

Comparison of magnesium given by mouth to magnesium given through the vein to treat patients with low blood magnesium

Submission date 23/06/2022	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 25/08/2022	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 25/08/2022	Condition category Nutritional, Metabolic, Endocrine	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

Hypomagnesaemia is when the amount of magnesium in the blood is too low. This can cause nausea and vomiting, sleepiness, muscle weakness, spasms, or tremors. This study will compare treatments for hypomagnesaemia, comparing magnesium given by mouth to magnesium given through the vein in its ability to increase the blood magnesium level.

Who can participate?

Adult patients can participate if they are hospitalized and have a low magnesium level, are not taking certain medications (proton pump inhibitors, diuretic use), do not have kidney or intestinal problems, do not have severe infections, are not pregnant, and do not have heart problems happening at the same time.

What does the study involve?

Participants will be allocated to one of three groups, with an equal chance of being in each group (like tossing a coin). Participants in the first group will receive magnesium given by mouth, participants in the second group will receive magnesium given through injection into the vein at a normal rate, and participants in the third group will receive magnesium given through injection into the vein at a slow rate.

What are the possible benefits and risks of participating?

The possible benefits of participating to the individual include potential avoidance of another vein medication. The benefits to society include better understanding

Where is the study run from?

Riverside University Health Systems - Medical Center (USA)

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

June 2015 to September 2017

Who is funding the study?
Riverside University Health Systems - Medical Center (USA)

Who is the main contact?
Dr Alexander Friedman, alex.friedman@ruhealth.org

Contact information

Type(s)

Principal Investigator

Contact name

Dr Alexander Friedman

ORCID ID

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Contact details

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Additional identifiers

EudraCT/CTIS number

Nil known

IRAS number

ClinicalTrials.gov number

Nil known

Secondary identifying numbers

Nil known

Study information

Scientific Title

Comparison of oral and intravenous magnesium repletion in patients with hypomagnesemia: a randomized controlled trial

Study objectives

Repletion with intravenous magnesium is non inferior to oral magnesium in raising serum magnesium level for mild to moderate hypomagnesemia

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 14/12/2015, Riverside University Health System Medical Center (RUHSMC) IRB (26520 Cactus Ave, Moreno Valley, CA 92555; +1 951 486 4098; IRB@RUhealth.org)

Study design

Randomized controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

See additional files

Health condition(s) or problem(s) studied

Hypomagnesemia

Interventions

Participants will be randomized into three groups. The randomization process will involve randomly generated numbers placed in sealed envelopes. Group 1 received magnesium oxide (MgOx) 400 mg tabs: 1600 mg, followed by 800 mg 4 h later. Group 2 received magnesium sulfate (MgSO₄) 2 g IV infused over 2 . Group 3 was administered magnesium sulfate (MgSO₄) 2 g IV, infused over 6 h.

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

magnesium sulfate, magnesium oxide

Primary outcome measure

Absolute serum magnesium level measured from blood samples collected at the time of enrollment and between 18 and 30 h after initiation of repletion

Secondary outcome measures

The relative rise in serum magnesium level measured from blood samples collected at the time of enrollment and between 18 and 30 h after initiation of repletion

Overall study start date

01/06/2015

Completion date

30/09/2017

Eligibility

Key inclusion criteria

1. Inpatient at the participating medical center
2. Aged >18 years
3. Serum magnesium between 1.2 and 1.7 mg/dl

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

120

Total final enrolment

112

Key exclusion criteria

1. Proton pump inhibitor (PPI) use
2. Concomitant diuretic use
3. Acute or chronic renal insufficiency
4. Active myocardial infarction
5. Eclampsia or preeclampsia
6. Pregnancy
7. Incarcerated status
8. Unable to tolerate oral intake
9. History of bowel surgery
10. Active diarrhea
11. Concomitant chemotherapy
12. Severe sepsis
13. Prior enrollment in the study

Date of first enrolment

10/07/2015

Date of final enrolment

30/09/2017

Locations

Countries of recruitment

United States of America

Study participating centre

Riverside University Health System Medical Center

26520 Cactus Ave

Moreno Valley

United States of America

92555

Sponsor information

Organisation

Riverside University Health System - Medical Center

Sponsor details

26520 Cactus Ave

Moreno Valley

United States of America

92555

+1 9514864000

alex.friedman@ruhealth.org

Sponsor type

Hospital/treatment centre

Website

<http://www.ruhealth.org/en-us>

ROR

<https://ror.org/020448x84>

Funder(s)

Funder type

Hospital/treatment centre

Funder Name

Results and Publications

Publication and dissemination plan

Planned publication in a peer reviewed medical journal

Intention to publish date

01/07/2022

Individual participant data (IPD) sharing plan

The datasets generated during and/or analyzed during the current study are/will be available upon request from Dr Alexander Friedman (alex.friedman@ruhealth.org).

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet	Informed consent - English language		25/08/2022	No	Yes
Participant information sheet	Informed consent - Spanish language		25/08/2022	No	Yes
Protocol file			25/08/2022	No	No