# Ultraviolet related deoxyribonucleic acid damage in skin of patients with atopic dermatitis and atopic status in relation to the use of Myfortic®

Submission date 22/11/2006	<b>Recruitment status</b> No longer recruiting	<ul> <li>Prospectively registered</li> <li>Protocol</li> </ul>
<b>Registration date</b> 22/11/2006	<b>Overall study status</b> Completed	<ul> <li>Statistical analysis plan</li> <li>Results</li> </ul>
Last Edited 05/12/2006	<b>Condition category</b> Skin and Connective Tissue Diseases	<ul> <li>Individual participant data</li> <li>Record updated in last year</li> </ul>

### Plain English summary of protocol

Not provided at time of registration

Study website http://www.dermatologyutrecht.nl/

# **Contact information**

**Type(s)** Scientific

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### **Contact details**

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# Additional identifiers

EudraCT/CTIS number

#### **IRAS number**

ClinicalTrials.gov number

Secondary identifying numbers 14196

# Study information

#### Scientific Title

**Acronym** Effect of Myfortic® on UV-induced DNA-damage and atopic status

#### **Study objectives**

Our hypothesis is that in patients with atopic dermatitis which use topical tacrolimus 0.1% the repair of DeoxyriboNucleic Acid (DNA)-damage in the skin is delayed. The repair of DNA-damage in the skin of patients with atopic dermatitis which use a class II corticosteroid is not delayed.

**Ethics approval required** Old ethics approval format

**Ethics approval(s)** Not provided at time of registration

**Study design** Clinical Trial

**Primary study design** Interventional

**Secondary study design** Single-centre

Study setting(s) Not specified

**Study type(s)** Treatment

#### Participant information sheet

Health condition(s) or problem(s) studied Atopic dermatitis

#### Interventions

Ten patients in total with atopic dermatitis are to be included in the study. The inclusion takes place after the physician has indicated that treatment with oral immunosuppressive drugs is necessary. The informed consent intake will be performed by the researcher. At inclusion a

screening will be done to evaluate the severity of the eczema and the atopic state (total and specific Immunoglobulin E [IgE], skin-prick test and atopy patch test) of the patient.

Subsequently we will compare UV-irradiated, non-lesional skin prior to treatment (control) to UVirradiated, non-lesional skin treated with Myfortic® during 12 weeks (intervention). The Minimal Erythema Dose (MED) will be determined prior to actual irradiation. Punch biopsies will be taken immediately after irradiation with two MED and after 24 hours. A reference biopsy will be taken from skin that is not irrradiated. The whole process will be repeated after 12 weeks of treatment.

To evaluate the atopic status after 12 weeks of treatment, we will repeat the skin-prick test and atopy patch test. The final clinical evaluation of therapy will be performed after 16 weeks.

#### Intervention Type

Drug

**Phase** Not Specified

### Drug/device/biological/vaccine name(s)

Myfortic®

#### Primary outcome measure

The difference between the percentage in repair of Cyclobutane Pyrimidine Dimers (CPD's) before and after treatment with Myfortic® is the primary study outcome.

#### Secondary outcome measures

1. The atopic state before and after treatment with Myfortic®.

2. The evaluation of the efficacy of initial high dosing with Myfortic® in order to induce rapid improvement of the disease.

#### Overall study start date

01/10/2006

Completion date

01/05/2007

# Eligibility

### Key inclusion criteria

1. Age from 18 years

- 2. Atopic dermatitis according to the criteria of Hanifin and Rajka
- 3. Insufficient response to topical therapy alone
- 4. The physician estimates that treatment with oral immunosuppressive agents is indicated

**Participant type(s)** Patient

**Age group** Adult

#### Lower age limit

18 Years

**Sex** Not Specified

### Target number of participants

10

### Key exclusion criteria

1. Patients with any known hypersensitivity to mycofenolic acid or other components of the formulation

- 2. Oral immunosuppressive treatment in the last six weeks
- 3. Concomitant Ultraviolet (UV) therapy or UV therapy in the last two months
- 4. Contact with UV on the lesional skin for the last two months

5. Patients with thrombocytopenia (less than 75,000/mm^3), with an absolute neutrophil count less than 1,500/mm^3 and/or leukocytopenia (less than 2,500/mm^3) and/or haemoglobin less than 6.0 g/dl prior to enrolment

6. Patients who have received an investigational drug within two weeks prior to screening

7. Patients with a history of malignancy within the last five years

8. Females of childbearing potential who are planning to become pregnant, who are pregnant and/or lactating, who are unwilling to use effective means of contraception

9. Patients with an immunologic disorder (like Rheumatoid Arthritis [RA], Systemic Lupus Erythematosus [SLE] or M. SjÖgren) or a pre-existent dermatologic disorder that worsens in combination with UV (like LE or photosensitive eczema)

10. Presence of clinically significant infection requiring continued therapy, severe diarrhoea or uncontrolled diabetes mellitus that would interfere with the appropriate conduct of the study

### Date of first enrolment

01/10/2006

Date of final enrolment 01/05/2007

# Locations

**Countries of recruitment** Netherlands

**Study participating centre University Medical Center Utrecht** Utrecht Netherlands 3508 GA

# Sponsor information

**Organisation** University Medical Center Utrecht (UMCU) (The Netherlands)

**Sponsor details** Department of Dermatology and Allergology P.O. Box 85500 Utrecht Netherlands 3508 GA

**Sponsor type** Hospital/treatment centre

ROR https://ror.org/0575yy874

# Funder(s)

**Funder type** Industry

**Funder Name** Novartis Pharma B.V.

# **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