# Can acute exacerbations of asthma be prevented with a four-fold increase in inhaled corticosteroid dose?

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
28/09/2005		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
21/11/2005	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
13/07/2009	Respiratory			

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Dr Timothy Harrison

#### Contact details

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# Additional identifiers

**EudraCT/CTIS** number

IRAS number

ClinicalTrials.gov number

**Secondary identifying numbers** 03/082

# Study information

#### Scientific Title

#### **Study objectives**

That acute exacerbations of asthma requiring oral corticosteroids can be prevented with preemptive treatment with a four-fold increase in the dose of inhaled corticosteroid.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Not provided at time of registration

#### Study design

Randomised controlled 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

**Asthma** 

#### **Interventions**

Comparison of the effect of increasing regular inhaled corticosteroid four-fold to continuing on same dose in the event of increasing asthma symptoms.

#### **Intervention Type**

Drug

#### **Phase**

**Not Specified** 

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

Corticosteroids

#### Primary outcome measure

The primary outcome will be the number of exacerbations requiring oral steroids in the active group compared with the placebo group.

#### Secondary outcome measures

The total number of exacerbations and days with peak flow less than 15% baseline will also be compared. The sensitivity and specificity of our criteria to detect an exacerbation requiring prednisolone will be determined. The total dose of inhaled and oral corticosteroids used by both groups will be calculated.

#### Overall study start date

01/04/2004

#### Completion date

30/09/2006

# **Eligibility**

#### Key inclusion criteria

- 1. Written Informed consent prior to participation in the trial
- 2. Male or female patients 16 years of age or older
- 3. Documented diagnosis of asthma
- 4. Treatment with 200 to 1000 mcg inhaled beclomethasone dipropionate or equivalent
- 5. At least one exacerbation requiring a temporary increase in inhaled corticosteroid or oral corticosteroids in the preceding 12 months
- 6. No oral corticosteroids for 4 weeks prior to or during the run-in period

## Participant type(s)

**Patient** 

## Age group

Adult

#### Sex

Both

# Target number of participants

500

## Key exclusion criteria

- 1. Other respiratory diagnosis or relevant medical condition
- 2. Smoking history of greater than 20 pack years
- 3. Subjects already using a management plan to deal with exacerbations and who would not wish to be randomised to placebo
- 4. Pregnant or nursing women

#### Date of first enrolment

01/04/2004

#### Date of final enrolment

# Locations

#### Countries of recruitment

England

**United Kingdom** 

Study participating centre
Department Respiratory Medicine
Nottingham
United Kingdom
NG5 1PB

# Sponsor information

# Organisation

Nottingham City Hospital NHS Trust (UK)

# Sponsor details

Hucknall Road Nottingham England United Kingdom NG5 1PB +44 (0)115 9691169 gdochert@ncht.trent.nhs.uk

## Sponsor type

Hospital/treatment centre

#### **ROR**

https://ror.org/05y3qh794

# Funder(s)

#### Funder type

Charity

#### **Funder Name**

Asthma UK (UK), ID 03/082

# **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	01/10/2009		Yes	No