

Efficacy and safety of ezetimibe in young children with familial hypercholesterolemia

Submission date 07/06/2006	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 07/06/2006	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
Last Edited 07/06/2006	Condition category Nutritional, Metabolic, Endocrine	<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

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Additional identifiers

Protocol serial number
N/A

Study information

Scientific Title

Acronym

EZKIMO

Study objectives

Ezetimibe monotherapy lowers low density lipoprotein-cholesterol (LDL-C) levels, plant sterol levels and inflammatory markers in young children with familial hypercholesterolemia (FH).

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomized, placebo-controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Familial hypercholesterolemia (FH)

Interventions

Ezetimibe 10 mg/day versus placebo treatment for 4 months

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Ezetimibe

Primary outcome(s)

Primary endpoint will be the efficacy towards LDL-C levels and the safety of 10 mg ezetimibe.

Key secondary outcome(s)

Secondary endpoint will be the effect of 10 mg ezetimibe on inflammatory markers and plant sterols in plasma.

Completion date

01/08/2007

Eligibility**Key inclusion criteria**

1. Male or female
2. Aged 8-14 years
3. Heterozygous familial hypercholesterolemia defined as:
 - a. Molecular diagnosis of FH AND LDL-C above 95th percentile for age and sex (LDL-C >3.88 mmol/l) despite a lipid-lowering diet for at least 3 months
 - b. LDL-cholesterol above 95th percentile for age and sex (LDL-C >3.88 mmol/l) despite a lipid-lowering diet for at least 3 months
 - c. One parent with either a clinical or molecular diagnosis of FH

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Child

Lower age limit

8 years

Upper age limit

14 years

Sex

All

Key exclusion criteria

1. Homozygous familial hypercholesterolemia
2. Diseases that cause a secondary increase in LDL-C, such as diabetes mellitus, anorexia nervosa and renal, hepatic or thyroid disease
3. Length below the 3rd percentile for age and sex
4. Weight-compared-to-length above the 97th percentile for age and sex
5. Serious illness in the previous three months
6. Major surgery in the previous three months
7. Partial ileal bypass or any gastrointestinal disease that might interfere with drug absorption
8. Plasma triglycerides above 4.0 mmol/l
9. Hypertension (systolic >160 mmHg or diastolic >100 mmHg)
10. Psychological disorders that might interfere with adherence to the protocol
11. Pregnancy at baseline
12. History of allergy or sensitivity to ezetimibe
13. Liver function tests, aspartate aminotransferase or alanine aminotransferase (ASAT or ALAT), must be <1.5 times the upper limit of normal (ULN) using the central laboratory reference range
14. Creatinine clearance levels must be <1.5 times the ULN using the central laboratory reference range

Date of first enrolment

01/08/2006

Date of final enrolment

01/08/2007

Locations

Countries of recruitment

Netherlands

Study participating centre

Academic Medical Center (AMC)

Amsterdam

Netherlands

1100 DD

Sponsor information

Organisation

Academic Medical Center (AMC) (The Netherlands)

ROR

<https://ror.org/03t4gr691>

Funder(s)

Funder type

Industry

Funder Name

Merck Sharp and Dohme BV (MSD)

Funder Name

Schering-Plough

Alternative Name(s)

Funding Body Type

Private sector organisation

Funding Body Subtype

For-profit companies (industry)

Location

United States of America

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration