Serum hormone levels in women with chronic pair

Submission date 15/01/2015	Recruitment status No longer recruiting	Prospectively registered		
		☐ Protocol		
Registration date 10/04/2015	Overall study status Completed	Statistical analysis plan		
		Results		
Last Edited 29/12/2021	Condition category Musculoskeletal Diseases	Individual participant data		
		Record updated in last year		

Plain English summary of protocol

Background and study aims

Long-term pain is a major public health issue. In the UK, about 7•8 million people live with chronic pain and someone is in pain in more than a third of the households. The aim in this study is to further our understanding of the mechanism of pain in women with long-term pain and to inform the design of future clinical trials of sex steroid hormones for pain relief.

Who can participate?

Women who have had pain for at least 6 months, aged 18–50

What does the study involve?

Participants will attend one hospital visit to complete a questionnaire and give a blood sample for the measurement of hormone levels.

What are the possible benefits and risks of participating?

There are no benefits. The risks might be brief pain associated with the blood test and difficulty answering the questions on the study questionnaire because chronic pain is associated with psychological distress.

Where is the study run from? Oxford University Hospital (UK)

When is the study starting and how long is it expected to run for? March 2015 to December 2017

Who is funding the study? Medical Research Fund (UK)

Who is the main contact?

Dr Katy Vincent, katy.vincent@wrh.ox.ac.uk

Contact information

Type(s)Scientific

Contact name

Dr Katy Vincent

Contact details

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Additional identifiers

Protocol serial number

N/A

Study information

Scientific Title

Serum hormone levels in women with chronic pain in the Women In Pain Studies, Oxford: a cohort study

Acronym

WIPSOx1

Study objectives

To what extent is the hormone profile altered in women with chronic pain altered?:

- 1. Specifically, what proportion of women are hypoestrogenic, hypoandrogenic and hypocortisolaemic?
- 2. Do clinical symptoms relate to the extent of hypothalamic-pituitary-ovarian (HPO) /hypothalamo-pituitary-adrenal (HPA) axis suppression?

Ethics approval required

Old ethics approval format

Ethics approval(s)

NRES Committee South Central - Oxford B, 26/01/2015, ref: 15/SC/0077

Study design

Single centre observational cohort study

Primary study design

Observational

Study type(s)

Screening

Health condition(s) or problem(s) studied

Chronic pelvic and chronic muscloskeletal pain

Interventions

Women will attend a single dedicated research appointment and will

- 1. Complete a questionnaire assessing the severity, nature and location of their pain; regularity of their menstrual cycle; levels of perceived stress; psychological well being; and a brief focused medical history.
- 2. Have height and weight measurements and calculation of their body-mass index
- 3. Have a blood sample taken for analysis of hormone levels: oestradiol, progesterone, testosterone, follicle-stimulating hormone (FSH), cortisol and sex-hormone binding globulin (SHBG)
- 4. Have vitamin D levels measured

Intervention Type

Other

Primary outcome(s)

Hormonal profiles of women with chronic pain:

- 1. Oestradiol
- 2. Progesterone
- 3. Testosterone
- 4. FSH
- 5. Cortisol
- 6. SHBG

Key secondary outcome(s))

Relation between disease characteristics and suppression of HPO and HPA axes (hormone profiles and measures of pain severity and duration)

- 1. Numeric rating scales (NRS) will be used to measure average daily pain and most severe pain.
- 2. A body map will be used to visually identify the location of pain(s).
- 3. Validated measures will be used to measure psychological state cognitive processes:
- 3.1. STAI Stait and trait anxiety questionnaires
- 3.2. Beck depression inventory (BDI)
- 3.3 Mcgill pain questionnaire, short form (SF-MPQ2)
- 3.4 Pain Catastrophising scale (PCS) will also be used

Completion date

31/07/2019

Eligibility

Key inclusion criteria

- 1. Willing and able to give informed consent
- 2. Age 18-50
- 3. Pelvic or musculoskeletal pain (back, hip or knee or fibromyalgia) for more than 50% of the days per month for at least the past 6 months

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

Female

Total final enrolment

101

Key exclusion criteria

- 1. Use of exogenous hormones for any reason (including contraception, hormone-replacement therapy and treatment of pain), except women with pelvic pain who may be included if they have a Mirena intrauterine system in place
- 2. Use of mild opiates (e.g., codeine phosphate or tramadol) for 50% of the days per month
- 3. Use of strong opiates in the past 6 months
- 4. Previous hysterectomy or bilateral oophorectomy
- 5. Confirmed or suspected pregnancy
- 6. Pregnant within the past 6 months or currently breastfeeding
- 7. Recreational opiate use in the past 6 months
- 8. Any other significant disease or disorder which, in the opinion of the Investigator, may either put the participants at risk because of participation in the trial, or may influence the result of the trial, or the participant's ability to participate in the trial

Date of first enrolment

01/01/2015

Date of final enrolment

31/12/2016

Locations

Countries of recruitment

United Kingdom

England

Study participating centre Oxford University Hospital

Nuffield Department of Obstetrics and Gynaecology Level 3

Women's Centre

Headington Oxford United Kingdom OX3 9DU

Sponsor information

Organisation

University of Oxford (UK)

ROR

https://ror.org/052gg0110

Funder(s)

Funder type

Research organisation

Funder Name

Medical Research Fund (UK)

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from Dr Katy Vincent, katy.vincent@wrh.ox.ac.uk.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
HRA research summary			26/07/2023	No	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes