# Effect of maritime pine bark extract, Pycnogenol, on chronic tinnitus (ringing or buzzing in the ears)

| Submission date 15/02/2023          | <b>Recruitment status</b><br>Recruiting           | [X] Prospectively registered [_] Protocol   |
|-------------------------------------|---|---|
| <b>Registration date</b> 03/03/2023 | <b>Overall study status</b><br>Ongoing            | <ul> <li>Statistical analysis plan</li> <li>Results</li> </ul>                        |
| Last Edited<br>09/09/2024           | <b>Condition category</b><br>Ear, Nose and Throat | <ul><li>Individual participant data</li><li>[X] Record updated in last year</li></ul> |

## Plain English summary of protocol

#### Background and study aims

Tinnitus is one of the most common ear symptoms, defined as conscious awareness of sound in the absence of an external auditory stimulus. In most cases, tinnitus develops as a result of various causes (e.g. sudden hearing loss, noise trauma, ototoxic drugs, head injury or depression). It is assumed that oxidative stress plays a crucial role in the etiopathogenesis of tinnitus. Currently, no universal cure exists for patients suffering from tinnitus and the available treatment is not sufficient for their quality of life. Pycnogenol® (PYC) is natural standardised extract from pine bark and has multiple health benefits. It has strong antioxidant properties, stimulates activity of antioxidant enzymes, protects vascular endothelium, improves microcirculatory function, stimulates the production of NO by stimulating NO synthase, and others. This double-blind, randomized, placebo-controlled study aims to investigate the effect of daily use of PYC (150 mg per day) on symptoms of tinnitus, quality of life and markers of oxidative stress in patients with chronic tinnitus for 3 months.

### Who can participate?

Adults aged 18 to 70 years suffering from chronic tinnitus for at least 6 months.

### What does the study involve?

In the randomised, double-blind placebo-controlled study, the improvement effects of PYC (PYCgroup) on the management of patients with chronic tinnitus will be compared with placebo (PLgroup). Patients who meet the inclusion criteria, after initial medical investigation (complete medical history and examination, demographic and anthropometric data, audiometry, questionnaire about quality of life) will be allocated to one of the two arms of the project (PYC or PL-group) in ratio 1:1, according to a computer-generated random sequence (visit 1). Patients will be administered 150 mg PYC or Placebo for 3 months. Subsequently, patients will be examined by audiometry, to determine changes in intensity, noise and frequency of tinnitus and masking tone change, and patients will fill out a questionnaire about quality of life (visit 2). At each visit, blood samples will be taken. The randomisation will be performed by the statistician, who will have no contact with the participants. The research team and participants will be unaware of the group assignments. What are the possible benefits and risks of participating? Participants who receive Pycnogenol® may benefit from the reduction of the symptoms of tinnitus and improvement of their quality of life. There are no known risks to participants taking part in this study.

Where is the study run from?

1. Institute of Medical Chemistry, Biochemistry and Clinical Biochemistry, Comenius University, Bratislava, Slovakia

2. Department of Otorhinolaryngology - Head and Neck Surgery, Faculty of Medicine and University Hospital, Comenius University Bratislava, Slovakia

When is the study starting and how long is it expected to run for? May 2022 to December 2025

Who is funding the study? Horphag Research Ltd, Geneva, Switzerland

Who is the main contact? RNDr. Paduchová Zuzana, PhD. zuzana.paduchova@fmed.uniba.sk

# **Contact information**

**Type(s)** Scientific

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# Additional identifiers

**EudraCT/CTIS number** Nil known

**IRAS number** 

**ClinicalTrials.gov number** Nil known

### Secondary identifying numbers

TinniPYC V.03

# Study information

### Scientific Title

TinniPYC: Pycnogenol and chronic tinnitus

### Acronym

TinniPYC

### Study objectives

The study aims to investigate whether daily supplementation with Pycnogenol® in capsules (150mg/day) is able to reduce the symptoms of tinnitus, improve quality of life and to affect parameters of oxidative stress in patients with chronic tinnitus for 3 months.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Approved 16/12/2022, Ethics Board of St. Cyril and Methodius Hospital, University Hospital in Bratislava, Slovakia (Antolská 11, 851 07 Bratislava, SLovakia; +421 2 68672 730; eticka. komisia@pe.unb.sk), ref: EK/2/12/2022

### Study design

inerventional double-blinded randomized and placebo-controlled study

### Primary study design

Interventional

**Secondary study design** Randomised controlled trial

**Study setting(s)** Community, Medical and other records

## Study type(s)

Quality of life

### 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

Chronic tinnitus

### Interventions

Participants randomised to active or placebo group will be required to take three capsules a day for 3 months:

1. Active intervention: 50 mg of standardised extract from pine bark – Pycnogenol® per capsules

2. Placebo intervention: maltodextrin without the active substances, identically packaged as active.

Both interventions will be prepared by Horphag Research Ltd. (Geneva, Switzerland).

Eligible subjects were allocated in a 1:1 ratio to the two arms of the study (active and placebo) according to a computer-generated random sequence using block randomisation with a blocksize of four. The randomisation was performed by a study statistician, who had no participant contact. Participants were enrolled and assigned sequentially to interventions by the doctor. The allocation sequence sealed in an envelope will be kept by the project coordinator in case of an emergency requirement to break the code. The allocation sequence was not available to any member of the research team until the databases had been completed and locked.

### Intervention Type

Supplement

### Primary outcome measure

Changes in clinical symptoms are measured by audiometry at baseline and 3 months:

- 1. Tinnitus intensity
- 2. Tinnitus noise and frequency
- 3. Masking tone

### Secondary outcome measures

1. Quality of life measured usig Tinnitus Functional Index (TFI) questionnaires at baseline and 3 months,

2. Basic biochemical parameters (glucose, insulin, uric acid, urea), lipid profile (total cholesterol, HDL, LDL, TAG), liver enzymes (ALT, AST, ALP), blood count and cortisol levels measured in the accredited Clinical biochemistry and haematology laboratory at baseline and 3 months after intervention,

3. Markers of oxidative stress (DNA damage, AOPP, LPx, TBARS, nitrothyrosine, total oxidant status), levels of paraoxonase with lactonase activity (PON-L) and cytokine IL-10 measured in plasma/serum or whole blood at baseline and 3 month after intervention,

4. Total antioxidant status (FRAP, TEAC) and activities of antioxidant enzymes (SOD, GPx, CAT) measured in plasma or erythrocytes lysate at baseline and 3 months of intervention.

# Overall study start date 01/05/2022

Completion date 31/12/2025

# Eligibility

### Key inclusion criteria

- 1. Adults aged between 18 and 70 years
- 2. Chronic tinnitus for a minimum of 6 months
- 3. Patients who are willing to sign an informed consent
- 4. Patients who are willing to provide two blood samples

## Participant type(s)

Patient

## Age group

Adult

#### **Lower age limit** 18 Years

18 Years

## Upper age limit

70 Years

## Sex

Both

## Target number of participants

80 participants, 40 in active group and 40 in placebo

## Key exclusion criteria

- 1. Age <18 and >70 years.
- 2. Pregnant or breastfeeding women.
- 3. Patients with a history of ear surgery.
- 4. Patients with vestibular schwannoma hearing impairment beyond age-related sensor neurological disorder, more serious neurological or internal disease (tumour, stroke, vascular stenosis, Meniere's disorder, etc.).
- 5. Patients who are taking blood thinners.
- 6. Patients who are unable/unwilling to sign an informed consent.
- 7. Patients who are unable/unwilling to provide samples of biological material as needed.

## Date of first enrolment

22/08/2023

# Date of final enrolment

30/09/2025

# Locations

**Countries of recruitment** Slovakia

**Study participating centre Faculty of Medicine and University Hospital, Comenius University Bratislava** Department of Otorhinolaryngology - Head and Neck Surgery Antolská 11 Bratislava Slovakia 851 07

Study participating centre

### **Comenius University**

Institute of Medical Chemistry, Biochemistry and Clinical Biochemistry Medical School Sasinkova 2 Bratislava Slovakia 81108

# Sponsor information

**Organisation** Horphag Research (Switzerland)

Sponsor details 71, avenue Louis Casaï Geneva Slovakia CH-1216 Cointrin +41 (0)22 710 26 26 carolina.burki@horphag.com

**Sponsor type** Industry

Website http://www.pycnogenol.com

ROR https://ror.org/003n34405

# Funder(s)

Funder type Industry

**Funder Name** Horphag Research

# **Results and Publications**

**Publication and dissemination plan** Planned publication in a high-impact peer-reviewed journal

### Intention to publish date

01/06/2026

### Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study will be available upon request from zuzana.paduchova@fmed.uniba.sk

## IPD sharing plan summary

Available on request