



## CASE STUDY

# AGAINST ALL ODDS: PHASE III ON A BREAKTHROUGH THERAPY IN LUPUS NEPHRITIS

In the face of challenges both predictable and unforeseen, Worldwide Clinical Trials brought our sponsor's first FDA-approved oral therapy for lupus nephritis (LN) across the finish line on time.

### An unmet clinical need.

When our sponsor began clinical trials for their therapeutic, there were no FDA-approved treatments for Lupus Nephritis, only medications to control inflammation.

### The odds were against us.

With recruitment hurdles and a lack of regulatory guidance, we knew this pivotal Phase III study demanded an expert strategy. Then, investigative processes were impacted by two natural disasters in one month.

## OUR SPONSOR'S CHALLENGES:

### Recruitment: Experienced Sites with Inexperienced Patients

Patients at sites with significant experience with LN trials are typically already participating in a study. This study required sites familiar with LN clinical trials with clinically qualifying patients not already participating in LN studies.

### Clinical: Unpredictable Medical Events

Within this study, strict protocol adherence would be a challenge. The investigational product was to be administered at the start of a proteinuria flare, so patients needed to recognize symptoms indicating when to visit the site.

### Operational: Two Natural Disasters in One Month

In one month, two different natural disasters brought devastation to many individuals and threatened the progress of this study. In September of 2017, Hurricane Irma blew through the Dominican Republic and Florida, causing temporary closure of several investigational sites. Soon afterwards, an earthquake destroyed one of our sites in Mexico and impacted operations in 16 more.

*Patients don't feel immediately bad when they're in a nephritic flare. If they flared in between visits, we would miss an opportunity to administer treatment."*

**Ingrid van Rompaey, Ph.D.,**  
Project Manager for Worldwide Clinical Trials

**Phase III randomized, placebo-controlled, double-blind, 52-week trial**

**May 2017 to October 2019**

 **27**  
Countries

 **240**  
sites

 **358**  
Patients

### PRIMARY OUTCOME:

number of subjects showing renal response at week 52

### PRIMARY OUTCOME CRITERIA:

UPCR of  $\leq 0.5$  mg/mg

eGFR  $\geq 60$  mL/min/1.73 m<sup>2</sup> or no confirmed decrease from baseline in eGFR of  $>20\%$

Received no rescue medication for LN

Did not receive more than 10 mg prednisone for  $\geq 3$  consecutive days or for  $\geq 7$  days in total during weeks 44 through 52, prior to assessment

## OUR SPONSOR'S ADVANTAGE: WORLDWIDE'S SOLUTIONS

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### DEPLOY THE RIGHT SITES

The Worldwide team activated trial-naïve sites with LN expertise, which were close to their patients for quick access. We provided training and tools to ensure recruitment, screening, enrollment, consent, and assessment practices were carried out correctly. Our internal medical experts supported clinicians in evaluation and treatment of patients presenting in flare.

By sharing phase II trial data with LN investigators, we generated interest among trial-naïve sites in participating in the study.

2

### EDUCATE PATIENTS

The Worldwide team developed a program to enable patients to self-monitor for proteinuria flares, so they would know when to proceed to the investigative site for further evaluation and potential IP administration. Our team followed up closely with sites to ensure protocol adherence by clinicians and patients.

The study enrolled ahead of schedule, thanks to strategic site selection and effective staff and patient education.

3

### BUILD TRUST THROUGH ACTION

Taking a solutions-oriented approach, Worldwide's project team created an atmosphere of trust with the sponsor. When natural disasters threatened our progress, Worldwide acted quickly to activate new sites and implement shorter sponsor review turnaround cycles. These quick pivots enabled Worldwide and the sponsor to achieve database lock on time without compromising data quality.

*"Trust is like coral. It grows very slowly, and it can be destroyed in a second."*

**Ingrid van Rompaey, Ph.D.,**  
Project Manager for  
Worldwide Clinical Trials

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### BRING SPECIFIC THERAPEUTIC AREA EXPERTISE

The study benefited from the lupus-experienced members of the project team, backed by Worldwide's deep expertise in immune-mediated inflammatory disorders (IMID) and proven history in orphan disease studies. From team selection to study close, the Worldwide team remained committed to the sponsor's success, taking surprises in stride without missing a beat.

Worldwide and the sponsor built bridges with investigators and patient advocacy groups, who in turn supported the study's cause as we moved from regulatory approval to commercialization.

**Against the odds,** the therapeutic received FDA approval in 2021 to treat adult patients with active LN.

### There's No Substitute for Uncommon Expertise

With our deep medical and scientific experience in IMID and rare disease, and our relationships with clinical sites in 60 countries, Worldwide Clinical Trials is a top performing CRO for lupus nephritis studies. **Get in touch** to learn more about the Worldwide way or visit our website at [worldwide.com/therapeutic-areas/rare-disease/](https://www.worldwide.com/therapeutic-areas/rare-disease/) to learn more about our rare disease experience.