the patient is taking, it is called a treatment-related side effect or treatment-related adverse event.

50 out of 101 patients (50%) who were treated with lanreotide autogel injections experienced a treatment-related side effect, compared to 29 out of 103 patients (28%) who were treated with placebo injections. Only 1 patient who received lanreotide autogel injections stopped taking part in the study because of the side effect(s) he/she experienced.

Of the 79 patients who experienced treatment-related side effects, the most common events reported in this study are shown here. Some patients experienced more than one event, so they have been counted more than once.

The numbers below show the percentage of patients who had a treatment-related side effect out of the total number of patients who took part in the study.



Side effects that are life-threatening or require an individual to go to hospital are considered serious. 3 out of 101 patients (3%) who received lanreotide autogel injections and 1 out of 103 patients (1%) who received placebo injections experienced a serious treatment-related side effect that required hospital treatment.

HOW DID PROGRESSION-FREE SURVIVAL COMPARE BETWEEN THE TWO TREATMENTS?

LANREOTIDE AUTOGEL

>24
MONTHS*

Patients who were treated with lanreotide autogel injections had an average progression-free survival of more than 24 months.

PLACEBO

~18
MONTHS*

Patients who were treated with placebo injections had an average progression-free survival of approximately 18 months.

** 1 month was calculated as 4 weeks.*

By the end of the study, 53 out of 101 patients (53%) who were treated with lanreotide autogel injections were progression-free. This was more than double the number of patients who were progression-free when treated with placebo injections (26 out of 103 patients [25%]).

DID EITHER OF THE TREATMENTS REDUCE THE SIZE OF THE TUMOURS?

Of the patients that could have their tumour size assessed, a reduction was seen in more patients who were treated with lanreotide autogel injections compared to placebo injections.

49 out of 97 patients (51%) who were treated with lanreotide autogel injections had a reduction in the size of their tumour compared to 18 out of 101 patients (18%) who were treated with placebo injections.

DID THE TREATMENTS IMPROVE QUALITY OF LIFE?

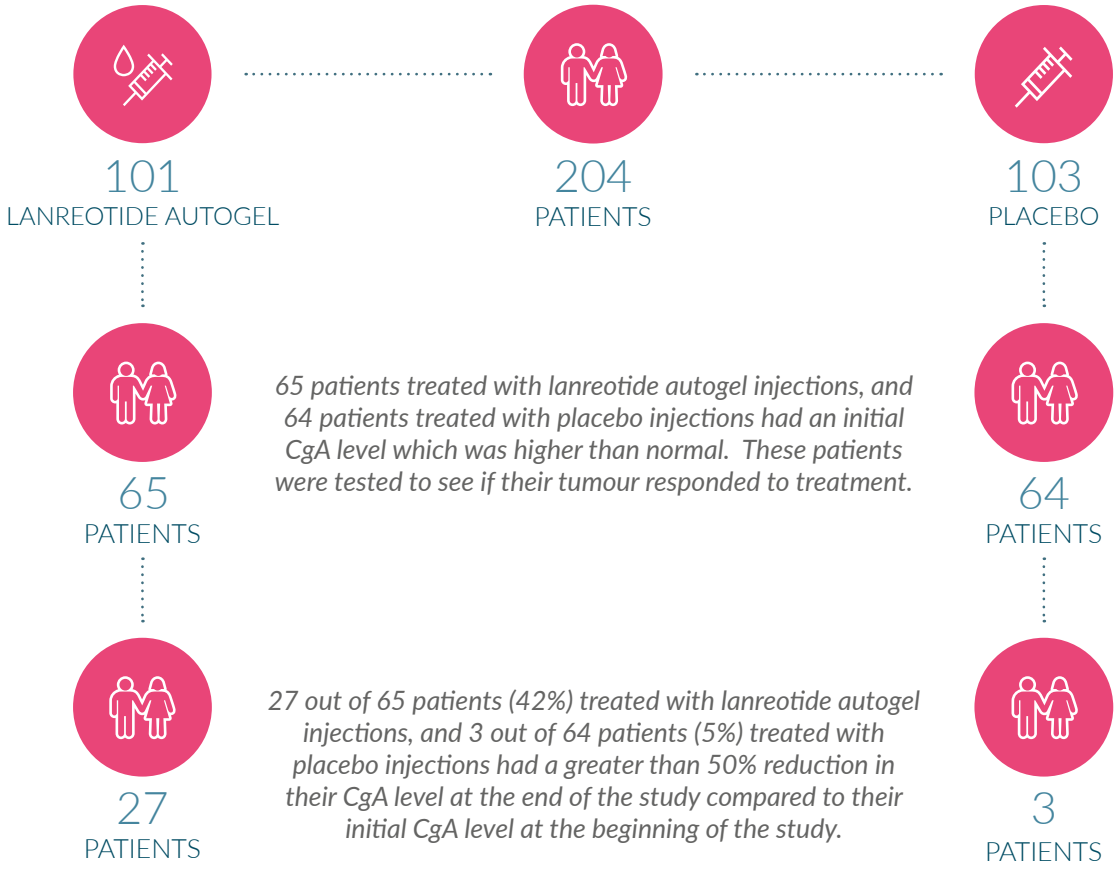
The clinical study team also looked at the impact neuroendocrine tumours have on a patient's quality of life. This includes the physical, mental, and emotional impacts of cancer. The results did not show any major difference in quality of life between patients who were treated with lanreotide autogel injections or placebo injections.

Sadly, 4 patients died during the study from causes unrelated to the treatment they were taking.

WHAT ELSE DID THE STUDY FIND OUT?

Blood samples were taken from patients during the study to look at changes in Chromogranin A (CgA) protein levels. CgA is secreted by neuroendocrine tumours and is often used as a "marker" to help doctors assess whether a treatment is working.

In clinical studies, a 50% or greater reduction in CgA level suggests a tumour might be responding to treatment.



Overall, the results of this study provide evidence to suggest that lanreotide autogel injections may be an effective treatment for patients with non-functioning tumours of the pancreas, intestines or unknown origin.

MORE INFORMATION

For a full report on this study, please visit clinicaltrialsregister.eu and search for study number 2005-004904-35. Alternatively, you can visit clinicaltrials.gov and search for study number NCT00353496.

For more information about neuroendocrine tumours and current treatments available, please speak to a healthcare professional. If you have any questions about this study, please contact the sponsor, Ipsen at:

clinical.trials@ipsen.com

FUTURE RESEARCH

Patients who took part in this study could take part in a second study where everyone was given lanreotide autogel injections (no-one was given placebo injections).

Details about the second study can be found at clinicaltrialsregister.eu by searching for study number 2008-004019-36. Alternatively, you can visit clinicaltrials.gov and search for study number NCT00842348.

STUDY IDENTIFICATION AND OTHER INFORMATION

FULL STUDY TITLE : Phase III, randomised, double-blind, stratified comparative, placebo controlled, parallel group, multi-centre study to assess the effect of deep subcutaneous injections of lanreotide autogel 120mg administered every 28 days on tumour progression free survival in patients with non-functioning entero-pancreatic endocrine tumours.

STUDY NUMBERS : Europe: 2005-004904-35 | United States: NCT00353496 | Protocol: 2-55-52030-726.

OTHER INFORMATION: Phase III studies can take several years to complete and look at how safe and effective a potential new treatment is. Some changes were made during the study to ensure safety, improve recruitment, make having injections easier, and clarify information in the researcher's handbook (called a study protocol).

We thank all of the patients who took part in this study. Without their support, advances in treatments for medical conditions would not be possible.

We would also like to thank the laypersons and patients who took the time to review this document to make it easier for a general audience to read.