

Multiple Myeloma

Cevostamab in Combination With Pomalidomide and Dexamethasone Versus Standard of Care in Participants With Previously Treated Multiple Myeloma

Trial Status

Not yet recruiting

Trial Runs In

Trial Identifier

NCT07555938 2025-524028-23-00
CO46096

The information is taken directly from public registry websites such as ClinicalTrials.gov, EuClinicalTrials.eu, ISRCTN.com, etc., and has not been edited.

Official Title:

A Phase III, Randomized, Open-Label, Multicenter Study Evaluating the Efficacy and Safety of Cevostamab in Combination With Pomalidomide and Dexamethasone Versus Standard of Care in Patients With Multiple Myeloma Who Have Received One to Three Prior Lines of Therapy

Trial Summary:

The purpose of this study is to assess the efficacy and safety of cevostamab in combination with pomalidomide and dexamethasone (CevosPd) versus standard of care (SOC) in participants with multiple myeloma (MM) who have received one to three prior lines of therapy and have been exposed to an anti-CD38 monoclonal antibody (mAb) and lenalidomide.

Hoffmann-La Roche

Sponsor

Phase 3

Phase

NCT07555938 2025-524028-23-00 CO46096

Trial Identifiers

Eligibility Criteria:

Gender

All

Age

#18 Years

Healthy Volunteers

No

Inclusion Criteria:

- Eastern Cooperative Oncology Group (ECOG) Performance Status of 0 or 1 at screening and immediately prior to start of administration of study treatment.

ForPatients

by Roche

- Individuals with ECOG Performance Status of 2 solely due to local symptoms of myeloma (e.g., pain) are eligible
- MM diagnosis according to the International Myeloma Working Group (IMWG) diagnostic criteria
- Received one to three lines of prior therapy that included at least two consecutive cycles of either of the following: A regimen containing an anti-CD38 therapy, a regimen containing lenalidomide
- Participants must have measurable disease during screening

Exclusion Criteria:

- Known history of amyloidosis (e.g., positive Congo Red stain or equivalent in tissue biopsy or documented within serum amyloid P component scan)
- Plasma cell leukemia or circulating plasma cell count exceeding 500 cells/liter (L) or 5% of the peripheral blood white cells
- GI disease that might significantly alter absorption of oral drugs
- Participants must not have any ongoing CNS disease or non-secretory myeloma