



NCCTG

NORTH CENTRAL CANCER TREATMENT GROUP

Date: January 16, 2009

To: NCCTG Primary Clinical Research Associates

From: Janis Wobschall
Protocol Development Coordinator

Re: N0572, A Phase I/II Study of Sorafenib and CCI-779 in Patients with Recurrent Glioblastoma

The purpose of this memorandum is to provide investigators with a recent report of an adverse event that has occurred in association with CCI-779 for a study where the Division of Cancer Treatment and Diagnosis (DCTD), National Cancer Institute (NCI) is distributing this agent. You may have also received this communication directly from DCTD.

AE_1203511

Please note that all risks currently cited in the NCCTG consent form cannot be omitted; it is at the discretion of your local IRB as to whether they wish to add risks based on the enclosed information. If a determination has been made by the NCCTG Research Base that a protocol amendment is necessary, you will receive the NCI-approved protocol addendum at a later date; for purposes of cross-reference, this communication will cite the adverse event noted above.

Please submit this adverse event to your Institutional Review Board.

If you have any questions concerning this communication, please contact Janis Wobschall at wobschall.janis@mayo.edu or 507/284-4852.

JW/kjm
enclosure

IND SAFETY REPORT: INITIAL WRITTEN REPORT #20

TO: Division of Drug Oncology Products, Center for Drug Evaluation and Research, FDA

FAX: 301-796-9845

1. IND NUMBER 61010	2. AGENT NAME CCI-779 (temsirolimus, Torisel™)	3. DATE November 21, 2008
4. SPONSOR Division of Cancer Treatment and Diagnosis, National Cancer Institute		
5. REPORTER'S NAME, TITLE, AND INSTITUTION L. Austin Doyle, MD-Senior Investigator for Targeted Therapeutics 2, Investigational Drug Branch, CTEP, DCTD, NCI		6. PHONE NUMBER 301-496-1196
		7. FAX NUMBER 301-402-0428
8. PROTOCOL NUMBER (AE #) GOG-01701 (AE# 1203511)		
9. PATIENT IDENTIFICATION 808-01701-011	10. AGE 73	11. SEX Female
12. DESCRIPTION OF ADVERSE EVENT The patient is a 73-year-old female with primary peritoneal carcinoma who experienced grade 3 dehydration while on a phase 2 trial utilizing the investigational agent temsirolimus. She began the investigational therapy on July 31, 2008, and received her last dose of temsirolimus on October 22, 2008 (Cycle 4, Day 1). On October 22, 2008, during her treatment, the patient complained of weakness and fatigue. She was treated for urinary tract infection and given an extra liter of IV fluid. On October 31, 2008 (Cycle 4, Day 10), the patient was seen in the outpatient oncology clinic complaining of dry cough, fever, and was noted to be dehydrated. Her laboratory results from the pervious day showed a potassium level of 2.6 mEq/L (reference range: 3.5-5.1 mEq/L) and 3.3 mEq/L on this visit. She was admitted with a temperature of 102.4 F, pulse 101 bpm, blood pressure 147/81 mmHg, and an oxygen saturation of 100% on room air. A CT scan of the chest showed intermittent sites of ill-defined infiltrates through out both lungs. The patient was treated with IV antibiotics, IV fluids with potassium replacement, and blood transfusion. Her condition improved, her potassium was stable at 3.8 mEq/L, and she was discharged home on November 8, 2008 (Cycle 4, Day 18). Additional information has been requested from the investigational site. There is a reasonable possibility that the experience may have been caused by the drug.		
13. DOSE, ROUTE, AND SCHEDULE Cycle = 28 Days Temsirolimus 25 mg IV over 30 minutes every week		
14. DATES OF TREATMENT The patient began the investigational therapy on July 31, 2008, and received the last dose of temsirolimus on October 22, 2008 (Cycle 4, Day1).		
15. ACCRUAL AND IND EXPERIENCE Number of patients enrolled in NCI-sponsored clinical trials using temsirolimus = 1374. There have been 52 other incidences of dehydration reported to the NCI through AdEERS as serious adverse events for temsirolimus.		
16. COMMENTS AT THIS TIME, NO OTHER INFORMATION IS AVAILABLE. IF UPON FURTHER INVESTIGATION RELEVANT INFORMATION BECOMES AVAILABLE, THEN A FOLLOW-UP REPORT WILL BE SUBMITTED IN ACCORDANCE WITH 21CFR312.32(d)(2). DISCLAIMER per 21 CFR 312.32(e): THIS SAFETY REPORT DOES NOT NECESSARILY REFLECT A CONCLUSION OR ADMISSION BY THE CTEP IDB SENIOR INVESTIGATOR/ SPONSOR THAT THE INVESTIGATIONAL AGENT/THERAPY CAUSED OR CONTRIBUTED TO THE ADVERSE EXPERIENCE BEING REPORTED.		