

# Intestinal permeability during exercise (IPEX)

<b>Submission date</b> 30/06/2009	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 04/09/2009	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 23/10/2020	<b>Condition category</b> Respiratory	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

Dr Erica Rutten

### Contact details

Center of expertise for chronic organ failure (Ciro) Horn

P.O. Box 4080

Horn

Netherlands

6080 AB

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ericarutten@proteion.nl

## Additional identifiers

### Protocol serial number

N/A

## Study information

### Scientific Title

The contribution of the intestinal permeability in the systemic inflammation of patients with chronic obstructive pulmonary disease (COPD) during acute exercise: an observational case-control study

### Acronym

IPEX

### **Study objectives**

Intestinal permeability increases during an acute exercise load and plays a role in the systemic inflammation in moderate to severe patients with COPD.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Not provided at time of registration

### **Study design**

Observational case-control study

### **Primary study design**

Observational

### **Study type(s)**

Diagnostic

### **Health condition(s) or problem(s) studied**

Chronic obstructive pulmonary disease (COPD)

### **Interventions**

No intervention study.

The study design includes three test days. During day 1, intestinal permeability at rest will be measured. When a blood samples is taken and urine is collected, subjects will ingest a sugar solution in the fasted state after which urine will be collected for 5 hours. In blood and urine, markers for intestinal permeability will be measured. Day 2 and 3 , the same study procedure will take place after the performance of an acute exercise load. The exercise will include a submaximal ergomtery test at 50% of their Wmax or an activity of daily living (ADL) test. The ADL test exist of a combination of several daily activities:

ADL 1: dressing socks, shoes and a coat

ADL 2: fold up 8 towels and put them in the laundry basket

ADL 3: put 6 cans (all 400 g) in a shopping basket

ADL 4: washing 4 plates, 4 cups and 4 saucers and put them in a plate rack

ADL 5: for 4 minutes sweeping plastic blocks with a broom

The mobile Oxycon will measure the ventilated effort (VO<sub>2</sub> and ventilation [VE]) in order to calculate the metabolic response of the activities.

### **Intervention Type**

Other

### **Phase**

Not Applicable

### **Primary outcome(s)**

Markers for intestinal permeability:

In plasma and collected in the post-absorptive state or immediately after exercise:

1. Intestinal fatty acid binding protein (IFABP);
2. Ileal lipid-binding protein (ILBP);
3. Claudine

In urine, 5 hours after ingestion of the sugar solution:

4. Urinary concentration of various sugars

#### **Key secondary outcome(s)**

1. Markers of systemic inflammation in plasma collected in the post-absorptive state
2. Markers of respiratory permeability (surfactant D) in plasma collected in the post-absorptive state

#### **Completion date**

01/10/2010

## **Eligibility**

#### **Key inclusion criteria**

1. Diagnosis of COPD Global Initiative for chronic Obstructive Lung Disease (GOLD) stage II or III according to the American Thoracic Society (ATS) GOLD guidelines (forced expiratory volume in one second [FEV1] between 30% and 80% predicted and FEV1/forced vital capacity [FVC] less than 70%, and less than 10% predicted improvement in FEV1 after B2-agonist inhalation)
2. Both male and female, age-range from 40 to 75 years
3. No respiratory tract infection or exacerbation of the disease for at least 4 weeks before the study
4. Capable to provide informed consent
5. Presence of other non-gastro-intestinal related and non-renal chronic diseases are allowed in case the clinical status is stable for at least 4 weeks before the study

#### **Participant type(s)**

Patient

#### **Healthy volunteers allowed**

No

#### **Age group**

Adult

#### **Sex**

All

#### **Total final enrolment**

32

#### **Key exclusion criteria**

1. External oxygen supplementation at rest
2. Investigator's uncertainty about the willingness or ability of the patient to comply with the protocol requirements
3. Participation in any other studies involving investigational or marketed products

concomitantly or within two weeks prior to entry into the study

4. Any kind of gastro-intestinal complaints or gastro-intestinal disease
5. The presence of cardiovascular disease, assessed by analyses of plasma pro-brain natriuretic peptide (pro-BNP) levels
6. Use of non-steroidal anti-inflammatory drugs (NSAIDs) (ibuprofen, acetylsalicylic acid, naproxen, meloxicam, diclofenac) or antibiotics or oral corticosteroids at least 4 weeks before the study

**Date of first enrolment**

01/10/2009

**Date of final enrolment**

01/10/2010

## **Locations**

**Countries of recruitment**

Netherlands

**Study participating centre**

Center of expertise for chronic organ failure (Ciro) Horn

Horn

Netherlands

6080 AB

## **Sponsor information**

**Organisation**

Top Institute Pharma (TIPharma) (Netherlands)

**ROR**

<https://ror.org/01qmxzb47>

## **Funder(s)**

**Funder type**

Industry

**Funder Name**

Top Institute Pharma (TIPharma) (Netherlands)

**Alternative Name(s)**

TI Pharma

**Funding Body Type**

Private sector organisation

**Funding Body Subtype**

Other non-profit organizations

**Location**

Netherlands

## Results and Publications

**Individual participant data (IPD) sharing plan****IPD sharing plan summary**

Not provided at time of registration

**Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/02/2014	23/10/2020	Yes	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes