

# Clinical trials of B-Raf enzyme inhibitors for melanoma in all type of patients

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## 1 B-Raf enzyme inhibitors

Trial	Treatments	Patients	Trials design and methods
<b>paclitaxel, carboplatin, sorafenib tosylate vs carboplatin, paclitaxel</b>			
NCI-2012-02978 <i>ongoing</i> [NCT00110019] n=NA follow-up:	-	patients with stage III or stage IV melanoma that cannot be removed by surgery	double-blind
<b>Sorafenib and Carboplatin vs Carboplatin/Paclitaxel</b>			
11718 <i>ongoing</i> [NCT00111007] n=NA follow-up:	Sorafenib, 400 mg orally, 2 tablets (200 mg each) bid (bis in die [twice daily]) on Study Days 2 to 19 + Paclitaxel (225 mg/m <sup>2</sup> iv [Intravenous]) and Carboplatin (AUC [area under the curve] 6) on Study Day 1 (21 days per cycle) <i>versus</i> Carboplatin/Paclitaxel (C/P) (Paclitaxel (225 mg/m <sup>2</sup> iv) and Carboplatin (AUC 6) on Study Day 1 (21 days per cycle)	subjects with unresectable Stage III or Stage IV melanoma who progressed after receiving only one prior therapy containing	double-blind
<b>dabrafenib + trametinib vs dabrafenib</b>			
COMBIE-d [NCT01584648] n=NA follow-up:	-	-	-
<b>dabrafenib and trametinib vs dabrafenib monotherapy</b>			
COMBI-D [NCT01584648] n=NA follow-up:	dabrafenib and trametinib <i>versus</i> dabrafenib monotherapy	Subjects with histologically confirmed cutaneous melanoma that is either Stage IIIC (unresectable) or Stage IV, and BRAF V600E/K mutation positive will be screened for eligibility	double-blind
<b>MEK162 binimetinib + LGX818 vs LGX818</b>			
COLUMBUS <i>ongoing</i> [NCT01909453] n=NA follow-up:	-	patients with locally advanced unresectable or metastatic melanoma with BRAF V600 mutation	open label
<b>dabrafenib and trametinib vs placebo</b>			
COMBI-AD <i>ongoing</i> [NCT01682083] n=NA follow-up:	-	Patients with completely resected, histologically confirmed, BRAF V600E/K mutation-positive, high-risk [Stage IIIa (lymph node metastasis >1 mm), IIIb or IIIc] cutaneous melanoma	double-blind
<b>vemurafenib vs placebo</b>			

continued...

<b>Trial</b>	<b>Treatments</b>	<b>Patients</b>	<b>Trials design and methods</b>
<b>GO27826</b> <i>ongoing</i> [NCT01667419] n=NA follow-up:	vemurafenib 960 mg twice daily versus Placebo	patients with completely resected, cutaneous BRAF-mutation positive melanoma at high risk for recurrence	double-blind
<b>dabrafenib and trametinib vs vemurafenib</b>			
<b>COMBI-v</b> <i>ongoing</i> [NCT01597908] n=NA follow-up:	dabrafenib and trametinib versus vemurafenib	Unresectable or Metastatic BRAF V600E/K Cutaneous Melanoma	
<b>LGX818 encorafenib vs vemurafenib</b>			
<b>COLUMBUS</b> <i>ongoing</i> [NCT01909453] n=NA follow-up:	LGX818 300 mg QD versus Vemurafenib 960mg BID	patients with locally advanced unresectable or metastatic melanoma with BRAF V600 mutation	open label

## References

**NCI-2012-02978, 0:**

**11718, 0:**

**COMBIE-d, :**

Long GV, Stroyakovskiy D, Gogas H, Levchenko E, de Braud F, Larkin J, Garbe C, Jouary T, Hauschild A, Grob JJ, Chiarion Sileni V, Lebbe C, Mandal M, Millward M, Arance A, Bondarenko I, Haanen JB, Hansson J, Utikal J, Ferraresi V, Kovalenko N, Mohr P, Pro Combined BRAF and MEK inhibition versus BRAF inhibition alone in melanoma. *N Engl J Med* 2014;371:1877-88 [25265492]

**COMBI-D, 0:**

Long GV, Stroyakovskiy D, Gogas H, Levchenko E, de Braud F, Larkin J, Garbe C, Jouary T, Hauschild A, Grob JJ, Chiarion Sileni V, Lebbe C, Mandal M, Millward M, Arance A, Bondarenko I, Haanen JB, Hansson J, Utikal J, Ferraresi V, Kovalenko N, Mohr P, Pro Combined BRAF and MEK inhibition versus BRAF inhibition alone in melanoma. *N Engl J Med* 2014;371:1877-88 [25265492]

**COLUMBUS, 0:**

**COMBI-AD, 0:**

**GO27826, 0:**

**COMBI-v, 0:**

**COLUMBUS, 0:**

## 2 About TrialResults-center.org

TrialResults-center is an innovative knowledge database that collects the results of RCTs and provides dynamic interactive systematic reviews and meta-analysis in the field of all major heart and vessels diseases.

The TrialResults-center database provides a unique view of the treatment efficacy based on all data provided directly from clinical trial results, offering a valuable alternative to personal bibliographic search, published meta-analysis, etc. Furthermore, it would allow comparing easily the various concurrent therapeutic for the same clinical condition.

Rigorous meta-analysis method is used to populate TrialResults-center: widespread search of published and non published trials, study selection using pre-specified criteria, data extraction using standard form.

TrialResults-center is continually updated on a weekly basis. We continually search all new results (whatever their publication channel) and these news results are immediately added to the database with a maximum of 1 week.

TrialResults-center is non-profit and self-funded.