Metformin in chronic obstructive pulmonary disease

Submission date	Recruitment status No longer recruiting	Prospectively registered		
18/01/2011		☐ Protocol		
Registration date 17/03/2011	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	[] Individual participant data		
29/02/2016	Respiratory			

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

Clinical Trials Information System (CTIS)

2010-020818-28

ClinicalTrials.gov (NCT)

NCT01247870

Protocol serial number

10.0086

Study information

Scientific Title

A randomised, double-blind, placebo-controlled trial of metformin in chronic obstructive pulmonary disease (COPD) exacerbations: a pilot study evaluating anti-hyperglycaemic efficacy

Study objectives

That metformin is efficacious as a glucose-lowering agent among patients admitted to hospital for chronic obstructive pulmonary disease (COPD) exacerbation.

Ethics approval required

Old ethics approval format

Ethics approval(s)

South East Research Ethics Committee, 08/09/2010, ref: 10/H1102/62

Study design

Randomised multicentre double-blind placebo-controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Chronic obstructive pulmonary disease

Interventions

Active: metformin 1 g twice-daily for 28 - 35 days

Comparator: placebo capsules twice-daily for 28 - 35 days

Clinical follow-up is for 1 month (range 28 - 35 days) for both the active and placebo arms.

Intervention Type

Drug

Phase

Phase IV

Drug/device/biological/vaccine name(s)

Metformin

Primary outcome(s)

Mean capillary glucose concentration from study entry to hospital discharge

Key secondary outcome(s))

Current secondary outcome measures as of 06/03/2014:

- 1. COPD Assessment Test score, measured at study entry, hospital discharge and follow-up
- 2. Exacerbation of Chronic Pulmonary Disease Tool (EXACT) score, measured at days 5, 10 and 28

- 3. Number of days from hospital admission to hospital discharge
- 4. Recurrent exacerbation, readmission and death rate, measured at 3 months
- 5. Insulin requirement during hospitalisation period, measured during hospitalisation period following study entry
- 6. Haemoglobin A1c, measured at follow-up (one month post study entry)
- 7. C-reactive protein concentration, measured at days 7 and follow-up (one month)
- 8. Body mass index, measured at follow-up (one month)
- 9. Waist circumference, measured at follow-up (one month)
- 10. Forced expiratory volume in 1 second, measured at at hospital discharge and follow-up (one month)
- 11. Serum fructosamine concentration at discharge and one month
- 12. Inflammatory cytokine concentrations and markers of oxidative stress at discharge and one month

Previous secondary outcome measures:

- 1. COPD Assessment Test score, measured at study entry, hospital discharge and follow-up
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- 7. C-reactive protein concentration, measured at days 7 and follow-up (one month)
- 8. Body mass index, measured at follow-up (one month)
- 9. Waist circumference, measured at follow-up (one month)
- 10. Forced expiratory volume in 1 second, measured at at hospital discharge and follow-up (one month)
- 11. Response to cutaneous steroid application (McKenzie test), measured at study day greater than or equal to 5

Completion date

01/07/2014

Eligibility

Kev inclusion criteria

Current inclusion criteria as of 06/03/2014:

- 1. Pre-existing diagnosis of COPD
- 2. Admission to hospital principally for an exacerbation of COPD
- 3. Aged greater than or equal to 35 years
- 4. Expected to remain in hospital for ≥48 hours

Previous inclusion criteria:

- 1. Pre-existing diagnosis of COPD
- 2. Admission to hospital principally for an exacerbation of COPD
- 3. Aged greater than or equal to 35 years
- 4. Able to enter the study within 48 hours of admission

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

- 1. Prior diagnosis of diabetes mellitus requiring insulin or oral hypoglycaemic therapy
- 2. Hypersensitivity to metformin hydrochloride or to any of the excipients
- 3. Renal impairment
- 4. Severe sepsis
- 5. Metabolic acidosis
- 6. Decompensated type 2 respiratory failure
- 7. Severe congestive cardiac failure
- 8. Acute coronary syndrome
- 9. Hepatic insufficiency
- 10. Excessive alcohol consumption
- 11. Malnourished or at high risk for malnutrition
- 12. Moribund or not for active treatment
- 13. Admitted to critical care unit
- 14. Unable to give informed consent
- 15. Pregnancy or lactation

Date of first enrolment

24/01/2011

Date of final enrolment

01/07/2014

Locations

Countries of recruitment

United Kingdom

England

Study participating centre St George's, University of London

London United Kingdom SW17 0RE

Sponsor information

Organisation

St George's, University of London (UK)

ROR

https://ror.org/040f08y74

Funder(s)

Funder type

Charity

Funder Name

British Lung Foundation (UK) (ref: COPD10/7)

Alternative Name(s)

BLF

Funding Body Type

Private sector organisation

Funding Body Subtype

Trusts, charities, foundations (both public and private)

Location

United Kingdom

Funder Name

Medical Research Council (UK) (ref MR/J010235/1)

Alternative Name(s)

Medical Research Council (United Kingdom), UK Medical Research Council, MRC

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summaryNot provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/07/2016		Yes	No
HRA research summary			28/06/2023		No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes