Tackling statin intolerance with N-of-1 trials (TASINI)

Submission date	Recruitment status No longer recruiting	Prospectively registered		
02/04/2019		[X] Protocol		
Registration date	Overall study status	Statistical analysis plan		
27/06/2019	Completed	[X] Results		
Last Edited 16/06/2022	Condition category Circulatory System	[] Individual participant data		
10/00/2022	Circulatory System			

Plain English summary of protocol

Background and study aims

Statins reduce deaths from heart problems by 25%. Treatment is cheap, effective, safe, and randomised trials show that it is well-tolerated causing few side effects. However, half of all patients prescribed statins have stopped them one year later, primarily due to the perceived side-effects. One explanation for this is that people are experiencing adverse events that they misattribute to the statin and stop the medication.

We propose to harness individuals' tendency to experiment with medication and create a coalition between doctor and patient that legitimizes and affirms experimentation in a way that will allow both to make inferences about the cause of adverse events that are more likely to be correct than currently is the case.

Who can participate?

Anyone living in the trial area over the age of 18, who is recommended by their GP to be on a statin can take part.

What does the study involve?

Participants will be placed into 3 groups. The open-label group will receive atorvastatin on and off in 4-week blocks. The closed-label group will receive atorvastatin and placebo in alternating 4-week blocks (but the capsules will look the same). The control group will receive treatment as usual. Participants will be supported to monitor adverse events and draw sound inferences about their cause using symptom diaries, 4-week on-off periods of medication use, and a review from their GP.

What are the possible benefits and risks of participating?

The benefits of taking part for participants is the opportunity to speak to the GP about the best way to reduce cholesterol and try a new approach to test whether the medicine (i.e. atorvastatin) is suitable to take long-term.

Taking part in the trial involves giving up some time to attend up to four study visits, and if randomised to one of the treatment groups, to complete a daily diary (taking about 5 minutes) for a week each month for the next six months. Taking part involves having a blood sample (requiring up to 8ml of blood). All blood tests come with a risk of bruising and pain.

Where is the study run from? South Oxford Health Centre (UK)

When is the study starting and how long is it expected to run for? May 2019 to April 2020

Who is funding the study? National Institute for Health Research (UK)

Who is the main contact? Prof Paul Aveyard, paul.aveyard@phc.ox.ac.uk

Contact information

Type(s)

Public

Contact name

Prof Paul Aveyard

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Additional identifiers

EudraCT/CTIS number

Nil known

IRAS number

ClinicalTrials.gov number

Nil known

Secondary identifying numbers

41074

Study information

Scientific Title

Tackling Statin Intolerance with N-of-1 trials in primary care (TASINI): testing the feasibility of a GP delivered behavioural intervention to increase statin adherence.

Acronym

TASINI

Study objectives

This is a feasibility trial. The principal question is whether a GP led intervention can improve adherence to statin medication (using an n-of-1-trial)

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 22/02/2019, North of Scotland Research Ethics Committee (Summerfield House, 2 Eday Road, Aberdeen, AB15 6RE; Tel: +44 (0)1224 558458; Email: nosres@nhs.net), ref: 19/NS/0014

Study design

Individual randomised multi-centred trial

Primary study design

Interventional

Secondary study design

n-of-1 trial

Study setting(s)

GP practice

Study type(s)

Prevention

Participant information sheet

See additional files

Health condition(s) or problem(s) studied

Cardiovascular disease - preventing heart attack and stroke

Interventions

Participants will be randomised using an online randomization generator (http://www.randomization.com) to one of three arms: usual care, blinded n-of-1 experiment, and open-label n-of-1 experiment.

Participants in the open-label arm will receive atorvastatin 20mg on and off in 4 week blocks. Participants in the closed label arm will receive encapsulated atorvastatin 20mg and placebo in 4 week blocks (the order of statin/placebo will be randomised for the final 16 weeks of the study). Participants in the control group will receive usual care.

Participants will be supported to monitor adverse events and draw sound inferences about their cause using symptom diaries, 4-week on-off periods of medication use, and a review from their

GP. We will then test the feasibility of this approach to assess whether GPs deliver the intervention as planned, whether patients engage with this, and whether it improves adherence to statins.

Intervention Type

Mixed

Primary outcome measure

- 1. The proportion of invited patients who enrol in the trial.
- 2. The proportion of enrolled participants who accept GPs behavioural intervention.
- 3. Proportion of patients in the treatment conditions who decide to continue statin therapy compared to the proportion who decide to continue statin therapy in the usual care control arm.

Secondary outcome measures

- 1. Difference in the proportion of participants who decide to continue statin therapy in the 'open-label' (unblinded) treatment arm (i.e. alternating between medication and no treatment) compared to the proportion of participants who decide to continue statin therapy in the 'closed-label' (blinded) treatment arm (i.e. alternating between statin and placebo) and compared to the proportion of participants receiving usual care (control arm). Timepoint: 24 week follow up; decision to persist with statin therapy treatment full time.
- 2. Count of the number of adverse events by system class and preferred term level (according to MedDRA) in the blinded arm compared to the unblinded arm. Timepoint: 24 week follow up. Analysis of the symptom diary.
- 3. Count of the number of times that participant attributes side effects to statin medication in blinded arm compared to the unblinded arm. Timepoint: 24 week follow up; analysis of symptom diary.
- 4. The difference in mean pain severity (taken from Brief Pain Inventory) scores between statin therapy and placebo in the open label arm compared to the closed label arm. Timepoint: 24-week follow up; analysis of symptom diary.
- 5. The difference in mean pain interference scores (taken from the brief pain inventory) between statin therapy and placebo in the open-label arm compared to the closed label arm. Timepoint: 24-week follow up; analysis of symptom diary.
- 6. If applicable, focus groups with patients who declined to participate in the main study on the reasons for this decision. Timepoint: focus groups after recruitment period ends.
- 7. Compare participant BMQ scores before and after the intervention. Compare BMQ score changes between study groups. Timepoint: 24 week follow up.

Overall study start date

01/05/2019

Completion date

01/04/2020

Eligibility

Key inclusion criteria

Any patient that:

- 1. Is 18 years of age or older
- 2. Requiring statin therapy according to NICE guidelines and the GP thinks statins are indicated
- 3. Has previously been prescribed/recommended statin treatment
- 4. Has stopped/is considering stopping statin treatment/ or has not started statin treatment due

to concerns about or experience of side-effects

- 5. Is willing and able to give informed consent for participation in the study and comply with study procedures
- 6. If on ezetimibe or another alternative to atrovstatin, willing to potentially cease said medication if randomised to one of the intervention arms

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

95

Total final enrolment

93

Key exclusion criteria

Any patient that:

- 1. The GP thinks it is not indicated to recommence statins or the previous intolerance was severe enough to mean that recommencing statins may comprise a significant risk to health
- 2. Is unable to adhere to study procedures through illness or infirmity
- 3. Has any contraindications listed in the Summary of Product Characteristics (SmPC) for atorvastatin 20mg or placebo drug, including pregnancy
- 4. Is participating in any research project that may interact with the current study

Date of first enrolment

01/06/2019

Date of final enrolment

06/09/2019

Locations

Countries of recruitment

England

United Kingdom

Study participating centre South Oxford Health Centre

Lake St

Oxford United Kingdom OX1 4RP

Sponsor information

Organisation

University of Oxford

Sponsor details

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Sponsor type

Research organisation

Website

www.admin.ox.ac.uk/researchsupport/ctrg/

ROR

https://ror.org/052gg0110

Funder(s)

Funder type

Government

Funder Name

NIHR BRC Oxford Chronic Disease Cluster

Funder Name

National Institute for Health Research

Alternative Name(s)

National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Funder Name

NIHR CLAHRC Oxford

Results and Publications

Publication and dissemination plan

Planned publication in a high-impact peer-reviewed journal

Intention to publish date

01/04/2022

Individual participant data (IPD) sharing plan

All data generated or analysed during this study will be included in the subsequent results publication

IPD sharing plan summary

Other

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet		28/02/2019	27/06/2019	No	Yes
Protocol article		12/02/2020	22/09/2021	Yes	No
Results article		14/06/2022	16/06/2022	Yes	No
HRA research summary			28/06/2023	No	No