

Investigation of the effects of postprandial glucose reduction by acarbose on insulin sensitivity and cardio-vascular markers in the subjects with different stages of glucose tolerance

Submission date 11/06/2010	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 29/06/2010	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 03/06/2013	Condition category Nutritional, Metabolic, Endocrine	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

BfArM N: 4022119

Study information

Scientific Title

Single centre, double-blind, randomised, placebo controlled, cross-over study to investigate the effects of postprandial glucose reduction by acarbose on insulin sensitivity and cardio-vascular markers in type 2 diabetes patients, subjects with impaired glucose tolerance and normal glucose tolerant subjects

Acronym

Acarbose-Adiponectin Study

Study objectives

We aimed to investigate whether a decreased postprandial glucose excursion and portal concentration of insulin by acarbose may improve insulin sensitivity (whole body and local, hepatic insulin sensitivity) and influence the circulating adiponectin levels (as other insulin sensitivity and cardiovascular disease [CVD] markers) in the subjects with different stages of glucose tolerance.

Ethics approval required

Old ethics approval format

Ethics approval(s)

1. Ethical Committee of Potsdam University approved on the 28th January 2004 (ref: N 9/17)
2. Ethical Committee of Brandenburg approved on the 10th March 2004 (ref: N AS-43/2004)

Study design

Single centre double-blind randomised placebo controlled 2 x 12 weeks cross-over study with a washout period of 12 weeks

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Diagnostic

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

Metabolic syndrome and associated diseases

Interventions

Eligible patients who completed a 3-week run-in period (first wash-out phase), were randomised into two treatment sequences to receive 12 weeks of double-blind treatment. Both treatment sequences consisted of acarbose 100 mg with three main meals and placebo taking three times per day. The total study duration including the wash-out phase was 40 weeks. Patients underwent liquid meal challenges and hyperinsulinemic, euglycemic glucose clamp at weeks 0, 12, 24 and 36.

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Acarbose

Primary outcome measure

To assess the effect of postprandial glucose reduction by acarbose on insulin sensitivity in subjects with different stages of glucose tolerance.

Measured at the start and at the end of each treatments (12 week duration).

Secondary outcome measures

1. To assess the effects of acarbose on fasting cytokines and on postprandial glucose and insulin metabolism
2. To assess the effects on liver fat content and CVD markers

Measured at the start and at the end of each treatments (12 week duration).

Overall study start date

02/04/2002

Completion date

01/04/2009

Eligibility

Key inclusion criteria

1. Males or females, aged between 18 and 75 years inclusive
2. Newly diagnosed type 2 diabetes, or previously treated with diet and/or exercise or treated with metformin or acarbose as monotherapy or with impaired glucose tolerance (IGT)/impaired fasting glucose (IFG) or with normal glucose tolerance
3. Female patients were either non-fertile or willing to use a medically approved birth control method during the whole duration of the study
4. Body mass index (BMI) between 20 and 40 kg/m²
5. Fasting plasma glucose (FPG) less than 15 mmol/l
6. Fasting C-peptide greater than 1 ng/ml

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

70 randomised patients

Key exclusion criteria

1. On treatment with insulin, insulin secretagogues, corticosteroids (with the exception of inhaled corticosteroids), thiazolidindiones derivatives and monoaminooxidase inhibitors
2. Known sensitivity to drugs similar to acarbose
3. Serum creatinine greater than 1.5 mg/dl or pre-existing end-stage nephropathy
4. On laser treatment for diabetes related retinopathy within 3 months prior to study start
5. Alanine aminotransferase (ALAT) greater than 2.5 times of normal range
6. Type 1 diabetes mellitus
7. Thyroid stimulating hormone (TSH) outside of normal range
8. Medical history or signs of chronically gastrointestinal diseases with diarrhoea, flatulence and absorption anomalies

Date of first enrolment

02/04/2002

Date of final enrolment

01/04/2009

Locations

Countries of recruitment

Germany

Study participating centre

German Institute of Human Nutrition Potsdam

Nuthetal

Germany

14458

Sponsor information

Organisation

Bayer Schering Pharma AG (Germany)

Sponsor details

c/o Dr. Peter Marx
Global Scientific Affairs Manager CVRM
Müllerstraße 170
Berlin
Germany
13353

Sponsor type

Industry

Website

<http://www.bayerhealthcare.com/scripts/pages/de/index.php>

ROR

<https://ror.org/04hmn8g73>

Funder(s)**Funder type**

Government

Funder Name

Federal Ministry for Education and Research (Bundeministerium für Bildung und Forschung [BMBF]) (Germany)

Funder Name

Firma Bayer Vital (Germany)

Funder Name

Firma BRAHMS AG (Germany)

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	01/12/2012		Yes	No