

# Does beetroot juice improve walking in people with lung disease and low oxygen levels?

<b>Submission date</b> 03/07/2015	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 14/07/2015	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 18/07/2023	<b>Condition category</b> Respiratory	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

Despite optimum medical treatment, many patients with lung disease remain significantly disabled. There is evidence that dietary nitrate supplementation can reduce the oxygen needed during exercise but it is not clear if this improves the amount of exercise that a person can do. The purpose of this project is to investigate whether dietary nitrate supplementation in the form of a single dose of beetroot juice can improve the distance that people with lung disease who are dependent on oxygen can walk.

### Who can participate?

Adults with lung disease who need to use oxygen when they walk.

### What does the study involve?

Participants are randomly allocated into one of two groups. Those in group 1 are given 140 ml of nitrate-rich beetroot juice (0.8 g nitrate) to drink. Those in group 2 are given 140 ml of placebo (nitrate-depleted beetroot juice). All participants are then asked to do a walking test (called an "endurance shuttle walk"). How long each participant can walk for and the effects of the nitrate-rich beetroot juice on heart rate and amount of oxygen in the blood is recorded.

### What are the possible benefits and risks of participating?

The tests used are all part of routine clinical practice and no significant risks are anticipated. As this is a test of a single dose only, no direct benefit to trial participants is expected but they will be helping to advance understanding of exercise limitation and this could eventually lead to a novel therapy becoming available for them and others with their condition.

### Where is the study run from?

Royal Brompton and Harefield NHS Foundation Trust (UK)

### When is the study starting and how long is it expected to run for?

October 2015 to July 2024

### Who is funding the study?

Moulton Medical Foundation (Guernsey)

Who is the main contact?

Mansour Majrshi, m.majrshi22@imperial.ac.uk

## Contact information

### Type(s)

Public

### Contact name

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### Contact details

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### Type(s)

Scientific

### Contact name

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London  
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## Additional identifiers

### Protocol serial number

N/A

## Study information

### Scientific Title

The effect of dietary nitrate on exercise in hypoxia

## **Acronym**

EDEN-OX

## **Study objectives**

Current hypothesis as of 11/01/2023:

The purpose of this study is to investigate the effects of an acute administration of beetroot (BR) juice versus placebo beverage ingestion on plasma NO<sub>2</sub> levels, blood pressure, exercise tolerance and fractional oxygen extraction in 4 groups of patients

1. COPD patients who are using ambulatory oxygen
2. Interstitial pulmonary Fibrosis (IPF) patients who are using ambulatory oxygen
3. Pulmonary hypertension (PHT) patients who are using ambulatory oxygen
4. Adults with a history of COVID-19 and persisting breathlessness at least 3 months following the acute illness and evidence of pulmonary vascular abnormalities

The following hypotheses will be tested:

1. BR would increase plasma NO<sub>2</sub>- levels (a biomarker of NO production and availability)
  2. BR will increase endurance shuttle walk time
  3. BR will reduce oxygen desaturation during ESWT (area under SaO<sub>2</sub> curve to isotime)
  4. BR will reduce heart rate during equivalent exercise (area under HR curve to isotime)
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Previous hypothesis:

The purpose of this study is to investigate the effects of an acute administration of beetroot (BR) juice versus placebo beverage ingestion on plasma NO<sub>2</sub>- levels, blood pressure, exercise tolerance and fractional oxygen extraction in 3 groups of patients

1. COPD patients who are using ambulatory oxygen
2. Interstitial pulmonary Fibrosis (IPF) patients who are using ambulatory oxygen
3. Pulmonary hypertension (PHT) patients who are using ambulatory oxygen

The following hypotheses will be tested:

1. BR would increase plasma NO<sub>2</sub>- levels (a biomarker of NO production and availability)
2. BR will increase endurance shuttle walk time
3. BR will reduce oxygen desaturation during ESWT (area under SaO<sub>2</sub> curve to isotime)
4. BR will reduce heart rate during equivalent exercise (area under HR curve to isotime)

