

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

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

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**Protocol serial number**  
NTR169

## Study information

**Scientific Title**

**Study objectives**

Dexamethasone pulse therapy is safer 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

**Study type(s)**

Treatment

**Health condition(s) or problem(s) studied**

Myositis, dermatomyositis, polymyositis

**Interventions**

1. Dexamethasone pulse therapy. 40 mg/day 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(s)**

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

**Key secondary outcome(s)**

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. Neuromuscular symptom score

**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

**Healthy volunteers allowed**

No

**Age group**

Not Specified

**Sex**

All

**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)

**ROR**

<https://ror.org/03t4gr691>

## **Funder(s)**

**Funder type**

Charity

**Funder Name**

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

## **Results and Publications**

**Individual participant data (IPD) sharing plan****IPD sharing plan summary**

Not provided at time of registration