

# Plasma homocysteine response to folic acid intervention

<b>Submission date</b> 29/01/2008	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 05/03/2008	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 02/02/2011	<b>Condition category</b> Circulatory System	<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 Mary Ward

**Contact details**  
Northern Ireland Centre for Food and Health  
School of Biomedical Sciences  
University of Ulster  
Coleraine  
United Kingdom  
BT521SA  
+44 (0)28 7032 3076  
[mw.ward@ulster.ac.uk](mailto:mw.ward@ulster.ac.uk)

## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
N/A

# Study information

## Scientific Title

A dose finding trial in ischaemic heart disease patients and healthy controls to determine whether chronic exposure to low-dose folic acid can lower homocysteine

## Study objectives

Low dose folic acid (0.2 mg/d) administered chronically will significantly lower plasma homocysteine in ischaemic heart disease (IHD) patients and healthy age-sex matched controls. Previous studies may have overestimated the folic acid dose required to lower homocysteine because of too-short an intervention period to observe the full extent of the response to low folic acid doses and concluded that much higher doses were required for maximal homocysteine-lowering.

If the hypothesis is confirmed the findings will have important implications for governments worldwide currently considering food fortification with folic acid, which although primarily aimed at reducing neural tube defects (NTDs), is expected to have important benefits in terms of the primary and secondary prevention of cardiovascular disease (CVD) via a homocysteine-lowering effect.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

The study was approved by the University of Ulster Ethics committee in March 2000 (ref: 01/17).

## Study design

Double-blinded, randomised, placebo controlled dose finding trial with folic acid

## Primary study design

Interventional

## Secondary study design

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

Ischaemic heart disease

## Interventions

In both IHD and healthy control groups, participants were stratified into tertiles of homocysteine concentration (from the screening blood sample). Subjects in each stratum were then randomised to receive placebo, 0.2, 0.4 or 0.8 mg/d folic acid for a total intervention period of 26 weeks. To maximise compliance, vitamins were distributed every three weeks to the participants homes in seven-day pillboxes. The pillboxes were then collected and any unused pills recorded in order to monitor compliance.

Total intervention period of 26 weeks for all treatment arms.

### **Intervention Type**

Drug

### **Phase**

Not Specified

### **Drug/device/biological/vaccine name(s)**

Folic acid

### **Primary outcome measure**

Plasma homocysteine, measured at baseline, 6 weeks and 12 weeks in a subset, and at 26 weeks.

### **Secondary outcome measures**

1. Serum folate, measured at baseline and at 26 weeks
2. Erythrocyte glutathione reductase activity coefficient (EGRac): an indicator of riboflavin status), measured at baseline
2. Plasma pyridoxal phosphate: an indicator of vitamin B6 status, measured at baseline
3. Serum vitamin B12, measured at baseline

### **Overall study start date**

31/03/2001

### **Completion date**

31/12/2004

## **Eligibility**

### **Key inclusion criteria**

1. Male and female, any age
2. IHD Patients:
  - 2.1. Proven myocardial infarction more than three months previously
  - 2.2. IHD on coronary angiography
  - 2.3. A clinical diagnosis of angina confirmed by electrocardiogram (ECG)
3. Control subjects: healthy subjects age- and sex-matched with the IHD group from the local community

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

Patient

### **Age group**

Adult

**Sex**

Both

**Target number of participants**

n = 200 (100 patients, 100 controls)

**Key exclusion criteria**

1. IHD patients:

1.1. History of diabetes

1.2. Hepatic or renal disease

1.3. Haematological disorders

1.4. Use of B-vitamin supplements or use of medication known to interfere with folate metabolism

2. Healthy controls in addition had no history of CVD

**Date of first enrolment**

31/03/2001

**Date of final enrolment**

31/12/2004

**Locations****Countries of recruitment**

Northern Ireland

United Kingdom

**Study participating centre**

Northern Ireland Centre for Food and Health

Coleraine

United Kingdom

BT521SA

**Sponsor information****Organisation**

University of Ulster (UK)

**Sponsor details**

c/o Mary Ward

School of Biomedical Sciences

Cromore Road

Coleraine

Northern Ireland

United Kingdom  
BT52 1SA  
+44 (0)28 7032 3076  
mw.ward@ulster.ac.uk

**Sponsor type**

University/education

**Website**

<http://www.ulster.ac.uk/>

**ROR**

<https://ror.org/01yp9g959>

## **Funder(s)**

**Funder type**

Charity

**Funder Name**

Northern Ireland Chest Heart and Stroke Association (UK)

**Alternative Name(s)**

NICHHS

**Funding Body Type**

Private sector organisation

**Funding Body Subtype**

Associations and societies (private and public)

**Location**

United Kingdom

## **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?
<a href="#">Results article</a>	results	01/01/2011		Yes	No