# Hormonal profiles modification, lower hunger scores, better anthropometric outcomes and reduced risk factors of the metabolic syndrome following a weight loss diet with carbohydrates eaten only at dinner

Submission date	Recruitment status  No longer recruiting	<ul><li>Prospectively registered</li></ul>		
23/11/2009		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
03/12/2009	Completed	[X] Results		
Last Edited	Condition category	Individual participant data		
06/02/2014	Nutritional, Metabolic, Endocrine			

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

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#### Contact details

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# Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

### Secondary identifying numbers

N/A

# Study information

#### Scientific Title

A randomised clinical trial examining leptin, ghrelin and adiponectin diurnal profiles modifications, hunger and satiety scores, anthropometric, biochemical and inflammation parameters following a weight loss diet with carbohydrates eaten only at dinner.

#### **Study objectives**

Obesity is often accompanied by uncontrolled hunger, insulin resistance and by the metabolic syndrome. The adipose tissue, "the energy storage site of the body", is also an endocrine organ that synthesizes and secretes a variety of adipocytokines. This includes hormones regulating hunger and satiety and associated with the development of insulin resistance, the metabolic syndrome and inflammation.

#### Hypotheses:

- 1. A weight loss diet with carbohydrates eaten only at dinner (the experimental diet) will lead to modifications of the typical diurnal pattern of leptin, and to higher relative concentrations throughout the day, helping experimental diet participants to experience satiety during the day and to better adhere to their diets.
- 2. Ghrelin's diurnal pattern will be inverted too, leading to the appearance of hunger sensations later in the day.
- 3. The experimental diet will increase adiponectin concentrations throughout the day, leading to improved insulin resistance, diminished symptoms of the metabolic syndrome and better inflammation profiles.

#### Ethics approval required

Old ethics approval format

# Ethics approval(s)

Approved by the Regional Committee for Human Experimentation, Kaplan Hospital, Israel in accordance with the Helsinki declaration of 1975 (revised in 1983). (ref: 024/2006)

# Study design

Single centre randomised controlled parallel group trial

# Primary study design

Interventional

# Secondary study design

Randomised controlled trial

# Study setting(s)

Not specified

# Study type(s)

Prevention

#### Participant information sheet

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

Obesity; metabolic syndrome

#### **Interventions**

100 officers enrolled to a randomised single centre controlled interventional diet study. 78 Individuals met study criteria and were randomly allocated to the experimental/control groups.

A standard low calorie diet (20% protein, 30-35% fat, 45-50% carbohydrates, 1300-1500 kcal) providing carbohydrates only at dinner (Experimental diet) or a standard low calorie diet (20% protein, 30-35% fat, 45-50% carbohydrates, 1300-1500 kcal), providing carbohydrates throughout the day (control diet) was consumed for 6 months

Blood samples were taken and the participants filled out hunger-satiety scales every 4 hours between 8:00-20:00 at day 0, 7, 90 and 180.

#### Intervention Type

Other

#### Phase

**Not Specified** 

#### Primary outcome measure

- 1. Leptin, ghrelin (total) and adiponectin (High Molecular Weight) (Linco research sandwich ELISA kits)
- 2. Insulin (Abbot Microparticle Enzyme Immunoassay test kits)
- 3. Hunger-Satiety Score (H-SSc) a scale of descriptions from hunger to satiety (1= starving, 10= devastatingly full).
- 4. Glucose (Olympus enzymatic UV test kits)
- 5. Insulin resistance (Homeostasis Model Assesment)
- 6. Cholesterol, HDL-cholesterol, LDL-cholesterol and triglycerides (Olympus enzymatic colour test kits)
- 7. C-reactive protein (CRP) (Olympus Immunoturbidimetric test kits)
- 8. TNF-α (Human Serum [HS]) and IL-6 (HS) (R&D systems sandwich ELISA kits)

#### Secondary outcome measures

- 1. Weight, abdominal circumference, and percentage of body fat were measured regularly and on day 0, 7, 90,180.
- 2. "Urge to eat" and "preoccupation with thoughts about food".

## Overall study start date

22/05/2006

#### Completion date

09/09/2007

# **Eligibility**

#### Key inclusion criteria

- 1. Police officers from the Israeli Police Force (men and women)
- 2. Age 25-55
- 3. BMI >30

## Participant type(s)

**Patient** 

#### Age group

Adult

#### Sex

Both

## Target number of participants

80

## Key exclusion criteria

- 1. Cardiovascular diseases
- 2. Hypertension
- 3. Diabetes mellitus or other primary diseases
- 4. Followed any type of diet regime within a year prior to the study
- 5. Pregnancy

#### Date of first enrolment

22/05/2006

#### Date of final enrolment

09/09/2007

# Locations

#### Countries of recruitment

Israel

# Study participating centre

P.O Box 12

Rehovot Israel 76100

# Sponsor information

## Organisation

The Hebrew University of Jerusalem (Israel)

#### Sponsor details

The Robert H. Smith Faculty of Agriculture, Food and Environment, The Hebrew University of Jerusalem Rehovot Israel 76100 +972 (0)89489008 esofer1@012.net.il

#### Sponsor type

University/education

#### **ROR**

https://ror.org/03qxff017

# Funder(s)

#### Funder type

Other

#### **Funder Name**

Meuhedet Medical Services (Israel)

#### **Funder Name**

Kaplan Medical Center, Rehovot (Israel)

#### **Funder Name**

Israeli Police Force (Israel)

#### Funder Name

Israel Diabetes Association (Israel)

#### **Funder Name**

Israel Lung and Tuberculosis Association (Israel)

# **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

# **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/08/2013		Yes	No