

# A221701

## Phase III Placebo-Controlled Trial to Evaluate Dexamethasone Use for Everolimus-Induced Oral Stomatitis: Prevention Versus Early Treatment Approaches: MIST (My Individualized Stomatitis Treatment)

ClinicalTrials.gov Identifier: NCT03839940

### Study Background

#### Trial Description

This phase III trial studies how well dexamethasone works in reducing everolimus-induced oral stomatitis in patients with cancer. Dexamethasone may help to reduce the everolimus-induced oral stomatitis so as to improve quality of life in cancer patients.

#### Arms:

Group I (dexamethasone): (Experimental): Patients receive 10mg oral everolimus daily as standard of care and 10mL dexamethasone oral mouthwash, swished for 2-minutes daily, for 8 weeks.

Group II (placebo): (Placebo Comparator): Patients receive 10mg oral everolimus daily as standard of care and 10mL placebo oral mouthwash, swished for 2-minutes daily, for 8 weeks.

#### Objectives:

- PRIMARY OBJECTIVES:
  - I. To determine if the initiation of dexamethasone at the start of everolimus treatment prevents mTOR inhibitor-associated stomatitis (mIAS)-associated pain, compared to the initiation of placebo.
  - II. To determine if the initiation of dexamethasone at the start of everolimus treatment will be superior compared to the initiation of placebo in terms of the overall severity of mIAS-associated pain.
- SECONDARY OBJECTIVES:
  - I. To utilize the same measurement method that was reported in the SWISH trial: A combination of a patient reported pain scale, data from a normalcy of diet questionnaire, and clinician grading of stomatitis to determine the incidence of  $\geq$  grade 2 mIAS.

- II. To determine if the initiation of dexamethasone at the start of everolimus increases time to development of mouth pain using daily numerical analog scale patient-reported data collection.
- III. To assess if quality of life is better when dexamethasone mouth rinse use starts at the same time as everolimus use versus at the time when mouth pain begins.
- IV. To investigate if starting dexamethasone mouth rinse concurrent with starting everolimus improves patients' ability to adhere to everolimus therapy.
- V. To compare dexamethasone prescription fill rates and timing between patients who received placebo versus study drug at the initiation of everolimus.
- Trial Design: OUTLINE: Patients are randomized to 1 of 2 groups.
  - GROUP I: Patients receive everolimus orally (PO) once daily (QD) as standard of care and dexamethasone as mouthwash over 2 minutes 4 times per day (QID) for 8 weeks.
  - GROUP II: Patients receive everolimus PO QD as standard of care and placebo as mouthwash over 2 minutes QID for 8 weeks.

### **Study Milestones:**

Start date: February 15, 2019

Primary Completion Date: December 17, 2020

## **Publication Information:**

Analysis Type: Primary

PubMed ID: 36693773

Citation: Semin Oncol. 2023 Jan 17;S0093-7754(23)00001-5.doi:  
10.1053/j.seminoncol.2023.01.001. Online ahead of print.

Associated Datasets: NCT03839940-D1-Dataset.csv (analysis), NCT03839940-D2-  
Dataset.csv (tox)

## **Dataset Information:**

Dataset Name: NCT03839940-D2-Dataset.csv (tox)

Description: Dataset NCT03839940-D2-Dataset.csv (tox) is one of 2 datasets associated with PubMed ID 36693773. This dataset contains adverse event data.

Data can be used to approximate published study findings, but exact reproduction of previous manuscripts may not be possible in some cases (e.g., when data must be modified for de-identification purposes or have undergone further data cleaning).

Blank values indicate data not applicable or missing, except where otherwise noted.

## **NCT03839940-D2-Dataset.csv (tox) Data Dictionary:**

LABEL	NAME	ELEMENTS	COMMENTS
Patient ID	patient_id		
Grade	GRADE	3	
Relationship to Study Medication	REL_SMED	POSSIBLE, PROBABLE	
Toxicity	TOXICITY	Enterocolitis infectious, Lower gastrointestinal hemorrhage, Mucositis oral, Pneumonitis	