Open Clinical Trials for Patients With Renal Cell Carcinoma

Providing access to clinical trials for veteran and active-duty military patients can be a challenge, but a significant number of trials are now recruiting from those populations. Many trials explicitly recruit patients from the VA, the military, and IHS. The VA Office of Research and Development alone sponsors more than 430 research initiatives, and many more are sponsored by Walter Reed National Medical Center and other major defense and VA facilities. The clinical trials listed below are all open as of July 24, 2017; have at least 1 VA, DoD, or IHS location recruiting patients; and are focused on treatment for kidney cancer/renal cell carcinoma. For additional information and full inclusion/exclusion criteria, please consult clinicaltrials.gov.

NCI-MATCH: Targeted Therapy Directed by Genetic Testing in Treating Patients With Advanced Refractory Solid Tumors, Lymphomas, or Multiple Myeloma
This phase II trial studies how well treatment that is directed by genetic testing works in patients with solid tumors or lymphomas that have progressed following at least 1 line of standard treatment or for which no agreed upon treatment approach exists. Genetic tests look at the unique genetic material (genes) of patients’ tumor cells. Patients with genetic abnormalities (such as mutations, amplifications, or translocations) may benefit more from treatment that targets their tumor’s particular genetic abnormality. Identifying these genetic abnormalities first may help doctors plan better treatment for patients with solid tumors, lymphomas, or multiple myeloma.
ID: NCT02465060
Sponsor: National Cancer Institute
Locations (contact): Naval Medical Center-San Diego, California (Preston S. Gable); VA Connecticut Healthcare System-West Haven Campus (Herta H. Chao); Durham VAMC, North Carolina (Michael J. Kelley); Walter Reed National Military Medical Center, Bethesda, Maryland (Jeremy G. Perkins)

Bevacizumab, Sorafenib Tosylate, and Temsirolimus in Treating Patients With Metastatic Kidney Cancer
This randomized phase II trial studies different combinations of bevacizumab, temsirolimus, and sorafenib tosylate to see how well they work compared with bevacizumab alone in treating patients with kidney cancer that has spread to other places in the body. Monoclonal antibodies, such as bevacizumab, may interfere with the ability of tumor cells to grow and spread. Bevacizumab and sorafenib tosylate may stop the growth of tumor cells by blocking blood flow to the tumor. Temsirolimus and sorafenib tosylate may stop the growth of tumor cells by blocking some of the enzymes needed for cell growth. Giving different combinations of bevacizumab, sorafenib tosylate, and temsirolimus may be more effective than bevacizumab alone in treating metastatic kidney cancer.
ID: NCT00378703
Sponsor: National Cancer Institute
Locations: VA San Diego Medical Center, California; Jesse Brown VAMC, Chicago, Illinois; Richard L. Roudebush VAMC, Indianapolis, Indiana; VA New Jersey Health Care System East Orange; Dayton VAMC, Ohio; Michael E. DeBakey VAMC, Houston, Texas

Cabozantinib-s-malate or Sunitinib Malate in Treating Patients With Previously Untreated Locally Advanced or Metastatic Kidney Cancer
This randomized phase II trial studies how well cabozantinib-s-malate works compared to sunitinib malate in treating patients with previously untreated kidney cancer that has spread from where it started to nearby tissue or lymph nodes or to other places in the body. Cabozantinib-s-malate may stop the growth of tumor cells by blocking some of the enzymes needed for cell growth. It is not yet known whether cabozantinib-s-malate is more effective than sunitinib malate in treating patients with kidney cancer.
ID: NCT01835158
Sponsor: National Cancer Institute
Locations: Central Arkansas Veterans Healthcare System, Little Rock; Denver VAMC, Colorado; Hines VA Hospital, Illinois; Richard L. Roudebush VAMC Indianapolis, Indiana; VAMC Baltimore, Maryland; Minneapolis Veterans Medical Center, Minnesota; VA New Jersey Health Care System, East Orange; VA New York Harbor Healthcare System-Brooklyn Campus; Wright-Patterson, Medical Center, Ohio; Michael E. DeBakey VAMC, Houston, Texas; Audie L. Murphy VA Hospital, San Antonio, Texas

Everolimus in Treating Patients With Kidney Cancer Who Have Undergone Surgery (S0931)
Everolimus may stop the growth of tumor cells by blocking some of the enzymes needed for cell growth or by blocking blood flow to the tumor. This phase III trial is studying everolimus to see how well it works in treating patients with kidney cancer who have undergone surgery.
ID: NCT01120249
Sponsor: Southwest Oncology Group
Locations: Central Arkansas Veterans Healthcare System, Little Rock; Denver VAMC, Colorado; Hines VA Hospital, Illinois; Richard L. Roudebush VAMC Indianapolis, Indiana; VAMC Baltimore, Maryland; Minneapolis Veterans Medical Center, Minnesota; VA New Jersey Health Care System, East Orange; VA New York Harbor Healthcare System-Brooklyn Campus; Wright-Patterson, Medical Center, Ohio; Michael E. DeBakey VAMC, Houston, Texas; Audie L. Murphy VA Hospital, San Antonio, Texas
**Everolimus With or Without Bevacizumab in Treating Patients With Advanced Kidney Cancer That Progressed After First-Line Therapy**

