# Bioavailability of omega-3 fatty acids

Submission date 21/03/2016	<b>Recruitment status</b> No longer recruiting	<ul><li>Prospectively registered</li><li>[X] Protocol</li></ul>
Registration date 21/03/2016	<b>Overall study status</b> Completed	<ul> <li>Statistical analysis plan</li> <li>[X] Results</li> </ul>
Last Edited 17/02/2023	<b>Condition category</b> Nutritional, Metabolic, Endocrine	Individual participant data

### Plain English summary of protocol

Background and study aims

Omega-3 fatty acids are essential in the diet, as the body is unable to make them itself (essential fatty acids). Although they can be found in plant sources, the most important omega-3 fatty acids are eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA), which are only found in certain types of fish. There are a wide variety of different omega-3 supplements of the market, which provide EPA and DHA in different forms. In this study, the appearance in the blood of EPA and DHA after taking omega-3 fats in different chemical forms will be compared. The aim of this study is to find out whether the chemical form of the supplement affects the way the fatty acids incorporate into blood fats and blood cells.

Who can participate? Healthy men aged 18 to 45 years.

#### What does the study involve?

Participants are randomly allocated to five groups, who consume five different omega-3 fat supplements with a standard high fat meal in a random order. The meals are eaten on five separate study visits spaced two weeks apart. At each clinic visit, a blood sample is taken and then the participants are asked to eat the meal (and omega-3). After this, further blood samples are taken 30 minutes, one, one and a half, two, two and a half, three, four, five and six hours after finishing the meal in order to measure levels of EPA and DHA in the blood and in blood cells in order to see if there is a difference between the supplements.

What are the possible benefits and risks of participating?

There will be no immediate direct benefit to those taking part. There is a very small chance of infection and a chance of bleeding and bruising at the site of insertion of the needle for collecting the blood sample.

Where is the study run from? University of Southampton (UK)

When is the study starting and how long is it expected to run for? October 2009 to September 2010 Who is funding the study? Vifor Pharma (Switzerland)

Who is the main contact? Professor Philip Calder pcc@soton.ac.uk

## **Contact information**

**Type(s)** Scientific

**Contact name** Prof Philip Calder

**Contact details** 

Faculty of Medicine University of Southampton IDS Building MP887 Southampton General Hospital Tremona Road Southampton United Kingdom SO16 6YD

## Additional identifiers

EudraCT/CTIS number

**IRAS number** 

ClinicalTrials.gov number

Secondary identifying numbers RHMNUT0058

## Study information

**Scientific Title** Bioavailability and disposition of omega-3 fatty acids from different chemical forms

### **Study objectives**

The appearance of Eicosapentaenoic acid (EPA) and Docosahexaenoic acid (DHA) in plasma lipids and blood cells will differ according to chemical formulation of the parent oil.

**Ethics approval required** Old ethics approval format

Ethics approval(s)

Isle of Wight, Portsmouth and South East Hampshire Research Ethics Committee, 04/02/2010, ref: 09/H0501/98

### Study design

Randomised blinded single-centre cross-over trial

### Primary study design

Interventional

### Secondary study design

Randomised cross over trial

### Study setting(s)

Hospital

### Study type(s)

Other

### Participant information sheet

Not available in web format, please use the contact details to request a patient information sheet

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

Omega-3 metabolism

### Interventions

Participants will be allocated to one of the following groups:

- 1. Omega-3 ethyl esters
- 2. Omega-3 free fatty acids
- 3. Omega-3 triglycerides (standard formulation)
- 4. Omega-3 triglycerides (interesterified formulation)
- 5. Omega-3 triglycerides (standard formulation enterically coated)

All forms of supplement provide 1.1 g EPA plus 0.4 g DHA daily. Supplements will be taken orally immediately following consumption of a standard high fat meal. Blood samples will be immediately before the meal and at 0.5, 1, 1.5, 2, 2.5, 3, 4, 5 and 6 h after consuming the meal.

All subjects will consume all five types of supplement in random order and separated by at least two weeks.

### Intervention Type

Supplement

### Primary outcome measure

Change in EPA and DHA contents of plasma phospholipids is measured using blood testing at baseline (immediately before the meal) and 0.5, 1, 1.5, 2, 2.5, 3, 4, 5 and 6 hours after consuming the meal

### Secondary outcome measures

1. Change in EPA content of plasma triglycerides, cholesteryl esters and non-esterified fatty acids, and erythrocytes and mononuclear cells over 6 hours

2. Change in DHA content of plasma triglycerides, cholesteryl esters and non-esterified fatty acids, and erythrocytes and mononuclear cells over 6 hours

3. Change in blood concentrations of inflammatory markers over 6 hours

All secondary outcomes are measured using blood testing at baseline (immediately before the meal) and 0.5, 1, 1.5, 2, 2.5, 3, 4, 5 and 6 hours after consuming the meal.

### Overall study start date

19/10/2009

### **Completion date**

06/09/2010

## Eligibility

### Key inclusion criteria

- 1. Male
- 2. Aged 18 to 45 years
- 3. In general good health
- 4. Body mass index between 20 and 32 kg/m2
- 5. Not consuming fish oil or other oil supplements
- 6. Not eating more than one oily fish meal per week
- 7. Willing to adhere to the study protocol
- 8. Being able to provide written informed consent

### Participant type(s)

Healthy volunteer

### Age group

Adult

**Lower age limit** 18 Years

Sex

Male

Target number of participants

10

**Total final enrolment** 10

### Key exclusion criteria

- 1. Female
- 2. Aged under 18 or over 45 years
- 3. Body mass index less than 20 or more than 32 kg/m2
- 4. Being diabetic (type 1 or type 2)

5. Use of prescribed medicine to control inflammation

6. Chronic gastrointestinal problems (e.g. IBD, IBS, celiac disease, cancer)

7. Participation in another clinical trial

8. Use of fish oil or other oil supplements

Date of first enrolment 21/04/2010

Date of final enrolment 28/04/2010

## Locations

**Countries of recruitment** England

United Kingdom

**Study participating centre University of Southampton** Faculty of Medicine Southampton United Kingdom SO16 6YD

## Sponsor information

**Organisation** University Hospital Southampton NHS Foundation Trust

### Sponsor details

Research & Development Southampton General Hospital Tremona Road Southampton England United Kingdom SO16 6YD

**Sponsor type** Hospital/treatment centre

ROR https://ror.org/0485axj58

## Funder(s)

Funder type Industry

**Funder Name** Vifor Pharma

#### Alternative Name(s) Vifor Pharma Management Ltd., Vifor Pharma Management AG, Vifor Pharma Management SA, Vifor Pharma Ltd.

**Funding Body Type** Private sector organisation

#### **Funding Body Subtype** For-profit companies (industry)

**Location** Switzerland

## **Results and Publications**

### Publication and dissemination plan

Planned publication of a results paper in a peer reviewed journal.

### Intention to publish date

31/12/2016

### Individual participant data (IPD) sharing plan

The anonymised datasets generated during and/or analysed during the current study are available upon request from Philip Calder (pcc@soton.ac.uk).

#### IPD sharing plan summary

Available on request

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<u>Results article</u>	results	01/09/2016		Yes	No
<u>Protocol file</u>	version 2	01/03/2010	16/02/2023	No	No