NYMC-157: Reduced Burden of Oncologic Therapy in Advanced B-cell Lymphoma (REBOOT ABLY) in Children, Adolescents and Young Adults with CD20+ Mature B-Cell Lymphoma

The study aims to:

- Determine if the addition of intrathecal ([IT] [Depocyt®]) and reduction of standard IT dosing and the reduction of anthracycline exposure (doxorubicin) (60%) within the ANHL01P1 FAB/LMB B4 + Rituximab chemo-immunotherapy backbone in children, adolescents and young adults with good risk CD20+ mature B-NHL (Stage I and II unresected and Stage III/IV with LDH < 2 UNL) will result in similar outcomes compared to historical controls (Subgroup I).

- Determine the safety and efficacy of reduction of IT therapy and substitution with L-ARA-C (Depocyte®) within ANHL01P1 FAB/LMB Group C1 plus rituximab chemotherapy backbone in children, adolescents and young adults with advanced risk de-novo mature B-NHL (Group C BMCNS) (Subgroup II).

Learn more about this trial

COG AEWS1221: Randomized Phase 3 Trial Evaluating the Addition of the IGF-1R Monoclonal Antibody Ganitumab to Multi-agent Chemotherapy for Patients with Newly
Diagnosed Metastatic Ewing Sarcoma

The study aims to:

- Compare the event-free survival (EFS) in patients with newly diagnosed metastatic Ewing sarcoma treated with multi-agent chemotherapy with and without the addition of ganitumab (AMG 479).

- Describe the toxicity of the addition of ganitumab to multi-modality therapy for patients with newly diagnosed metastatic Ewing sarcoma.

- Compare bone marrow response rates and overall survival in patients with newly diagnosed metastatic Ewing sarcoma treated with multi-agent chemotherapy with and without the addition of ganitumab.

- Describe the toxicity of 6 months of ganitumab monotherapy as maintenance therapy following multi-modality therapy in patients with newly diagnosed metastatic Ewing sarcoma.

Learn more about this trial

COG AALL1331: Risk-Stratified Randomized Phase III Testing of Blinatumomab in First Relapse of Childhood B-Lymphoblastic Leukemia (B-ALL)

The study aims to:

- Compare disease free survival (DFS) of HR and IR relapse B-ALL patients who are randomized following Induction Block 1 chemotherapy to receive either two intensive chemotherapy blocks or two 5-week blocks of blinatumomab (HR/IR Randomization).

- Compare DFS of LR relapse B-ALL patients who are randomized following Block 1 chemotherapy to receive either chemotherapy alone or chemotherapy plus blinatumomab (LR Randomization).

- Compare overall survival (OS) of HR and IR relapse B-ALL patients who are randomized following Induction Block 1 chemotherapy to receive either two intensive chemotherapy blocks or two 5-week blocks of blinatumomab (HR/IR Randomization).

- Compare OS of LR relapse B-ALL patients who are randomized following Block 1 chemotherapy to receive either chemotherapy alone or chemotherapy plus blinatumomab (LR Randomization).

Learn more about this trial
AAML1522: A Phase 2, Multicenter, Single-Arm, Open Label Study to Evaluate the Activity, Safety and Pharmacokinetics of Lenalidomide in Pediatric Subjects with Relapsed or Refractory Acute Myeloid Leukemia

The study aims to:

- Determine the activity of lenalidomide in the treatment of pediatric subjects with relapsed/refractory ALL (with second or greater relapse or refractory to at least 2 prior induction attempts) measured by morphological complete response defined as either a CR or CRi within the first 4 cycles of treatment.

- Evaluate subject demographics and leukemic blast characteristics and their correlation with response to lenalidomide.

- Further evaluate lenalidomide activity with regards to response assessment outcome rates, transplantation rate and durable response rate.

- Evaluate the safety of lenalidomide including rates of graft-versus-host disease (GVHD) flare and reactivation.

Learn more about this trial

As New Jersey's only National Cancer Institute-designated Comprehensive Cancer Center, Rutgers Cancer Institute of New Jersey offers patients access to treatment options not available at other institutions within the state. The Cancer Institute currently enrolls approximately 17 percent of all new adult cancer patients and approximately 70 percent of all pediatric cancer patients onto a clinical trial. Enrollment in these studies nationwide is fewer than five percent of all adult cancer patients. Learn more