# Natural vitamin D (cholecalciferol) versus standard care in patients receiving dialysis

Submission date	Recruitment status  No longer recruiting	[X] Prospectively registered		
18/12/2015		☐ Protocol		
Registration date 30/12/2015	Overall study status Ongoing	Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	Individual participant data		
09/06/2025	Urological and Genital Diseases			

#### Plain English summary of protocol

Background and study aims

Vitamin D is essential for good health, because it helps our bodies to absorb calcium from the diet. There is a lot of evidence that having enough vitamin D can help prevent against many diseases, such as heart and blood vessel (cardiovascular) disease, bone diseases and cancer. Although vitamins generally come from the diet, in the case of vitamin D, the majority of people actually get most of it from sunlight. When the sun shines on our skin, a reaction in the body is triggered, causing the body to produce an active form of vitamin D called vitamin D3. Vitamin D deficiency is common patients with end stage renal disease (kidney failure), and is a strong predictor of death from cardiovascular disease, infection and cancer. Almost all kidney failure patients who are treated with dialysis are given pre-activated vitamin D to take, however this approach increases blood calcium concentrations which may be harmful, and even make vitamin D deficiency worse. International treatment guidelines therefore now recommend that kidney patients receive inactive vitamin D (cholecalciferol), since we now know that every organ activates its own vitamin D as required, even in patients with kidney failure. However, this is not currently used in the NHS as it has not yet been tested in a trial. The aim of this study is to test whether taking cholecalciferol supplements increases survival in UK dialysis patients.

### Who can participate?

Adults living in the UK with dialysis-requiring end stage renal disease.

#### What does the study involve?

Participants are randomly allocated to one of two groups. Participants in the first group take Cholecalciferol (60,000IU) capsules by mouth once every fortnight for around five and a half years. Participants in the second group continue to receive normal care and are instructed not to take cholecalciferol containing supplements (no more than 1,000IU) for the 5.5 years study period. At the start of the study and then every six months until the end of the study, participants in both groups are contacted to complete questionnaires in order to find out about their quality of life. Seven years after the start of the study, the participants are looked up on the National Deaths Register so that the survival rate of participants in each group can be calculated.

What are the possible benefits and risks of participating? There are no direct benefits or risks to participants taking part in this study.

Where is the study run from? Addenbrooke's Hospital (Cambridge) and 35 other NHS hospitals in the UK.

When is the study starting and how long is it expected to run for? March 2016 to April 2026

Who is funding the study? National institute for health research (UK)

Who is the main contact? Dr Rona Smith

# **Contact information**

# Type(s)

Scientific

#### Contact name

Dr Thomas Hiemstra

#### Contact details

Simplified Trial Office Cambridge Clinical Trials Unit Box 401 Cambridge Biomedical Campus Cambridge United Kingdom CB2 0QQ

# Additional identifiers

# EudraCT/CTIS number

2015-005003-88

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

SIM15

# Study information

#### Scientific Title

Natural vitamin D (cholecalciferol) versus standard care in patients receiving dialysis - The SIMPLIFIED randomised registry trial

#### Acronym

#### **SIMPLIFIED**

#### **Study objectives**

Cholecalciferol 60,000IU by mouth fortnightly will increase survival in patients receiving long term dialysis when compared with standard care.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Cambridgeshire East Regional Ethics Committee, 10/03/2016, ref: 16/EE/065

#### Study design

Multi-centre open-label blinded endpoint pragmatic interventional randomised registry trial

#### Primary study design

Interventional

#### Secondary study design

Randomised controlled trial

#### Study setting(s)

Hospital

#### Study type(s)

Treatment

# Participant information sheet

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

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

End stage renal disease

#### **Interventions**

Participants are randomly allocated to one of two groups.

Intervention group: Participants will receive oral cholecalciferol 60,000IU fortnightly for the duration of the trial mean follow-up 5.5 years.

Control group: Participants will receive standard care but will not be permitted to receive more than 1,000IU per day of cholecalciferol or ergocalciferol.

For all participants, questionnaire-based follow-up will be performed by phone, mail or electronically at 6 monthly intervals for the duration of the trial. Endpoints (death, hospital admissions, cardiovascular events, cancer, infections, fracture) will be obtained from routinely collected data sources including the national deaths register, hospital episode statistics, the UK renal registry, and the UK and Ireland Association of Cancer Registries. The trial will be event-driven, and will complete once 2,200 deaths have occurred.

