

The use of Nalcol™ in functional constipation

Submission date 01/12/2009	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 21/07/2010	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 18/04/2017	Condition category Digestive System	<input type="checkbox"/> Individual participant data <input type="checkbox"/> 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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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

Nalcol01

Study information

Scientific Title

Naloxone hydrochloride SR gastro-resistant sustained release capsules as a treatment for functional constipation: a randomised, double-blind controlled trial in secondary care

Study objectives

The primary objective of this study is to assess the efficacy of Nalcol™ when used as an adjunct to usual laxatives in the treatment of patients with refractory chronic constipation. The null hypothesis states that there will be no improvement in the symptoms of constipation in those participants taking Nalcol™ compared to the placebo group.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Cambridgeshire 1 Research Ethics Committee, ref: H09/0304/55

Study design

Single-centre double-blind randomised parallel-group study

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied

Constipation

Interventions

This is a single-centre double-blind placebo-controlled study of the efficacy and safety of Nalcol™ given to patients with refractory constipation attending a specialist clinic. The study is principally a phase II trial of short-term (4 weeks) effect. It is suspected that Nalcol™ will have a moderate effect, and is used here as an adjuvant to regular laxatives.

The patients will all fulfil criteria for functional constipation (as above) and will have attended a specialist gastroenterology or colorectal clinic at the Norfolk and Norwich University Hospital. They will have undergone investigation for their constipation with barium enemas and also transit studies and their basic management, including dietary and lifestyle advice and modification of laxatives, will have been instigated.

The key treatment phase (Period 2) will last 4 weeks and data over 4 weeks of treatment will be available. Two weeks of pre-treatment data will be collected during the screening period before

randomisation (Period 1). This will allow an assessment of patient suitability and health to ensure that the inclusion criteria are met and permit examination with a rigid sigmoidoscope to obtain a rectal biopsy and stool sample. This initial period will ensure short-term symptom stability and confirm patient compliance with diary completion. It will allow secondary analyses comparing pre-treatment and treated symptom scores and quality of life (QoL) data. A final phase of 4 weeks (Period 3) will allow all patients in the trial to evaluate the treatment and provide further observation over a more prolonged duration.

Nalcol™ is given to relieve symptoms, which may be variable from day-to-day. The tolerability of Nalcol™ tablets is expected to be comparable to that of commonly dispensed stimulant laxatives; with no significant systemic side effects. It is known that 10 mg, twice a day is effective in increasing gut motility in normal subjects and a group of patients have taken 40 mg daily and occasionally up to 60 mg daily for severe symptoms. 40 mg daily has therefore been chosen to be given to patients in this trial because of the very troublesome symptoms of constipation from which they suffer.

Intervention Type

Drug

Phase

Phase II

Drug/device/biological/vaccine name(s)

Naloxone hydrochloride (Nalcol™)

Primary outcome measure

Comparison of the responders during Period 2 of the study (weeks 3 - 6) in the treatment group and those in the placebo group. Response is defined as those participants who give an assessment of 'satisfactory improvement' on at least 50% of occasions over the 4-week trial period (Period 2) to the global question on the diary card.

Secondary outcome measures

1. Comparison of stool frequency and type, laxative use, Patient Assessment of Constipation Symptoms (PAC-SYM), and Patient Assessment of Constipation Quality of Life Questionnaire (PAC-QOL) between treatment and placebo groups during Period 2 of the study. PAC-SYM will be used to provide an overall symptom score; but each component will also be analysed separately to identify changes to individual symptoms. Comparison will be made between the pre- and post-trial transit study as an objective marker of a reduction in transit time.
2. Graphical representation of the temporal changes in stool frequency and type and analysis to assess any drop-off of effect after 8 weeks of use in those receiving Nalcol™ for 8 weeks or in the whole group
3. A comparison of pre-treatment versus treatment symptom levels in the whole (n = 120), i.e., Period 1 versus Period 3
4. Comparison of stool bacterial counts between the treatment and placebo groups in the selected subset after each Period

Overall study start date

01/02/2010

Completion date

01/02/2012

Eligibility

Key inclusion criteria

1. Aged greater than 18 years
2. Male or female
3. Satisfy Rome III criteria for functional (slow transit) constipation
4. Symptoms not relieved by diet and laxatives

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

120

Key exclusion criteria

1. Severe cardiac, renal or hepatic impairment
2. Severe psychiatric disturbance
3. Mental disorder preventing adequate informed consent
4. Dilatation of the bowel (megarectum or pseudo-obstruction)
5. Concomitant medication with drugs known to cause constipation
6. Known pregnancy, suspected pregnancy, or trying to conceive
7. Currently breastfeeding
8. Currently participating (or within 1 month) in any other study

Date of first enrolment

01/02/2010

Date of final enrolment

01/02/2012

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Norfolk and Norwich University Hospitals NHS Trust
Norwich
United Kingdom
NR4 7UY

Sponsor information

Organisation

Norfolk and Norwich University Hospitals NHS Foundation Trust (UK)

Sponsor details

c/o Kath Andrews
Research and Development Office
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Sponsor type

Hospital/treatment centre

Website

<http://www.nnuh.nhs.uk/>

ROR

<https://ror.org/01wspv808>

Funder(s)

Funder type

Government

Funder Name

Norfolk and Norwich University Hospitals NHS Foundation Trust (UK) - research account (ref: E-31)

Funder Name

SLA Pharma AG (Switzerland) - provide active and placebo capsules

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