Pilot study for the treatment of heart failure with Pycnogenol

Submission date	Recruitment status	Prospectively registered
06/08/2007	No longer recruiting	Protocol
Registration date	Overall study status	Statistical analysis plan
06/12/2007	Completed	Results
Last Edited	Condition category	[] Individual participant data
06/12/2007	Circulatory System	Record updated in last year

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

HF2007AM

Study information

Scientific Title

Study objectives

Pycnogenol, standardized French maritime pine bark extract, has shown beneficial effects on various cardiovascular health parameters such as blood pressure and cholesterol levels in both preclinical as well as clinical trials. The aim of this study is to investigate the effect of 200 mg daily of Pycnogenol on objective and subjective symptoms in patients with heart failure New York Heart Association (NYHA) status II.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved by the Ethics Committee at Okuizumo Hospital in Shimane prefecture, Japan, on 24 May 2007

Study design

12 week randomised, double-blind placebo-controlled matched pairs study.

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Not specified

Study type(s)

Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Heart failure

Interventions

200 mg Pycnogenol (standardized extract of French maritime pine bark) or placebo for 12 weeks. Patients receiving diuretics before enrollment should continue usage and not change dose/intake intervals. Drug intake will be controlled and any unwanted effect reported at each visit.

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Pycnogenol

Primary outcome measure

Patients undergo tests for maximal workload and pressure-heart product at 0, 4, 8, and 12 weeks after enrollment.

Maximal workload: As determined by a symptom-limited bicycle exercise test in the seated position.

Pressure-heart rate product: Immediately after 2 min work at 50 W, systolic blood pressure and heart rate are recorded. Pressure-heart rate product is calculated by units of systolic blood pressure (mmHq) x heart rate per minute divided by 100.

Secondary outcome measures

Patients will report scores for dyspnea and fatigue for the foregoing 4 weeks upon enrollment (baseline) and repeat evaluation at 4, 8, and 12 weeks after enrollment. Symptom scores will be evaluated by asking patients about the severity of the following symptoms:

- 1. Early fatigability
- 2. Dyspnea
- 3. General capability
- 4. Lassitude
- 5. Feeling depressed
- 6. Anxiety

Scores range from 0 = not present, 1 = occasionally mild, 2 = frequently mild, 3 = moderate, 4 = severe.

Blood analysis: Routine clinical chemistry in addition to the assays of BNP (NT-proBNP), C-Reactive Protein and troponin T.

Overall study start date

10/08/2007

Completion date

31/07/2008

Eligibility

Key inclusion criteria

Patients over 40 years of age with chronic congestive heart failure (NYHA class II), known for at least 6 months which were previously untreated or treated with a diuretic and/or a low dose of an ACE inhibitor. Patients must have an exercise capacity of at least 75 watts as assessed by seated bicycle ergometry.

Participant type(s)

Patient

Age group

Adult

Sex

Target number of participants

30

Key exclusion criteria

- 1. NYHA status I. III or IV
- 2. Treatment with digitalis within the previous 6 months
- 3. Exercise capacity of >75 W for 2 min at the test during run-in
- 4. Unstable angina or myocardial infarction within the last 6 months
- 5. Atrial fibrillation or ventricular arrhythmia greater than or equal to Lown III
- 6. Cardiac valvular disease or hypertrophic cardiomyopathy
- 7. Significant hypertension or hypotension (< 60 mmHg or greater than or equal to 105 mmHg diastolic or < 90 mmgH or > 175 mmHg systolic)
- 8. Electrolyte disturbances, hyperuricemia, hypovolemia
- 9. Impaired renal function (creatinine >1.8 mg/dL) or hepatic function
- 10. Obstructive airways disease
- 11. Insulin-dependent diabetes
- 12. Malignant or other serious disease
- 13. Hypersensitivity to study drug
- 14. Pregnancy, unreliable contraception, breast-feeding mothers
- 15. Participation in another clinical trial within the last 6 weeks

Date of first enrolment

10/08/2007

Date of final enrolment

31/07/2008

Locations

Countries of recruitment

Japan

Study participating centre Kyoto University Graduate School of Medicine

Kyoto Japan 606 8507

Sponsor information

Organisation

Kyoto University (Japan)

Sponsor details

c/o Dr Akira Matsumori Kyoto University Graduate School of Medicine Department of Cardiovascular Medicine 54 Kawahara-cho Shogoin Sakyo-ku Kyoto Japan 6068507

Sponsor type

University/education

Website

http://www.kyoto-u.ac.jp/index-e.html

ROR

https://ror.org/02kpeqv85

Funder(s)

Funder type

University/education

Funder Name

Kyoto University, Cardiomyopathy and Myocarditis Research Fund (Japan)

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration