# Intensive blood glucose control for chronic obstructive pulmonary disease (COPD) patients on acute medical wards

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
01/10/2008		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
20/11/2008	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
26/10/2011	Respiratory			

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Dr Emma Baker

#### Contact details

Centre for Clinical Pharmacology Room 66, Ground Floor Jenner Wing St George's, University of London Cranmer Terrace London United Kingdom SW17 ORE +44 (0)20 8725 5383 ebaker@sgul.ac.uk

# Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number NCT00764556

## Secondary identifying numbers

SGH-ClinPharm-1

# Study information

#### Scientific Title

Phase II study: investigation of the safety and efficacy of a protocol for tight glycaemic control in patients with chronic obstructive pulmonary disease (COPD) exacerbations admitted to an acute medical unit

## Acronym

**IPS 2008** 

## Study objectives

This study will test the safety and feasibility of tight control of blood glucose with insulin in patients with acute exacerbations of COPD outside the intensive care setting in acute medical wards.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Joint UCL/UCLH Ethics Committee gave approval in early 2008 (ref: 07/H0715/93)

## Study design

Prospective, non-randomised, phase II study

# Primary study design

Interventional

# Secondary study design

Non randomised controlled trial

# Study setting(s)

Hospital

# Study type(s)

Treatment

## 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

Acute exacerbation of chronic obstructive pulmonary disease (AECOPD)

#### **Interventions**

This is a single arm trial. Patients receive insulin with the aim of controlling blood glucose to a target of 4.4 - 6.5 mM. Insulin is initially intravenous (actrapid), then subcutaneous (glargine or

detemir plus aspart). Patients receive insulin throughout hospital admission and is stopped on discharge. Follow up is during hospital stay; there is no follow up after discharge for the study.

## **Intervention Type**

Other

## **Phase**

**Not Specified** 

## Primary outcome measure

The frequency of severe hypoglycaemia - neuroglycopaenic symptoms (other than mild agitation) responsive to administration of carbohydrate. The outcomes are measured/looked for continuously during treatment/hospital stay.

## Secondary outcome measures

- 1. The frequency of symptomatic hypoglycaemia (capillary glucose less than or equal to 3.3 mM and symptoms consistent with hypoglycaemia)
- 2. The frequency of asymptomatic hypoglycaemia (capillary glucose less than or equal to 3.3 mM without any symptoms consistent with hypoglycaemia)
- 3. Mean 24 hour capillary glucose concentrations
- 4. Proportion of capillary glucose measurements in target range (4.4 6.5 mM)
- 5. Comparison of capillary blood glucose measurements to those obtained from the Guardian REAL®-time continuous glucose monitoring system
- 6. Comparison of rates of detection of hypoglycaemia by capillary and continuous blood glucose monitoring
- 7. Quantification of acceptability of the study intervention to patients

The outcomes are measured/looked for continuously during treatment/hospital stay.

## Overall study start date

01/05/2008

## Completion date

01/05/2009

# **Eligibility**

## Key inclusion criteria

- 1. Physician diagnosis of acute exacerbation of chronic obstructive pulmonary disease (AECOPD) as primary cause for admission
- 2. Able to enter study within 24 hours of admission
- 3. Age greater than 40 years, male and female

## Participant type(s)

Patient

#### Age group

Adult

Sex

## Target number of participants

20

## Key exclusion criteria

- 1. Intensive care unit admission
- 2. Moribund or not for active treatment
- 3. Admission expected to last less than 48 hours
- 4. Unable or unwilling to give informed consent
- 5. Known type I diabetes mellitus
- 6. Patients with reduced awareness of hypoglycaemia including reduced Glasgow Coma Scale or those taking beta blockers
- 6. Patients with renal or hepatic failure at increased risk of hypoglycaemia

## Date of first enrolment

01/05/2008

## Date of final enrolment

01/05/2009

# Locations

## Countries of recruitment

England

**United Kingdom** 

Study participating centre Centre for Clinical Pharmacology London United Kingdom

# Sponsor information

## Organisation

**SW17 0RE** 

St George's, University of London (UK)

## Sponsor details

Cranmer Terrace London England United Kingdom SW17 0RE

## Sponsor type

University/education

## Website

http://www.sgul.ac.uk/

## ROR

https://ror.org/040f08y74

# Funder(s)

## Funder type

Government

#### **Funder Name**

National Institute for Health Research (NIHR) (UK) - NIHR Trainees Programme funds academic clinical fellows

## **Funder Name**

Own consumables

# **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	23/07/2011		Yes	No