# Pilot study for the treatment of heart failure with Pycnogenol

Submission date	Recruitment status	<ul><li>Prospectively registered</li></ul>
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	<ul><li>Record updated in last year</li></ul>

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Dr Akira Matsumori

#### Contact details

Kyoto University Graduate School of Medicine Department of Cardiovascular Medicine 54 Kawahara-cho Shogoin Sakyo-ku Kyoto Japan 606 8507

# Additional identifiers

Protocol serial number 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

#### Study type(s)

Treatment

## 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(s)

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 (mmHg) x heart rate per minute divided by 100.

## Key secondary outcome(s))

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.

# 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** 

# Healthy volunteers allowed

No

# Age group

Adult

#### Sex

All

# 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)** 

#### **ROR**

https://ror.org/02kpeqv85

# Funder(s)

# Funder type

University/education

#### **Funder Name**

Kyoto University, Cardiomyopathy and Myocarditis Research Fund (Japan)

# **Results and Publications**

# Individual participant data (IPD) sharing plan

**IPD sharing plan summary**Not provided at time of registration