Final Results of the RHAPSODY Trial: NeuroNEXT trial NN104

Purpose: To seek a maximally tolerated dose (MTD) of 3K3A-APC, a neuroprotectant, in moderate to severe AIS patients treated with recanalization therapy – tPA, mechanical thrombectomy, or both.

Trial Design: Phase 2, randomized, placebo-controlled, double-blinded trial. A Continuous reassessment method (CRM) considered dose tiers for dose-limiting toxicities (DLT) to determine a maximum tolerated dose. Within 2 hours of recanalization, 110 patients were randomized to one of 4 dose tiers (120µg/kg; 240µg/kg; 360µg/kg; and 540µg/kg) or placebo and received 5 infusions every 12 hours. Cerebral MR evaluation

Primary Endpoints: safety of different IV doses of 3K3A-APC after tPA, mechanical thrombectomy, or both

DLT	MTD	Hemorrhage @ day 30 All drug doses vs placebo
Rate = 7%	540µg/kg	67.4% vs 86.5%, p=0.05

A continuous reassessment method was successfully used in the dose-finding step for the neuroprotectant, 3K3A-APC, for moderate to severe AIS patients treated with IV rt-PA, thrombectomy or both. A phase 2b trial will follow for confirmation.

Presented by: Patrick Lyden, 2018 International Stroke Conference, Los Angeles, CA