Impact of 12 weeks oral niacin on endothelial function, lipid composition and cardiovascular biomarkers in patients with coronary artery disease: a prospective, randomized, double-blind, placebo-controlled, monocentric clinical trial of phase IV

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
13/01/2006		Protocol		
Registration date	Overall study status	Statistical analysis plan		
20/01/2006	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
24/07/2014	Circulatory System			

# 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

Protocol serial number

**INEF** 

# Study information

#### Scientific Title

#### **Acronym**

**INEF** 

#### Study objectives

Twelve weeks oral niacin therapy in addition to standard long-term coronary artery disease (CAD) medication improves flow dependent vasodilation (FMD) in patients suffering from CAD.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Ethics-commission of the country physicians chamber Rhineland-Palatinate (Ethik-Kommission der Landesärztekammer Rheinland-Pfalz)

#### Study design

Prospective placebo-controlled double-blind randomized parallel-group single-center twoarmed clinical phase IV trial

#### Primary study design

Interventional

#### Study type(s)

**Treatment** 

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

Coronary artery disease (CAD) and known dyslipidemia

#### **Interventions**

Twelve weeks oral Niacin therapy

#### Intervention Type

Drug

#### **Phase**

Phase IV

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

Niacin

#### Primary outcome(s)

Effect of 12 weeks oral niacin therapy in addition to standard long-term CAD medication on flow dependent vasodilation (FMD) in patients suffering from CAD

### Key secondary outcome(s))

Effects of niacin therapy on plasma lipid composition, HDL-C levels, LDL, triglycerides, total cholesterol, cholesterol ratio, high sensitivity C-reactive protein (hs-CRP), cardiovascular biomarkers, endothelium-independent nitrogylcerin-induced vasodilation (NMD) and FMD levels.

#### Completion date

19/05/2006

# **Eligibility**

#### Key inclusion criteria

- 1. Men or women > 35 and < 80 years of age
- 2. Documented clinically stable CAD and known dyslipidemia, defined by a low-density lipoprotein cholesterol (LDL >70 mg/dl) and a high density lipoprotein cholesterol (HDL <65mg/dl)
- 3. A flow-mediated vasodilatation (FMD) of less than 8%
- 4. Ability of subject to understand character and individual consequences of clinical trial
- 5. Written informed consent must be available before enrolment in the trial
- 6. For women with childbearing potential, adequate contraception

#### Participant type(s)

Patient

#### Healthy volunteers allowed

No

#### Age group

Adult

#### Sex

All

#### Key exclusion criteria

- 1. Clinical signs of congestive heart failure or left ventricular ejection fraction <30%
- 2. Uncontrolled hypertension (blood pressure >180/110mmHg) or hypotension (systolic blood pressure <90 mmHg)
- 3. Initiation of any of the following medications within the last twelve weeks: aspirin, lipid-lowering agents, calcium antagonists, betablockers, angiotensin converting enzymes inhibitors (ACEI) or angiotensin 1 (AT1) receptor blockers, hormone replacement therapy
- 4. Use of steroids or chemotherapy drugs within the past year or chronic use of non-steroidal anti-inflammatory drugs except for aspirin
- 5. Hemodynamically significant valvular heart diseases or hypertrophic obstructive cardiomyopathy
- 6. Renal dysfunction (creatinine > 2.5 mg/dl)
- 7. Known hepatic disease or elevation of serum transaminases or gamma glutamyl transferase (gGT) > 2x ULN (upper limit of normal range)
- 8. Uric acid >10.0 mg/dl
- 9. Alcohol abuse
- 10. White blood cell (WBC) count >12,000 or platelet count >500,000 /ul or <75,000 /ul

- 11. Existence of acute gastric ulcers
- 12. Existence of acute arterial bleeding
- 13. Other significant laboratory abnormalities

#### Date of first enrolment

19/01/2006

#### Date of final enrolment

19/05/2006

### Locations

#### Countries of recruitment

Germany

# Study participating centre Johannes Gutenberg-University Mainz

Mainz Germany 55131

# Sponsor information

#### Organisation

Johannes Gutenberg-University Mainz (Germany)

#### **ROR**

https://ror.org/023b0x485

# Funder(s)

### Funder type

Industry

#### **Funder Name**

Merck Pharma GmbH

## **Results and Publications**

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	01/05/2009		Yes	No