# INITIATE (INITiate Insulin by Aggressive Titration and Education): a randomised study to compare initiation of insulin combination therapy in type two diabetic patients individually and in groups

Submission date	Recruitment status  No longer recruiting	Prospectively registered	
08/11/2006		☐ Protocol	
Registration date 14/11/2006	Overall study status Completed	Statistical analysis plan	
		[X] Results	
Last Edited	Condition category	Individual participant data	
25/09/2009	Nutritional, Metabolic, Endocrine		

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

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#### Contact details

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# Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

# Secondary identifying numbers

HOE901/4041

# Study information

#### Scientific Title

#### Acronym

INITIATE (INITiate Insulin by Aggressive Titration and Education)

## **Study objectives**

To compare initiation of insulin Individually (IND) and in Groups (GROUP) with respect to change in HbA1c and several other parameters in type two diabetic patients.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Study approved by the Ethics Committee of Helsinki University Hospital (Finland) on August 15, 2003.

#### Study design

Multicentre multinational randomised open study

## Primary study design

Interventional

# Secondary study design

Randomised controlled trial

# Study setting(s)

Hospital

# Study type(s)

Treatment

# Participant information sheet

# Health condition(s) or problem(s) studied

Type 2 diabetes

#### **Interventions**

Insulin glargine initiated by group education versus insulin glargine initiated by teach each individual patient.

#### Intervention Type

Drug

#### Phase

## Drug/device/biological/vaccine name(s)

Insulin glargine

#### Primary outcome measure

To determine whether insulin therapy with insulin glargine can be initiated as effectively by group education as by teaching each patient individually. Programs are defined as equally successful if the HbA1c differs less than 0.5% at the end of the study.

#### Secondary outcome measures

- 1. Cost of initiation of insulin therapy including: time spent by a nurse on education, physicians time, number and duration of phone calls
- 2. Change in the concentrations of serum total, High Density Lipoproteins (HDL) and Low Density Lipoproteins (LDL) cholesterol, and serum triglycerides (visit 12 versus visit three)
- 3. Change in body weight and blood pressure (visit 12 versus visit three)
- 4. Change in the fasting plasma glucose concentration (visit 12 versus visit three)
- 5. Insulin dose at visit 12
- 6. Change in subjects treatment satisfaction (measured by the Diabetes Treatment Satisfaction Questionnaire [DTSQ]) (visit 12 versus visit three)

#### Overall study start date

17/11/2003

# Completion date

21/06/2005

# Eligibility

# Key inclusion criteria

- 1. Male or female patients aged greater or equal to 18 years of age with type two diabetes
- 2. Treated with a stable dose (any dose) of sulfonylurea and metformin (1.5 grams or more) or either drug alone for at least six months
- 3. Body Mass Index (BMI) less than 45 kg/m^2
- 4. HbA1c between 7.0 and 12%
- 5. Willingness and ability to inject insulin and perform self-monitoring of blood glucose and to share some health information (glycemic control and body weight) with other members of the group

# Participant type(s)

**Patient** 

# Age group

Adult

#### Lower age limit

18 Years

#### Sex

Both

#### Target number of participants

120

#### Key exclusion criteria

- 1. Insulin therapy during the preceding 12 months
- 2. Impaired renal function, as shown by (but not limited to) serum creatinine more than 177 µmol /L (more than 2.0 mg/dL) measured at visit one or current renal dialysis
- Gross proteinuria (dU-prot more than 3 g) at screening
- 4. Known acute or chronic metabolic acidosis, including diabetic ketoacidosis
- 5. Clinical evidence of active liver disease, or serum Alanine Aminotransferase (ALT) more than
- 2.5 times the upper limit of the normal range
- 6. History of hypoglycemia unawareness
- 7. Repeated (more than one) severe hypoglycemia with unconsciousness within the last year
- 8. Diabetic retinopathy with surgical treatment (laser photocoagulation or vitrectomy) during the preceding three months of study entry, or requiring treatment within three months after the study entry
- 9. Pregnancy or lactation
- 10. Failure to use adequate contraception (women of current reproductive potential only), e.g. use of systemic hormones (oral contraceptives or an implant), an intrauterine device, or a barrier method (diaphragm with intravaginal spermicide, cervical cap, male or female condom)
- 11. Known hypersensitivity to insulin glargine, or any of the excipients
- 12. Malignancy (except for basal cell skin cancer) within the last five years
- 13. Likelihood of requiring treatment during the study period with drugs not permitted by the study protocol (e.g. non-cardioselective Beta-blockers, systemic corticosteroids, thiazolidinediones) months
- 14. Known adrenal insufficiency
- 15. Known haemoglobinopathy or moderate to severe anemia (i.e. hemoglobin concentration less than 110 g/dl)
- 16. Psychiatric condition rendering the subject unable to understand the nature, scope, and possible consequences of the study
- 17. History of substance or alcohol abuse within the last two years, or current substance abuse
- 18. Inability to comply with study procedures
- 19. Any clinically relevant cardiovascular, hepatic, neurological, endocrine, or other major systemic disease making implementation of the protocol or interpretation of the study results difficult
- 20. Known positive test result for Glutamic Acid Decarboxylase (GAD), or islet cell antibodies
- 21. Type one Diabetes Mellitus, as defined by the World Health Organisation (WHO)
- 22. Use of an investigational drug during the last six months before study entry
- 23. Inability to stop current treatment with thiazolidinedione

#### Date of first enrolment

17/11/2003

#### Date of final enrolment

21/06/2005

# Locations

#### Countries of recruitment

**Finland** 

#### Netherlands

Sweden

**United Kingdom** 

Study participating centre Department of Medicine Helsinki Finland FIN-00029

# Sponsor information

#### Organisation

sanofi-aventis Oy (Finland)

## Sponsor details

c/o Sanni Lahdenpera Huopalahdentie 24 Helsinki Finland FIN-00351

# Sponsor type

Industry

## Website

http://en.sanofi-aventis.com/

#### **ROR**

https://ror.org/00tx8br33

# Funder(s)

# Funder type

Industry

#### **Funder Name**

Sanofi-Aventis (Finland)

# **Results and Publications**

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

**Study outputs** 

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/06/2007		Yes	No