Effect of L-thyroxine on progression of Carotid Atherosclerosis in Subclinical Hypothyroidism

Submission date	Recruitment status	Prospectively registered
21/05/2008	No longer recruiting	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
21/05/2008	Completed	Results
Last Edited	Condition category	Individual participant data
04/03/2009	Circulatory System	Record updated in last year

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 MCT-79197

Study information

Scientific Title

Effect of L-thyroxine on progression of Carotid Atherosclerosis in Subclinical Hypothyroidism: a single centre, randomised, two-arm parallel, placebo-controlled drug intervention

Acronym

T4CASH

Study objectives

Primary hypothesis:

That treatment of patients with subclinical hypothyroidism with L-thyroxine to achieve a target thyroid stimulating hormone (TSH) less than 2 and greater than 0.4 mIU/L and free thyroxine (FT4) greater than 4 and less than 25 pmol/L, will slow progression of carotid plaque volume and carotid intima-media thickness (IMT), compared to placebo.

Secondary hypotheses:

That treatment with L-thyroxine will improve control of plasma lipids and homocysteine, and reduce levels of C-reactive protein, weight, waist circumference and insulin resistance.

Please note that as of 04/03/2009 the anticipated end date in this record was amended; the previous date at the time of registration was:

Initial anticipated end date: 31/07/2007

Ethics approval required

Old ethics approval format

Ethics approval(s)

Research Ethics Board of the University of Western Ontario gave approval on the 24th June 2004 (ref: 10458).

Study design

Single centre, randomised, double blind (participant, investigator, caregiver, outcome assessor and data analyst), two-arm parallel, placebo-controlled drug intervention

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Atherosclerosis, subclinical hypothyroidism

Interventions

- 1. L-thyroxine, beginning at 0.0125 and gradually increased to achieve target TSH level greater than 0.4 and less than 2 and FT4 greater than 4 and less than 25 pmol/L for 18 months
- 2. Matching placebo, with dummy dose adjustments for 18 months

Contact for public queries:

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Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

L-thyroxine

Primary outcome(s)

Rate of progression of carotid plaque volume (mm³) measured by 3-D ultrasound at baseline and 18 months.

Key secondary outcome(s))

- 1. Intima-media thickness (IMT), measured at baseline and 18 months
- 2. Weight, waist circumference, measured every 6 months
- 3. Insulin resistance by Homeostasis Model Assessment (HOMA), homocysteine, lipids, measured at baseline and 19 months

Completion date

31/07/2010

Eligibility

Key inclusion criteria

Male or female patients:

- 1. With subclinical hypothyroidism, defined as a TSH of 3 to 10 mU/L, and a normal serum free thyroxine level (FT4 11 to 25 pmol/L), and
- 2. Measurable plaque in the carotid arteries
- 3. Aged greater than or equal to 45 years

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

- 1. Unwilling to give informed consent
- 2. History of atrial fibrillation
- 3. Unstable angina, or angina requiring nitroglycerine as often as once a month
- 4. Unlikely to adhere to the protocol
- 5. Unlikely to survive 18 months because of severe illness such as cancer
- 6. At risk of pregnancy

Date of first enrolment

01/07/2006

Date of final enrolment

31/07/2010

Locations

Countries of recruitment

Canada

Study participating centre

Stroke Prevention & Atherosclerosis Research Centre (SPARC)

London, Ontario Canada N6G 2V2

Sponsor information

Organisation

Robarts Research Institute (Canada)

ROR

https://ror.org/01e36dv41

Funder(s)

Funder type

Research organisation

Funder Name

Canadian Institutes of Health Research (CIHR) (Canada) - http://www.cihr-irsc.gc.ca (ref: MCT-79197)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summaryNot provided at time of registration