This randomized phase III trial studies giving everolimus together with bevacizumab to see how well it works compared to everolimus alone in treating patients with advanced kidney cancer that progressed after first-line therapy. Everolimus may stop the growth of tumor cells by blocking some of the enzymes needed for cell growth. Monoclonal antibodies, such as bevacizumab, can interfere with tumor growth by blocking the ability of tumor cells to grow and spread. Everolimus and bevacizumab may also stop the growth of kidney cancer by blocking blood flow to the tumor. It is not yet known whether giving everolimus together with bevacizumab is better than everolimus alone in treating patients with advanced kidney cancer that has progressed after first-line therapy.

**Sponsor:** National Cancer Institute  
**ID:** NCT01198158  
**Locations:** Jesse Brown VAMC, Chicago, Illinois; Walter Reed National Military Medical Center, Bethesda, Maryland; VA Western New York Health Care System, Buffalo

**Tivantinib With or Without Erlotinib Hydrochloride in Treating Patients With Metastatic or Locally Advanced Kidney Cancer That Cannot Be Removed by Surgery**

This randomized phase II trial studies how well tivantinib with or without erlotinib hydrochloride works in treating patients with metastatic or locally advanced kidney cancer that cannot be removed by surgery. Tivantinib and erlotinib hydrochloride may stop the growth of tumor cells by blocking some of the enzymes needed for cell growth.

**Sponsor:** National Cancer Institute (NCI)  
**ID:** NCT01688973  
**Locations:** Hines VA Hospital, Illinois; VA New Jersey Health Care System, East Orange; Audie L. Murphy VA Hospital, San Antonio, Texas

**Bioequivalence & Food Effect Study in Patients With Solid Tumor or Hematologic Malignancies**

This study will enroll approximately 60 subjects in stage I and 60 subjects in stage II with hematologic or solid tumor malignancies, excluding gastrointestinal tumors and tumors that have originated or metastasized to the liver for which no standard treatment exists or have progressed or recurred following prior therapy. Subjects must not be eligible for therapy of higher curative potential where an alternative treatment has been shown to prolong survival in an analogous population. Approximately 23 sites in the U.S. and 2 in Canada will participate in this study.

**Sponsor:** Celgene  
**ID:** NCT02223052  
**Location:** VAMC Kansas City, Missouri

**Gemcitabine Hydrochloride and Cisplatin With or Without Bevacizumab in Treating Patients With Advanced Urinary Tract Cancer**

This randomized phase III trial studies gemcitabine hydrochloride, cisplatin, and bevacizumab to see how well they work compared with gemcitabine hydrochloride and cisplatin in treating patients with urinary tract cancer that has spread to other places in the body. Drugs used in chemotherapy, such as gemcitabine hydrochloride and cisplatin, work in different ways to stop the growth of tumor cells, either by killing the cells, by stopping them from dividing, or by stopping them from spreading. Monoclonal antibodies, such as bevacizumab, may interfere with the ability of tumor cells to grow and spread. It is not yet known whether gemcitabine hydrochloride and cisplatin are more effective when given with or without bevacizumab in treating patients with urinary tract cancer.

**Sponsor:** National Cancer Institute  
**ID:** NCT00942331  
**Locations:** Central Arkansas Veterans Healthcare System, Little Rock; Denver VAMC, Colorado; Baltimore VAMC, Maryland; Columbia VA, Missouri; VA New Jersey Health Care System, East Orange; VA New York Harbor Healthcare System-Brooklyn Campus; VA Western New York Health Care System, Buffalo; Dayton VAMC, Ohio

**Eribulin Mesylate in Treating Patients With Locally Advanced or Metastatic Cancer of the Urothelium and Kidney Dysfunction**

This phase I/II trial studies the side effects and best dose of eribulin mesylate and to see how well it works in treating patients with cancer of the urothelium that has spread to nearby tissue or to other places in the body and kidney dysfunction. Drugs used in chemotherapy, such as eribulin mesylate, work in different ways to stop the growth of tumor cells, either by killing the cells, by stopping them from dividing, or by stopping them from spreading. Chemotherapy drugs may have different effects in patients who have changes in their kidney function.

**Sponsor:** National Cancer Institute  
**ID:** NCT00365157  
**Location:** VA Hospital-Martinez, California