#### Intervention Type

Drug

#### Phase

Phase IV

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

Cholecalciferol

#### Primary outcome measure

All cause mortality will be determined from the national deaths register at 7 years.

#### Secondary outcome measures

- 1. Health-related quality of life is measured using the EQ5D questionnaire , determined at 6-monthly intervals for the duration of the trial
- 2. Hospitalisation-requiring composite cardiovascular events (defined as CV death, acute coronary syndrome, heart failure or arrhythmia and stroke) is determined from Hospital Episode Statistics, and will be obtained at at least 6-monthly intervals for the duration of the trial
- 3. Hospitalisation for infection is determined from Hospital Episode Statistics, and will be obtained at at least 6-monthly intervals for the duration of the trial
- 4. Cancer incidence determined from the UK and Ireland Association of Cancer Registries (UKIACR) database after the end of the trial (after 2,200 deaths have occurred, estimated to be 7 years after enrolment of the first participant)
- 5. Hospitalisation for fracture is determined from Hospital Episode Statistics, and will be obtained at at least 6-monthly intervals for the duration of the trial
- 6. Cost-effectiveness of cholecalciferol is determined by calculating life years gained per patient (estimated from mortality data from the National Deaths Register (ONS) and Quality Adjusted Life Years (QALYs) gained (estimated from both ONS mortality data and EQ5D data converted to health state utilities relevant to the UK population) at 7 years

#### Overall study start date

01/03/2016

#### Completion date

30/04/2026

# **Eligibility**

### Key inclusion criteria

- 1. Aged 18 years or over
- 2. Have given written informed consent to participate
- 3. UK Resident
- 4. Have dialysis-requiring end stage renal disease (ESRD)

#### Participant type(s)

Patient

#### Age group

Adult

#### Lower age limit

18 Years

#### Sex

Both

#### Target number of participants

4,200

#### Key exclusion criteria

Current exclusion criteria as of 23/11/2017:

- 1. Current treatment with high dose (>1,000IU/day) cholecalciferol or ergocalciferol in the last 30 days
- 2. Persistent hypercalcaemia (>2.62 mmol/l on three separate and sequential occasions without precipitating cause)
- 3. Life expectancy of less than 6 months
- 4. Women who are pregnant / planning to become pregnant
- 5. Hypersensitivity to colecalciferol or any of the excipients
- 6. Not contributing, or willing to contribute, data to the UK Renal Registry (UKRR)

#### Previous exclusion criteria:

- 1. Current treatment with high dose (>1,000IU/day) cholecalciferol
- 2. Persistent hypercalcaemia (>2.62 mmol/l on three separate and sequential occasions without precipitating cause)
- 3. Life expectancy of less than 6 months
- 4. Women who are pregnant / planning to become pregnant
- 5. Inability to provide informed consent
- 6. Not contributing, or willing to contribute, data to the UK Renal Registry (UKRR)

#### Date of first enrolment

14/12/2016

#### Date of final enrolment

31/07/2025

# Locations

#### Countries of recruitment

England

Scotland

**United Kingdom** 

Wales

# Study participating centre Addenbrooke's Hospital

Hills Road Cambridge United Kingdom CB2 0QQ

# Study participating centre The Royal London Hospital

Whitechapel Road Whitechapel London United Kingdom E1 1BB

# Study participating centre Bradford Hospital

Duckworth Lane Bradford United Kingdom BD9 6RJ

# Study participating centre Doncaster Hospital

Thorne Road Doncaster United Kingdom DN2 5LT

# Study participating centre Freeman Hospital

Freeman Road Newcastle upon Tyne United Kingdom NE7 7DN

# Study participating centre Glasgow Royal Infirmary

84 Castle Street Glasgow United Kingdom G4 0ET

# Study participating centre

#### Gloucester Royal Hospital

Great Western Road Gloucester United Kingdom GL1 3NN

### Study participating centre Guys and St Thomas' Hospital

Westminster Bridge Road London United Kingdom SE1 9RT

# Study participating centre Ipswich Hospital

Heath Road Ipswich United Kingdom IP4 5PD

### Study participating centre Leicester Royal infirmary

Infirmary Square Leicester United Kingdom LE1 5WW

# Study participating centre Manchester Royal Infirmary

Oxford Road Manchester United Kingdom M13 9WL

# Study participating centre Norfolk and Norwich University Hospital

Colney Lane Norwich United Kingdom NR4 7UY

### Study participating centre Northern General Hospital

Herries Road Sheffield United Kingdom S5 7AU

# Study participating centre Nottingham City Hospital

Hucknall Road Nottingham United Kingdom NG5 1PB

# Study participating centre Royal Free Hospital

Pond Street London United Kingdom NW3 2QG

# Study participating centre Royal Liverpool Hospital

Prescot Street Liverpool United Kingdom L7 8XP

# Study participating centre Royal Shrewsbury Hospital

Mytton Oak Road Shrewsbury United Kingdom SY3 8XQ

# Study participating centre Royal Sussex County Hospital

Eastern Road Brighton United Kingdom BN2 5BE

# Study participating centre Salford Royal Hospital

Stott Lane Salford United Kingdom M6 8HD

# Study participating centre Southend Hospital

Prittlewell Chase Westcliff-on-Sea United Kingdom SSO 0RY

# Study participating centre Lister Hospital

Chelsea Bridge Road London United Kingdom SG1 4AB

# Study participating centre Sunderland Royal Hospital

Kayll Road Sunderland United Kingdom SR4 7TP

# Study participating centre University Hospital Aintree

Longmoor Lane Liverpool United Kingdom L9 7AL

# Study participating centre

### **University Hospital Wales**

Heath Park Cardiff United Kingdom CF14 4XW

### Study participating centre Broomfield Hospital

Court Road
Broomfield
Chelmsford
United Kingdom
CM1 7ET

# Study participating centre Kings College Hospital

Denmark Hill London United Kingdom SE5 9RS

# Study participating centre Southmead Hospital

Dorian Way Westbury-on-Trym Bristol United Kingdom BS10 5NB

# Study participating centre St George's Hospital

Blackshaw Road Tooting London United Kingdom SW17 0QT

#### Study participating centre St James' University Hospital Beckett Street

Leeds

United Kingdom LS9 7TF

# Study participating centre Northwick Park Hospital (Imperial-London)

Watford Road Harrow London United Kingdom HA1 3UJ

# Study participating centre Kent & Canterbury Hospital (East Kent)

Ethelbert Road Canterbury United Kingdom CT1 3NG

# Study participating centre Basildon and Thurrock University

Nethermayne Basildon United Kingdom SS16 5NL

### Study participating centre Churchill Hospital

Old Road Headington Oxford United Kingdom OX3 7LE

### Study participating centre Royal Preston Hospital (Lancashire)

Sharoe Green Lane North Fulwood Preston United Kingdom PR2 9HT

### Study participating centre Royal Devon & Exeter (Wonford)

Barrack Road Exeter United Kingdom EX2 5DW

### Study participating centre Royal Stoke University Hospital

Newcastle Road Stoke-on-Trent United Kingdom ST4 6QG

# Study participating centre Derriford Hospital

Derriford Road Crownhill Plymouth United Kingdom PL6 8DH

# Sponsor information

#### Organisation

Cambridge University Hospitals NHS Foundation Trust

# Sponsor details

Cambridge Biomedical Campus Hills Road Cambridge England United Kingdom CB2 0QQ

### Sponsor type

Hospital/treatment centre

#### **ROR**

https://ror.org/04v54gj93

# Funder(s)

#### Funder type

Government

#### 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

# **Results and Publications**

#### Publication and dissemination plan

Planned dissemination of findings via presentations at national and international meetings, and through publication in peer-reviewed journals. In addition to meetings orientated to nephrology, publication of results at meetings aimed at allied health professionals and general practitioners involved in the care of patients receiving dialysis is also planned.

# Intention to publish date

30/03/2026

# Individual participant data (IPD) sharing plan

Regarding the participant level date set, the majority of data collections are made indirectly via UKRR and NHS DIGITAL and are saved on our secure data hosting server (SDHS- the University of Cambridge). The aggregated (not participant level) data might become available after publication.

# IPD sharing plan summary

Stored in repository

# Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Abstract results		01/12/2015	10/05/2021	No	No