

# Does a drug allopurinol reduce heart muscle mass and improve blood vessel function in patients with normal blood pressure and stable angina?

<b>Submission date</b> 23/02/2009	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 05/05/2009	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 29/05/2013	<b>Condition category</b> Circulatory System	<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 Allan Struthers

### Contact details

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Level 7, Clinical Pharmacology Department  
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Dundee  
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## Additional identifiers

### Protocol serial number

SR001

## Study information

### Scientific Title

Do xanthine oxidase inhibitors reduce left ventricular hypertrophy and endothelial dysfunction in normotensive patients with chronic stable angina?: a randomised double-blind placebo-controlled single-centre trial

### **Study objectives**

To assess if allopurinol (a drug currently used to treat gout) reduces left ventricular hypertrophy and improve endothelial dysfunction in patients with normal blood pressure and stable angina.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Tayside Committee on Medical Research Ethics A, approved on 12/02/2009 (ref: 09/S1401/3)

### **Study design**

Randomised double-blind placebo-controlled single-centre trial

### **Primary study design**

Interventional

### **Study type(s)**

Treatment

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

Normotensive patients with left ventricular hypertrophy and chronic stable angina

### **Interventions**

Patients will be given either allopurinol or placebo once a day orally. Patients will be given 100 mg for the first 2 weeks and then increased to 300 mg which is to be continued for further 4 weeks. Dosage will then be increased to 600 mg which is continue for a further 46 weeks (Total duration of interventions: 1 year).

Please use the following contact details to request a patient information sheet:

Dr Sushma Rekhraj  
Clinical Research Fellow  
Department of Clinical Pharmacology  
Ninewells Hospital and Medical School  
Dundee, DD1 9SY  
United Kingdom

### **Intervention Type**

Drug

### **Phase**

Not Applicable

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

Allopurinol

### **Primary outcome(s)**

To assess left ventricular mass regression. This will be measured by cardiac MRI at baseline and then repeated after 1 year.

**Key secondary outcome(s)**

1. To assess endothelial function. This will be done by flow mediated dilatation and spygmocor. This will be performed at baseline, 6 months and then 1 year.
2. To assess if allopurinol reduces arrhythmogenicity. This will be done by looking at microvolt T wave alternans on electrocardiogram (ECG) at baseline and 1 year.

**Completion date**

06/02/2011

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

1. Both males and females, adults (No specific age limits)
2. Patients with blood pressure <150/90 mmHg
3. Patients with left ventricular hypertrophy
4. Patients with stable angina

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Sex**

All

**Key exclusion criteria**

1. Patients with gout or already on allopurinol
2. Patients who have had a previous adverse reaction to allopurinol
3. Patients already on azathioprine
4. Patients with renal dysfunction (estimated glomerular filtration rate (eGFR) <60 ml/min)
5. Patients with heart failure or a left ventricular ejection fraction (LVEF) <45%
6. Patients who have conditions that would exclude them from undergoing an Magnetic Resonance Imaging (MRI) test such as pacemakers or any metal implants in their body
7. Patients who suffer from claustrophobia
8. Patients with cancer or lifethreatening illnesses
9. Patients who are unable to provide informed consent (e.g., learning disabilities)
10. Pregnancy or breastfeeding patients

**Date of first enrolment**

07/02/2009

**Date of final enrolment**

06/02/2011

## Locations

### Countries of recruitment

United Kingdom

Scotland

### Study participating centre

Division of Medicine and Therapeutics

Dundee

United Kingdom

DD1 9SY

## Sponsor information

### Organisation

University of Dundee (UK)

### ROR

<https://ror.org/03h2bxq36>

## Funder(s)

### Funder type

Government

### Funder Name

Medical Research Council (UK) (ref: G0701592)

### 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 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	05/03/2013		Yes	No
<a href="#">HRA research summary</a>			28/06/2023	No	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes