

# Vitamin K therapy to improve vascular health in patients with chronic kidney disease

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		<input type="checkbox"/> Protocol
<b>Registration date</b> 24/02/2015	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
<b>Last Edited</b> 24/08/2020	<b>Condition category</b> Urological and Genital Diseases	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

Chronic kidney disease is a long-term medical condition where the kidneys do not work properly. It is a common disease, and particularly so in older people. Kidney problems affect the kidney, and also the health of blood vessels and the heart, leading to an increased risk of heart disease or strokes. Kidney problems lead to blood vessels becoming stiffer than usual, due to a build-up of calcium in the wall of the blood vessel. So finding ways to stop or reverse this stiffening of the blood vessels is really important, and we don't have good treatments for this problem at the moment. Some recent research suggests that vitamin K—a vitamin present in vegetables and dairy foods—might be able to slow down or stop this build-up of calcium in blood vessels. Before we can recommend this as a treatment though, it is important that giving extra vitamin K is tested properly in controlled trials such as this one.

### Who can participate?

Patients with chronic kidney disease (stages 3b and 4 - so does not include those on dialysis)

### What does the study involve?

Participants are randomly allocated into one of two groups. One group takes 400mcg of vitamin K once a day. The other group takes a placebo once a day. Each participant is asked to go to their study centre first for a screening visit, to see whether they are suitable for the study. They then visit the centre a further three times – at the start of the study, 6 months later and, finally, 12 months later. They undergo a number of tests during these visits including blood pressure measurements when lying down and when stood up, walking speed, strength and balance tests and an x-ray of their abdomen. Investigators also take samples of blood and ask participants to provide a urine sample. A small pencil-like device is also placed over the blood vessel of each participant to measure their pulse to test how stiff their blood vessels are. The electrical activity of their heart is also monitored with a heart tracing. At the end of each visit, participants are asked to take home a diary to record any falls they might have over the next six months. They are also given a blood pressure cuff to wear for the next 24 hours and a supply of the study medication they have been allocated to receive.

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

This dose of vitamin K has been used before and is known to be safe but as with all medications

there is a small possibility of side effects. These can include sickness, diarrhoea and dizziness. Having blood taken can cause some bruising. The blood pressure cuff causes mild discomfort to some people. We allow participants to have plenty of rest in between the walking and strength tests so that they are not made overly tired by the tests.

Where is the study run from?

University of Dundee and the University of Glasgow, Scotland (UK)

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

June 2015 to August 2017

Who is funding the study?

The British Heart Foundation (UK)

Who is the main contact?

Dr Miles Witham

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## Contact information

### Type(s)

Public

### Contact name

Dr Miles Witham

### Contact details

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# Additional identifiers

## Protocol serial number

2014CV03

# Study information

## Scientific Title

Vitamin K therapy to improve vascular health in patients with chronic kidney disease: a randomised controlled trial

## Acronym

K4Kidneys

## Study objectives

That 1 year of vitamin K2 supplementation (400mcg per day) improves pulse wave velocity compared to placebo in patients with CKD stages 3b and 4

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

East of Scotland Research Ethics Committee, 16/06/2015, approval number: 15/ES/0085

## Study design

Two-centre parallel-group placebo-controlled randomised trial

## Primary study design

Interventional

## Study type(s)

Treatment

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

Chronic kidney disease stages 3b and 4

## Interventions

400 mcg once daily oral vitamin K2 (MK7 subtype) vs matching placebo

## Intervention Type

Supplement

## Primary outcome(s)

Between-group difference in carotid-femoral pulse wave velocity (PWV) at 12 months using the Sphygmocor system

## Key secondary outcome(s)

All measured at 0,6 and 12 months except for aortic radiography:

1. Vascular health:
  - 1.1. Office and 24 hour blood pressure
  - 1.2. B-type natriuretic peptide
  - 1.3. Central systolic blood pressure and augmentation index derived from applanation tonometry at the radial artery using the Sphygmocor system.
  - 1.4. Pulse wave velocity at 6 months (in addition to the primary outcome measured at 12 months)
2. Insulin and glucose levels to calculate insulin resistance using HOMA-IR
3. Marker of effect of vitamin K: dp-ucMGP levels.
4. Calcium and bone metabolism and turnover:
  - 4.1. Osteocalcin
  - 4.2. Tartrate resistant acid phosphatase-5b
  - 4.3. Parathyroid hormone
  - 4.4. Fetuin
  - 4.5. Fibroblast growth factor-23
  - 4.6. 25-hydroxyvitamin D
  - 4.7. 1,25-hydroxyvitamin D
5. Renal function: We will measure serum creatinine, and urinary protein/creatinine ratio on a spot urine sample at each timepoint
6. Radiological calcification: We will perform lateral abdominal radiography at baseline and 12 months to assess aortic calcification.
7. Physical function:
  - 7.1. Short physical performance battery
  - 7.2. Grip strength at each timepoint
  - 7.3. Monthly falls diary to prospectively record falls

**Completion date**

31/03/2019

## Eligibility

**Key inclusion criteria**

1. Age >18 years
2. CKD stages 3b or 4 (eGFR of >15 ml/min and <45 ml/min by MDRD4 equation)

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Sex**

All

**Total final enrolment**

### **Key exclusion criteria**

1. Atrial fibrillation
2. Taking warfarin (which antagonises vitamin K) or other coumadin derivatives.
3. Taking vitamin K
4. Unable to give written informed consent
5. Currently enrolled in another trial, or within 30 days of completing another trial
6. Pregnant or (if female and pre-menopausal) not using reliable contraception

### **Date of first enrolment**

01/06/2015

### **Date of final enrolment**

31/05/2016

## **Locations**

### **Countries of recruitment**

United Kingdom

Scotland

### **Study participating centre**

#### **Ninewells Hospital and Medical School**

Ageing and Health Division of Medicine and Therapeutics

Ninewells Avenue

Dundee

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### **Study participating centre**

#### **University of Glasgow**

Institute of Cardiovascular and Medical Sciences

Glasgow

United Kingdom

G12 8TA

## **Sponsor information**

### **Organisation**

Tayside Academic Science Centre (NHS Tayside and University of Dundee)

ROR

<https://ror.org/049x86d03>

## Funder(s)

### Funder type

Research organisation

### Funder Name

British Heart Foundation

### Alternative Name(s)

The British Heart Foundation, the\_bhf, BHF

### Funding Body Type

Private sector organisation

### Funding Body Subtype

Trusts, charities, foundations (both public and private)

### Location

United Kingdom

## Results and Publications

### Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are available from the corresponding author on reasonable request. Anonymised, individual-participant data from the current study will be available to bona-fide researchers upon request from Professor Miles Witham (Miles.Witham@newcastle.ac.uk), subject to submission of a data access request outlining the planned analysis, purpose of the analysis, data required and publication plan, and subject to approval by the Sponsor

### 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	01/10/2020	24/08/2020	Yes	No
<a href="#">Basic results</a>		27/09/2019	27/09/2019	No	No
<a href="#">HRA research summary</a>			28/06/2023	No	No