

# Optimum dose finding in radioiodine treatment of hyperthyroidism in Graves' disease

<b>Submission date</b> 23/11/2009	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 20/01/2010	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 11/10/2011	<b>Condition category</b> Nutritional, Metabolic, Endocrine	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

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

## Contact information

**Type(s)**  
Scientific

**Contact name**  
Prof Dan Yun Chen

**Contact details**  
Sun Yat-sen University  
The First Affiliated Hospital  
Dongshan Division  
Hyperthyroidism Treatment Center  
Zhongshan Road , 1st  
Guangzhou  
China  
510080  
chendanyun@sohu.com

## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
1.0

# Study information

## Scientific Title

12-year prospective, randomised, open-label blinded endpoint study (PROBE) to estimate the optimum dose for radioiodine treatment of Graves' disease

## Study objectives

Dose optimisation in Graves' disease has been targeted such as to avoid a large number of recurrences or uncured patients. There was no particular focus on a low hypothyroidism rate. We hypothesise that there is an optimum individual dose resulting in a lowest uncured hyperthyroidism or recurrence rate and a low hypothyroidism rate at the same dose concept. An optimised dose concept would be desirable for two reasons:

1. To limit use of  $^{131}\text{I}$  for radiation safety issues
2. To limit hypothyroidism rate and consecutive need of replacement therapy. It seems to be an important factor in regions where patients have limited resources or, where access to medical supplies is limited.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Dongshan Ethics Committee approved in April 1997

## Study design

Prospective randomised open-label blinded end point study with intention-to-treat principle

## 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 contact either [schneider\\_P@nuklearmedizin.uni-wuerzburg.de](mailto:schneider_P@nuklearmedizin.uni-wuerzburg.de) (for a translated English version) or [chendanyun@sohu.com](mailto:chendanyun@sohu.com) (for a Chinese version) to request a patient information sheet

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

Graves' disease

## Interventions

Intervention group: Participants received one application of  $^{131}\text{I}$  (oral), followed by a second application after 3 months, if the first was unsuccessful. The dose/activity of  $^{131}\text{I}$  (in MBq) was determined using a clinical score system, the gland mass, and the 24 hours uptake of a test

activity. Follow up was initially two-weekly, then monthly, and, after the patient became stable in 6-monthly intervals.

**Intervention Type**

Drug

**Phase**

Not Applicable

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

Radioiodine

**Primary outcome measure**

Assessed annually, that is every 12 months after first therapeutic intervention for each patient, ending year 12:

1. Euthyroidism
2. Hyperthyroidism
3. Recurrence
4. Hypothyroidism
5. Subclinical hypothyroidism

**Secondary outcome measures**

The sum dose of 131-radioiodine which was necessary to achieve therapeutic primary outcomes at the end of the study. It was assessed 3 months after inclusion and after a patient had administered or not a second treatment dose. The outcomes measure resulted from 5 groups of dose-ranges of radioiodine, beginning with a low dose-range and ending with a high dose-range. The individual dose to be administered was determined according to these 5 range groups modulated by a clinical 7 step score.

**Overall study start date**

20/04/1997

**Completion date**

31/12/2009

**Eligibility****Key inclusion criteria**

1. Newly diagnosed hyperthyroid patients diagnosed Graves' disease
2. Patients with Graves' disease and anti thyroid drugs after 2 weeks withdrawal
3. Elevated levels of a recent set of general serum and thyroid function tests, confirming hyperthyroidism
4. 24-hour 131I-uptake greater than or equal to 40%
5. If 131I-uptake less than 40%, restriction of food or drug rich in iodine, retest until uptake was greater than or equal to 40%
6. Aged 8 years to no age limit, males and females

**Participant type(s)**

Patient

**Age group**

Other

**Sex**

Both

**Target number of participants**

600 patients randomised to 5 groups of 120 each

**Key exclusion criteria**

1. Severe liver or kidney damage
2. Agranulocytosis
3. Pregnancy or lactation
4. Less than 8 years of age

**Date of first enrolment**

20/04/1997

**Date of final enrolment**

31/12/2009

**Locations****Countries of recruitment**

China

**Study participating centre**

Sun Yat-sen University

Guangzhou

China

510080

**Sponsor information****Organisation**

Sun Yat-Sen University (China)

**Sponsor details**

The First Affiliated Hospital

Zhongshan Road , 1st

Guangzhou

China

510080

chendanyun@sohu.com

**Sponsor type**

University/education

**Website**

<http://www.gzsums.net/yiyxx/e-yiygaik.asp>

**ROR**

<https://ror.org/0064kty71>

## Funder(s)

**Funder type**

University/education

**Funder Name**

Sun Yat-Sen University (China)

**Alternative Name(s)**

SYSU

**Funding Body Type**

Private sector organisation

**Funding Body Subtype**

Universities (academic only)

**Location**

China

## 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?
<a href="#">Results article</a>	results	01/06/2011		Yes	No

