Prevalence and treatment of sleep-disordered breathing in Down's syndrome

Submission date	Recruitment status No longer recruiting	Prospectively registered			
20/12/2010		☐ Protocol			
Registration date	Overall study status Completed	Statistical analysis plan			
03/02/2011		[X] Results			
Last Edited	Condition category	[] Individual participant data			
27/10/2022	Respiratory				

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

Study information

Scientific Title

Controlled prospective trial of the effectiveness of continuous positive airway pressure therapy in adults with Down's syndrome

Study objectives

Continuous positive airway pressure (CPAP) use in Down's syndrome (DS) adults with obstructive sleep apnoea/hypopnoea syndrome (OSAHS)/sleep-disordered breathing (SDB) improves sleepiness and quality of life more effectively than lifestyle measures alone.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Scotland A Research Ethics Committee, 28/02/2011 and substantial amendment on 17/05/2011, ref: 11/MRE00/3

Study design

Repeated measures parallel-arm controlled intention to treat study

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

Sleep disordered breathing, obstructive sleep apnoea, Down's syndrome

Interventions

All participants with a diagnosis of sleep apnoea on home sleep study will be randomised to either the Lifestyle group or the CPAP Group. Participants allocated to the Lifestyle Group will receive written lifestyle advice on diet, exercise, sleep hygiene and sleeping position. Participants allocated to the CPAP Group will receive CPAP at the optimal pressure to treat their symptoms, along with written lifestyle advice as per the Lifestyle Group. Participants in both groups will be followed up at 1 week & at 1 month after randomisation. After 1 month, the Lifestyle Group will be offered CPAP, with additional follow ups at 1 week and 1 month after

commencing CPAP. Both groups will then be followed at 3 months and 6 months after randomisation. At 6 months, participation in the study is complete, and all participants will be encouraged to remain on CPAP.

Participants in both limbs will have anthropometric measures, cognitive function tests, health questionnaires, carer questionnaires and documentation of healthcare contact at baseline (randomisation), 1 month, 3 months & 6 months. All participants will complete and return a monthly diary recording health care contact, caffeine intake, medication, health questionnaires and a carer questionnaire.

Intervention Type

Other

Phase

Not Applicable

Primary outcome measure

- 1. Change in Subjective Sleepiness: Epworth Sleepiness Scale (ESS) recorded at baseline, 1 week and monthly thereafter (averaged over 1, 3, and 6 months).
- 2. Change in health related quality of life: EQ-5D (measured at measured at baseline, 1, 3 and 6 months) valued using UK population tariffs. This will be used to estimate the cost per quality-adjusted life year (QALY) gained by providing CPAP in comparison to lifestyle measures. The analysis will incorporate health care utilisation, including hospital visits and GP visits during the trial (recorded by monthly diary) and 3 months prior to trial entry (obtained via GP letter and review of patient records).

Secondary outcome measures

- 1. Objective changes in emotional and behavioural function: Modified DBC-A measured at baseline and monthly thereafter
- 2. Health status (quality of life): SF-12, SAQLI baseline, 1, 3, 6 months
- 3. Cognitive function: All tests deleted, replaced with Arizona Cognitive Test Battery (ACTB) (Added 31/05/2011)
- 4. Adverse events: Side effects associated with CPAP usage, such as dry mouth baseline and monthly thereafter, + 1 week after commencing treatment
- 5. Compliance with CPAP: Average hours of use per night from in-built machine timeclocks baseline, 1, 3, 6 months
- 6. Carer burden: Modified CBI, GHQ-12, open-ended qualitative comments about the experience of caring baseline and monthly thereafter

Previous secondary outcome measures:

3. Cognitive function: Leiter-R, BPVSII, Raven Matrices, DSQIID - baseline, 1, 3, 6 months

Overall study start date

01/02/2011

Completion date

31/12/2014

Eligibility

Key inclusion criteria

For the prevalence study:

- 1. Age greater than or equal to 16 years, either sex
- 2. A clinical diagnosis of Down's syndrome

Additionally, for CPAP evaluation:

- 3. A clinical diagnosis of OSAHS (greater than or equal to 10 obstructive apnoeas hour on multichannel sleep study and symptoms of excessive daytime sleepiness or Epworth Sleepiness Scale [ESS] greater than or equal to 9)
- 4. Ability to give informed consent and comply with protocol (participant and/or relative/carer, as appropriate)

Participant type(s)

Patient

Age group

Adult

Sex

Both

Target number of participants

68

Total final enrolment

28

Key exclusion criteria

- 1. Previous exposure to CPAP therapy
- 2. Arterial oxygen saturation less than 90% on room air
- 3. Participants with forced expiratory volume in one second (FEV1) less than 60%
- 4. Participants with chronic heart failure or recent myocardial infarction (heart attack)
- 5. Participants with known moderate or severe dementia
- 6. Participants with severe behavioural problems that would preclude sleep studies or CPAP treatment
- 7. Inability to give informed consent AND relative/carer unable or unwilling to give informed consent
- 8. Inability to comply with the protocol

Date of first enrolment

01/02/2011

Date of final enrolment

31/12/2014

Locations

Countries of recruitment

Scotland

United Kingdom

Study participating centre Department of Sleep Medicine

The Royal Infirmary of Edinburgh 51 Little France Crescent Old Dalkeith Road Edinburgh United Kingdom EH16 4SA

Sponsor information

Organisation

University of Edinburgh and NHS Lothian (UK) - Joint Sponsorship

Sponsor details

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Sponsor type

University/education

Website

http://www.ed.ac.uk/home

ROR

https://ror.org/03q82t418

Funder(s)

Funder type

Government

Funder Name

Chief Scientist Office of the Scottish Executive Health Department (UK) (ref: CZH/4/549)

Funder Name

Fondation Jerome Lejeune (France) (ref: R41361-195RSP)

Funder Name

Added 08/10/2013:

Funder Name

Baily Thomas Charitable Trust (ref: TRUST/RNA/AC/TM/2634-5178)

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

Not provided at time of registration

IPD sharing plan summary

Not provided at time of registration

Study outputs

	Output type	Details	Date created	Date added	Peer reviewed?	Patient- facing?
	Other publications	Validation of pictorial Epworth sleepiness scale in adults with Down syndrome	01/02 /2020	18/12 /2020	Yes	No
Results article		12/11 /2020	27/10 /2022	Yes	No	