Dexa-Myositis Trial: treatment of polymyositis and dermatomyositis - dexamethasone versus prednisone

Submission date	Recruitment status	Prospectively registered
20/12/2005	No longer recruiting	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
20/12/2005	Completed	Results
Last Edited	Condition category	Individual participant data
16/09/2008	Musculoskeletal Diseases	Record updated in last year

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers NTR169

Study information

Scientific Title

Study objectives

Dexamethasone pulse therapy is saver and as good as/or better than treatment with prednisone in patients with myositis.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval received from the local medical ethics committee

Study design

Multicentre, randomised, double blinded, active controlled, parallel group trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Myositis, dermatomyositis, polymyositis

Interventions

- 1. Dexamethasone pulse therapy. 40 mg/dag every first four days of the month, for 6 months. Placebo on the other days of the months.
- 2. Prednisolone 1 1.5 mg/kg/day for 4 weeks, after this slow reduction in dose

Both groups treatment against osteoporosis with calci-chew and Fosamax.

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Dexamethasone, prednisone

Primary outcome measure

- 1. Combined scale: Rankin, muscle strength, Visual Analogue Scale (VAS) pain, time until remission, no relapse, no cushing, no osteoporosis
- 2. Percentage patients in remission, time to remission, no relapse
- 3. General assessment of condition of patients

Secondary outcome measures

- 1. Weight
- 2. Blood pressure
- 3. VAS arthralgia, Raynaud
- 4. Skin changes
- 5. CK
- 6. Myometry
- 7. VAS dysphagia
- 8. VAS agitation
- 9. Quality of life
- 10. Medication and dose
- 11. Other side effects
- 12. Neuromusclular symptom score

Overall study start date

01/07/2001

Completion date

01/01/2008

Eligibility

Key inclusion criteria

- 1. Polymyositis
- 2. Dermatomyositis
- 3. Myositis with rheumatological disorders
- 4. Myositis with cancer
- 5. Unspecified myositis

Participant type(s)

Patient

Age group

Not Specified

Sex

Both

Target number of participants

80

Key exclusion criteria

- 1. Myositis in family
- 2. Greater than 3/1000 rimmed vacuoles
- 3. Quick (less than 2 weeks) rise and spontaneous normalisation (less than 2 months) of serum creatine kinase (CK) level
- 4. Aged less than 18 years
- 5. Contra-indication for one of the two treatments
- 6. Desire to get pregnant or active pregnancy
- 7. No informed consent
- 8. Greater than 20 mg prednisone/day

Date of first enrolment

01/07/2001

Date of final enrolment

01/01/2008

Locations

Countries of recruitment

Netherlands

Study participating centre Academical Medical Centre

Amsterdam Netherlands 1105 AZ

Sponsor information

Organisation

Academic Medical Centre (AMC) (Netherlands)

Sponsor details

Meibergdreef 9 Amsterdam Netherlands 1105 AZ

Sponsor type

University/education

Website

http://www.amc.uva.nl/

ROR

Funder(s)

Funder type

Charity

Funder Name

Princess Beatrix Funds (Prinses Beatrix Fonds) (The Netherlands)

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