

# Effect of mouth taping at night on asthma control

<b>Submission date</b> 28/09/2005	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 15/11/2005	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 15/07/2010	<b>Condition category</b> Respiratory	<input type="checkbox"/> Individual participant data

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

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

**Secondary identifying numbers**  
TC03/5

## Study information

## **Scientific Title**

### **Study objectives**

Taping the mouth at night to ensure nose breathing will improve asthma control

### **Ethics approval required**

Old ethics approval format

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

Not provided at time of registration

### **Study design**

Randomised controlled trial

### **Primary study design**

Interventional

### **Secondary study design**

Randomised controlled trial

### **Study setting(s)**

Other

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

Treatment

### **Participant information sheet**

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

Asthma

### **Interventions**

Crossover design of taping mouth at night versus usual breathing

### **Intervention Type**

Other

### **Phase**

Not Applicable

### **Primary outcome measure**

Morning peak expiratory flow and symptom scores

### **Secondary outcome measures**

1. Evening peak flow
2. Diurnal variation in peak flow
3. FEV1
4. Beta-agonist use
5. Night time waking

6. Quality of life
7. Acceptability
8. Compliance with taping

**Overall study start date**

27/05/2004

**Completion date**

31/05/2006

## **Eligibility**

**Key inclusion criteria**

1. Asthma
2. Age 18-72
3. Forced expiratory volume in one second (FEV1) over 50% predicted
4. Nocturnal or early morning symptoms
5. Pro re nata (prn) (as needed) beta-agonist use

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Upper age limit**

72 Years

**Sex**

Both

**Target number of participants**

60

**Key exclusion criteria**

1. Previous training in Buteyko technique
2. Inability to breathe through nose
3. Known sleep apnoea
4. Over 10 pack years smoking history
5. Other significant uncontrolled disease

**Date of first enrolment**

27/05/2004

**Date of final enrolment**

31/05/2006

# Locations

## Countries of recruitment

England

United Kingdom

## Study participating centre

Division Respiratory Medicine

Nottingham

United Kingdom

NG5 1PB

# Sponsor information

## Organisation

University of Nottingham (UK)

## Sponsor details

Research Innovation Services

University Park

Nottingham

England

United Kingdom

NG7 2RD

paul.cartledge@nottingham.ac.uk

## Sponsor type

University/education

## ROR

<https://ror.org/01ee9ar58>

# Funder(s)

## Funder type

Charity

## Funder Name

British Lung Foundation (UK) - )ref: TC03/5)

## Alternative Name(s)

BLF

### **Funding Body Type**

Private sector organisation

### **Funding Body Subtype**

Trusts, charities, foundations (both public and private)

### **Location**

United Kingdom

## **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**

<b>Output type</b>	<b>Details</b>	<b>Date created</b>	<b>Date added</b>	<b>Peer reviewed?</b>	<b>Patient-facing?</b>
<a href="#">Results article</a>	results	01/06/2009		Yes	No