

Erectile dysfunction and statins: a randomised controlled trial (RCT)

Submission date 12/08/2008	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered
Registration date 26/09/2008	Overall study status Completed	<input checked="" type="checkbox"/> Protocol
Last Edited 12/06/2015	Condition category Urological and Genital Diseases	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

Plain English summary of protocol

<http://www.nres.npsa.nhs.uk/researchsummaries/?entryid29=20579&q=0%c2%ac08%2fH0301%2f74%c2%ac>

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

Protocol serial number

RHF0001

Study information

Scientific Title

Erectile dysfunction: a randomised controlled trial of lipid lowering with simvastatin (EDS trial)

Acronym

EDS trial

Study objectives

Primary hypothesis:

In men with untreated erectile dysfunction (ED) but no other cardiovascular risk factors, not currently receiving lipid lowering treatment, treatment with simvastatin improves erectile function.

Secondary hypotheses:

1. The improvement in erectile function leads to an improvement in sexual health related quality of life
2. The improvement in erectile function is related to a reduction in low-density lipoprotein (LDL) cholesterol and improvement in endothelial function
3. Treatment of ED with simvastatin is cost effective

On 05/07/2011 the overall trial end date was changed from 30/11/2009 to 30/09/2011.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Essex 1 Research Ethics Committee, 06/08/2008, ref: 08/H0301/74

Study design

Randomised double-blind placebo-controlled parallel-group multicentre trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Erectile dysfunction caused by vascular impairment

Interventions

Simvastatin one 40 mg tablet orally daily at bedtime for 6 months or matched placebo one tablet orally daily at bedtime.

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Simvastatin

Primary outcome(s)

Erectile dysfunction measured by the 5 item version of the International Index of Erectile Function (IIEF-5)

All primary and secondary outcomes will be assessed at baseline and 6 months.

Key secondary outcome(s)

1. Erectile function as measured by the Sexual Encounter Profile diaries
 2. Quality of life (QOL), assessed by the Male Erectile Dysfunction specific questionnaire (MED-QOL) and euroqol EQ-5D
 3. Total LDL, HDL cholesterol in fasting blood samples
 4. Use of health services and cost of statins
 5. Endothelial function measured by pulse wave analysis in a 10% sub-sample
- All primary and secondary outcomes will be assessed at baseline and 6 months.

Completion date

30/09/2011

Eligibility

Key inclusion criteria

1. Men aged 40 years and over
2. In a stable heterosexual relationship for at least 6 months
3. No clinically overt cardiovascular risk factors other than raised cholesterol
4. Not currently on lipid or erectile dysfunction therapy
5. Untreated erectile dysfunction defined as score <22 on the International Index of Erectile Function 5 item questionnaire

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

Male

Key exclusion criteria

1. Diabetes, past history of myocardial infarction, hospitalised angina or stroke
2. Hypertension - systolic blood pressure ≥ 170 mmHg, diastolic ≥ 100 mmHg
3. Ratio total:high-density lipoproteins (HDL) cholesterol ≥ 6
4. Total cardiovascular risk $\geq 20\%$ over next 10 years
5. Current lipid lowering therapy
6. Erectile dysfunction therapy in the last 3 months
7. Hypogonadism
8. Chronic liver disease or abnormal liver function
9. Severe renal disease or evidence of impaired renal function
10. Inflammatory muscle disease or evidence of muscle problems

11. Concomitant administration of contra-indicated drugs: itraconazole, ketoconazole, HIV protease inhibitors, erythromycin, telithromycin and nefazodone
12. Concomitant administration of other drugs associated with increased risk of myopathy /rhabdomyolysis: ciclosporin, danazol and fusidic acid
13. Galactose intolerance, Lapp lactase deficiency or glucose-galactose malabsorption

Date of first enrolment

01/10/2008

Date of final enrolment

28/07/2011

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

University of Hertfordshire

Hatfield

United Kingdom

AL10 9AB

Sponsor information

Organisation

University of Hertfordshire (UK)

ROR

<https://ror.org/0267vjk41>

Funder(s)

Funder type

Government

Funder Name

National Institute for Health Research (NIHR), Research for Patient Benefit (RfPB) (UK) (ref: PB-PG-0107-11391)

Results and Publications

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?
Results article	results	01/02/2013		Yes	No
Results article	results	05/03/2014		Yes	No
Protocol article	protocol	01/12/2011		Yes	No