Combination analgesic development for enhanced clinical efficacy

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered	
03/03/2017		[X] Protocol	
Registration date	Overall study status Completed	Statistical analysis plan	
06/03/2017		☐ Results	
Last Edited	Condition category Musculoskeletal Diseases	Individual participant data	
09/08/2017		Record updated in last year	

Plain English summary of protocol

Background and study aims

Fibromyalgia is a long-term condition that causes pain all over the body. Chronic (long-term) pain, including fibromyalgia, affects 1 in 3 Canadians and costs around \$650 billion/year in North America. Current therapies are not always effective and have a lot of side-effects at high doses. Rational combination therapy (treatment with several drugs) with different drugs to treat fibromyalgia has shown potential for measurable improvements in pain relief, quality of life and healthcare usage. Today, more than 50% of fibromyalgia patients are taking two or more pain-relieving medications at once but combination use is based on little evidence. Research is urgently needed to identify safer, more effective, combinations. The aim of this study is to test a promising combination of pregabalin, a sedating drug that is used to treat epilepsy and fibromyalgia pain, and alpha-lipoic acid, a non-sedating antioxidant that is effective for neuropathic (nerve) pain and currently being studied for efficacy in fibromyalgia.

Who can participate?

Patients aged 18 and older with fibromyalgia

What does the study involve?

Participants are allocated to be treated with pregabalin, alpha-lipoic acid, and a combination of both drugs over three treatment periods in a random order. All drugs are taken by mouth daily with an increasing dose over a 45-day period, followed by 11 days at a decreasing dose. After the three treatment periods there are two final telephone follow-ups 2 weeks and 3 months later.

What are the possible benefits and risks of participating?

The results of this study will help to improve the treatment of fibromyalgia, particularly if the combination of drugs is found to work better than either drug alone. The risks and benefits of this study are the same as the risks and benefits of each of the drugs, pregabalin and lipoic acid. The benefits of pregabalin are pain relief, improved sleep and reduced anxiety. The benefits of lipoic acid are pain relief. The most common risks of pregabalin are dizziness, drowsiness and slowed mental function. The risks of lipoic acid are nausea and vomiting (only at doses greater than 1200mg/day).

Where is the study run from? Queen's University (Canada)

When is the study starting and how long is it expected to run for? May 2017 to November 2020

Who is funding the study?

- 1. Canadian Institutes of Health Research (Canada)
- 2. Strategy for Patient-Oriented Research (Canada)
- 3. Chronic Pain Network (Canada)

Who is the main contact? Dr Ian Gilron

Contact information

Type(s)

Scientific

Contact name

Dr Ian Gilron

Contact details

Department of Anesthesiology Victory 2 Kingston General Hospital 76 Stuart Street Kingston Canada K7L 2V7

Additional identifiers

Protocol serial number

ANAE-313-17

Study information

Scientific Title

Randomized controlled trial of a pregabalin-lipoic acid combination for the treatment of fibromyalgia

Acronym

CADENCE

Study objectives

The combination of pregabalin and alpha-lipoic acid has superior analgesic efficacy versus either single agent for fibromyalgia.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Queen's University Health Sciences and Affiliated Teaching Hospitals Research Ethics Board, 03 /03/2017, ref: ANAE-313-17

Study design

Double-blind randomised three-period crossover trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Fibromyalgia

Interventions

There are three treatment arms that cross over as per a balanced Latin square design.

Group 1: Participants receive oral pregabalin, administered twice daily, starting at a dose of 75 mg once daily and titrated to individual maximally tolerated dose over 45 days and followed by an 11-day dose taper and washout period

Group 2: Participants receive oral alpha-lipoic acid, administered twice daily, starting at a dose of 300 mg once daily and titrated to individual maximally tolerated dose over 45 days and followed by an 11-day dose taper and washout period

Group 3: Participants receive oral pregabalin and alpha-lipoic acid administered at the above doses, titrated to individual maximally tolerated dose over 45 days and followed by an 11-day dose taper and washout period

Upon completion of the trial after the three treatment periods, there will be two final telephone follow-ups at 2 weeks and 3 months after trial completion.

Intervention Type

Drug

Phase

Phase IV

Drug/device/biological/vaccine name(s)

Pregabalin, alpha-lipoic acid

Primary outcome(s)

Mean daily pain, measured using a 0-10 numerical rating scale with 0 = no pain, 10 = worst pain imaginable, averaged over the maximally tolerated dose fixed dose week (days 39-45) of each treatment period

Key secondary outcome(s))

- 1. Pain, measured by 0-10 numerical rating scale at baseline and daily throughout entire trial
- 2. Pain, measured by short-form McGill Pain Questionnaire at baseline and during maximal

tolerated dose of each of the three treatment periods

- 3. Drug doses, measured in milligrams over the 7-day maximal tolerated dose phases of each of the three treatment periods
- 4. Adverse events, measured in % frequency over the titration phases, maximal tolerated dose phases and dose taper/washout phases of each of the three treatment periods
- 5. Global relief, measured with the global relief category scale during the maximal tolerated dose phases of each of the three treatment periods
- 6. Pain interference, measured with the Brief Pain Inventory and the Fibromyalgia Impact Questionnaire at baseline and during the maximal tolerated dose phases of each of the three treatment periods
- 7. Mood, measured with the Beck Depression Inventory-2 at baseline and during the maximal tolerated dose phases of each of the three treatment periods
- 8. Anxiety, measured with the Beck Anxiety Inventory at baseline and during the maximal tolerated dose phases of each of the three treatment periods
- 9. Quality of life, measured with the SF-36 survey at baseline and during the maximal tolerated dose phases of each of the three treatment periods
- 10. Blinding, measured with a blinding questionnaire during the maximal tolerated dose phases of each of the three treatment periods
- 11. Acetaminophen consumption, measured in milligrams during the dose taper/washout phases of each of the three treatment periods

Completion date

01/11/2020

Eligibility

Key inclusion criteria

- 1. Fibromyalgia
- 2. Daily pain ($\geq 3/10$) for at least 3 months
- 3. AST/ALT ≤120% upper limit of normal
- 4. Creatinine clearance ≥60 ml/min
- 5. Necessary abilities, visual acuity, and language skills for questionnaire completion and phone communication with research personnel
- 6. Adults over the age of 18

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

- 1. Patients with major organ system disease, moderate to severe sedation or ataxia due to other required drugs, hypersensitivity to study medications, seizure disorder, or other painful condition >50% as severe as their fibromyalqia pain
- 2. Patients with a major, poorly controlled, psychiatric disorder, severe depression or suicidal ideation, or active substance abuse disorder
- 3. Patients who live alone and cannot assure daily contact with a friend, family member, or caregiver
- 4. Women of childbearing potential will be required to receive a highly effective form of contraception and a negative pregnancy test at baseline
- 5. Allergy or hypersensitivity to any of the study medications
- 6. Seizure disorder

Date of first enrolment 01/07/2017

Date of final enrolment 01/11/2020

Locations

Countries of recruitmentCanada

Central African Republic

Study participating centre Queen's University Providence Care K7L2V7 99 University Ave Kingston Canada K7L 2V7

Sponsor information

Organisation

Canadian Institutes of Health Research (Canada), Strategy for Patient-Oriented Research (SPOR), Chronic Pain Network

ROR

https://ror.org/01gavpb45

Funder(s)

Funder type

Government

Funder Name

Canadian Institutes of Health Research

Alternative Name(s)

Instituts de Recherche en Santé du Canada, Canadian Institutes of Health Research (CIHR), CIHR_IRSC, Canadian Institutes of Health Research | Ottawa ON, CIHR - Welcome to the Canadian Institutes of Health Research, CIHR, IRSC

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Canada

Funder Name

Strategy for Patient-Oriented Research

Funder Name

Chronic Pain Network

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study will be available upon request from Dr Ian Gilron.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created Date added	Peer reviewed?	Patient-facing?
Protocol article	protocol	04/08/2017	Yes	No
Participant information sheet	Participant information sheet	11/11/2025 11/11/2025	No	Yes