# A prospective, randomised, double-blind, placebo-controlled trial evaluating the effects of mycophenolate mofetil (MMF) on surrogate markers for atherosclerosis in female patients with systemic lupus erythematosus

Submission date	Recruitment status  No longer recruiting	Prospectively registered	
11/01/2006		Protocol	
Registration date 12/04/2006	Overall study status Completed	Statistical analysis plan	
		[X] Results	
<b>Last Edited</b> 30/09/2019	<b>Condition category</b> Musculoskeletal Diseases	Individual participant data	

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

### Contact name

Dr David D'Cruz

### Contact details

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# Additional identifiers

EudraCT/CTIS number

**IRAS** number

### ClinicalTrials.gov number

NCT01101802

### Secondary identifying numbers

WX18694

# Study information

### Scientific Title

A prospective, randomised, double-blind, placebo-controlled trial evaluating the effects of mycophenolate mofetil (MMF) on surrogate markers for atherosclerosis in female patients with systemic lupus erythematosus

### Acronym

MISSILE (MMF in SLE)

### **Study objectives**

Systemic lupus erythematosus is a multi-system autoimmune disease that affects approximately 30/100,000 of the United Kingdom population. There is a female preponderance of at least 9:1 and the disease chiefly affects women of childbearing age. Several recent epidemiological studies have shown an increased risk of clinical coronary heart disease in SLE compared to a background population. In particular women in the 35-44 year old age group have a 50-fold increased risk of myocardial infarction. This is leading to a second peak in morbidity and mortality in SLE patients in their fourth and fifth decades, hence the need to find treatments to prevent this accelerated atheroma.

### Hypothesis:

MMF will attenuate inflammatory responses by attenuating the production of pro-inflammatory cytokines, inhibiting T-cell number activation, inhibiting adhesion molecule expression, decreasing the production of nitrous oxide (NO) by inducible nitrous oxide systems (NOS) as well as exerting direct anti-proliferation effects on numerous pro-atherogenic cell types. This is expected to be associated with a potent anti-inflammatory effect, which will translate into improvement of endothelial function and attenuation of the pro-inflammatory or oxidant parameters.

### Ethics approval required

Old ethics approval format

# Ethics approval(s)

Ethics approval received from the St Thomas' Hospital Research Ethics Committee on the 6th June 2005 (ref: 05/Q0702/63).

# Study design

Prospective randomised double-blind placebo-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

Systemic lupus erythematosus

### **Interventions**

Comparing placebo and control groups of patients before and after eight weeks of taking the study medication. Parameters that will be compared include:

- 1. Systemic Lupus Erythematosus Disease Activity Index (SLEDAI) and British Isles Lupus Assessment Group (BILAG). These are validated scores of disease activity
- 2. Lupus serology and cardiovascular bio-markers (from fasting blood samples)
- 3. Ankle-brachial index and pulse wave analysis (non-invasive measurements of arterial stiffness)
- 4. Flow mediated dilation (non-invasive measurement of endothelium function)

### Intervention Type

Drug

### Phase

**Not Specified** 

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

Mycophenolate mofetil (MMF)

### Primary outcome measure

To assess the effect of treatment with mycophenolate mofetil on endothelial function, measured by flow-mediated dilation.

### Secondary outcome measures

- 1. To assess any changes in disease activity measured by SLEDAI and BILAG
- 2. To measure any changes in lupus serology and bio-markers of cardiovascular disease
- 3. To measure any changes in arterial stiffness using ankle-brachial index and pulse wave analysis

### Overall study start date

01/02/2006

### Completion date

01/02/2007

# Eligibility

### Kev inclusion criteria

- 1. Female systemic lupus erythematosus (SLE) patients
- 2. Age 18-50 years

- 3. Pre-menopausal, using a reliable method of contraception
- 4. Clinically stable disease
- 5. Taking hydroxychloroquine, prednisolone up to 15 mg per day or both

### Participant type(s)

Patient

### Age group

Adult

### Lower age limit

18 Years

### Upper age limit

50 Years

### Sex

Female

### Target number of participants

100

### Key exclusion criteria

- 1. Smokers
- 2. Pregnant or breast-feeding
- 3. Use of other immunosuppressants
- 4. Use of any investigational drug within one month prior to screening
- 5. Acute infections two weeks prior to visit
- 6. History of ischaemic heart disease or end stage renal failure
- 7. Current signs of severe hepatic, gastrointestinal, endocrine, pulmonary, cardiac or neurological disease

### Date of first enrolment

01/02/2006

### Date of final enrolment

01/02/2007

# Locations

### Countries of recruitment

England

United Kingdom

## Study participating centre

### The Lupus Research Unit

London United Kingdom SE1 7EH

# Sponsor information

### Organisation

Guy's and St Thomas' NHS Foundation Trust (UK)

### Sponsor details

Research and Development Ground Floor West Wing Counting House Guy's Hospital St Thomas Street London United Kingdom SE1 9RT

### Sponsor type

Industry

### Website

http://www.guysandstthomas.nhs.uk/

### **ROR**

https://ror.org/00j161312

# Funder(s)

### Funder type

Industry

### **Funder Name**

Aspreva Pharmaceuticals (UK) (ref: WX18694)

# **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?
Basic results		29/09/2019	30/09/2019	No	No