## **Ethics approval required**

Old ethics approval format

## **Ethics approval(s)**

London-Chelsea Research Ethics Committee, ref: 15/LO/0975

## **Study design**

Series of parallel randomised, double-blind, cross-over, placebo-controlled trial

## **Primary study design**

Interventional

## **Study type(s)**

Treatment

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

Patients with lung disease (COPD, interstitial pulmonary fibrosis, pulmonary hypertension) who require ambulatory oxygen because of exertional desaturation and adults with a history of COVID-19 and persisting breathlessness at least 3 months following the acute illness and evidence of pulmonary vascular abnormalities

## **Interventions**

140 ml of nitrate-rich beetroot juice (containing 12.9 mmol nitrate) or nitrate-depleted placebo.

## **Intervention Type**

Supplement

## **Primary outcome(s)**

An increase in endurance shuttle walk (ESWT) time breathing oxygen at the patient's customary flow rate.

## **Key secondary outcome(s)**

1. Area under oxygen saturation curve to isotime during ESWT
2. Area under heart rate curve to isotime during ESWT
3. Resting blood pressure
4. Blood nitrate levels

## **Completion date**

01/07/2024

# **Eligibility**

## **Key inclusion criteria**

Current inclusion criteria as of 18/07/2023:

1. Adult patients with GOLD I-IV COPD who require ambulatory oxygen because of exertional desaturation
2. Adult patients with IPF who require ambulatory oxygen because of exertional desaturation
3. Adult patients with pulmonary hypertension who require ambulatory oxygen because of exertional desaturation
4. Adults with a history of COVID-19 and persisting breathlessness at least 3 months following the acute illness and evidence of pulmonary vascular abnormalities (abnormal gas transfer defined as a TLco <lower limit of normal)

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Previous inclusion criteria as of 11/01/2023:

1. Adult patients with GOLD I-IV COPD who require ambulatory oxygen because of exertional desaturation
2. Adult patients with IPF who require ambulatory oxygen because of exertional desaturation
3. Adult patients with pulmonary hypertension who require ambulatory oxygen because of exertional desaturation
4. Adults with a history of COVID-19 and persisting breathlessness at least 3 months following the acute illness and evidence of pulmonary vascular abnormalities

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Previous inclusion criteria:

1. Adult patients with GOLD I-IV COPD who require ambulatory oxygen because of exertional desaturation

2. Adult patients with IPF who require ambulatory oxygen because of exertional desaturation
3. Adult patients with pulmonary hypertension who require ambulatory oxygen because of exertional desaturation

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Sex**

All

**Key exclusion criteria**

1. Clinically unstable patients (within one month of exacerbation)
2. Significant comorbidity limiting exercise tolerance
3. Significant renal impairment (estimated glomerular filtration rate (eGFR) <50 ml.min<sup>-1</sup>)
4. Hypotension (systolic blood pressure <100 mmHg)
5. Pregnancy
6. Use of nitrate based medication or PDE5 inhibitors such as sildenafil

**Date of first enrolment**

01/10/2015

**Date of final enrolment**

01/06/2024

**Locations****Countries of recruitment**

United Kingdom

England

**Study participating centre**

Royal Brompton and Harefield NHS Foundation Trust

Fulham Rd

London

United Kingdom

SW3 6NP

**Sponsor information**

**Organisation**  
Imperial College

**ROR**  
<https://ror.org/041kmwe10>

## Funder(s)

**Funder type**  
Charity

**Funder Name**  
Moulton Medical Foundation

## Results and Publications

### Individual participant data (IPD) sharing plan

The deidentified datasets generated during the current study will be available indefinitely to researchers upon request to Professor Nicholas Hopkinson ([n.hopkinson@ic.ac.uk](mailto:n.hopkinson@ic.ac.uk)) once the results have been published in a scientific journal.

**IPD sharing plan summary**  
Available on request

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	Results for COPD group	01/12/2021	03/12/2021	Yes	No
<a href="#">HRA research summary</a>			28/06/2023	No	No
<a href="#">Participant information sheet</a>		11/11/2025	11/11/2025	No	Yes