# Aceclofenac and diacerein combination treatment for arthritis

Submission date	Recruitment status	[X] Prospectively registered
07/08/2018	No longer recruiting	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
22/08/2018	Completed	Results
Last Edited	Condition category	Individual participant data
03/04/2020	Musculoskeletal Diseases	Record updated in last year

## Plain English summary of protocol

Background and study aims

Osteoarthritis is a common progressive disease affecting weight-bearing joints. Though traditionally deemed a degenerative disease, it is now believed that inflammatory pathways also play an important relationship in this disease. Aceclofenac and diacerein are both anti-inflammatory drugs used to treat osteoarthritis; however, they are only used individually, rather than in combination. This study aims to look at the effects of combining Aceclofenac and diacerein.

Who can participate?

Adults with inflammatory osteoarthritis of the knee

What does the study involve?

Patients will be randomised into the study and control groups. Patients in the intervention group will receive treatment with Aceclofenac and diacerein for a year, whereas patients in the control group will receive physiotherapy treatment. For both groups, patients will be assessed for pain, stiffness, physical function and general health, along with completing X-rays and liver and kidney function tests.

What are the possible benefits and risks of participating?

The possible benefit of participating is that the combination of Aceclofenac and diacerein may be more effective than using either drug alone. There are no known risks to participants, and they will be monitored for any side effects through routine physical and laboratory examinations every 3 months.

Where is the study run from?

National Center for Rheumatic Diseases, Kathmandu, Nepal

When is the study starting and how long is it expected to run for? June 2017 to October 2018

Who is funding the study? National Center for Rheumatic Disease (Nepal) Who is the main contact? Dr. Binit Vaidya drbvaidya@gmail.com

## **Contact information**

## Type(s)

**Public** 

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## Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

## Secondary identifying numbers

200/2017 Nepal Health Research Council (NHRC)

# Study information

#### Scientific Title

Efficacy and tolerance of aceclofenac and diacerein combination for inflammatory osteoarthritis

#### **Study objectives**

Aceclofenac and diacerein combination used in inflammatory osteoarthritis is more efficacious and safe compared to aceclofenac monotherapy

## Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Nepal Health Research Council (NHRC), 14/03/2018, 200/2017

#### Study design

Observational prospective open-label randomised case-control study

#### Primary study design

Observational

#### Secondary study design

Case-control study

#### Study setting(s)

Hospital

#### Study type(s)

Treatment

#### Participant information sheet

Not available in web format, please use contact details to request a participant information sheet

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

Inflammatory osteoarthritis

#### **Interventions**

Patient will be allocated into 2 groups - the intervention group and the control group. Patients in the intervention group will be treated with Aceclofenac and diacerein. Aceclofenac will be given at the starting dose of 100 mg twice daily for the first 10 days. The dose will then be tapered to 100 mg every day for next 10 days. The dose will then be further reduced to 50 mg per day for next 10 days and a final dose of 50 mg on alternate days will be given for 10 more days. Diacerein will be given at the dose of 50 mg twice daily for the initial 3 months after which the dose will be reduced to 50 mg per day for the next 9 months,

Patients in the control group will be managed with physiotherapy alone.

At the onset of treatment, the Visual Analogue Score (VAS), Health Assessment Questionnaire (HAQ) score, Western Ontario & McMaster Universities Osteoarthritis Index (WOMAC) score and X-ray findings of each patient will be recorded. Follow up will be done regularly at 3 month intervals, where clinical improvement will be recorded with VAS Score, HAQ score, and WOMAC

score. X-rays will be repeated at the end of 1 year. The side effects will also be monitored by careful questioning and physical examination, along with renal and liver function tests and care.

#### Intervention Type

Drug

#### Phase

Not Applicable

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

Aceclofenac Diacerein

#### Primary outcome measure

- 1. Improvement in pain, assessed using the Visual Analog Scale at 3, 6, 9 and 12 months after beginning treatment, along with every 3 months throughout the 1 year follow-up period
- 2. Gastrointestinal toxicity of a tapering dose of Aceclofenac and diacerein, assessed at at 3, 6, 9 and 12 months after beginning treatment using:
- 2.1. Patient history of nausea, vomiting, anorexia, dyspepsia, abdominal pain
- 2.2. Liver function tests, including tests for bilirubin, aspartate transaminase (SGOT), alanine transaminase (SGPT) and alkaline phosphatase (ALP)
- 3. Renal toxicity of a tapering dose of Aceclofenac and diacerein, assessed at at 3, 6, 9 and 12 months after beginning treatment using:
- 3.1. Renal function tests, including tests for urea and creatinine
- 3.2. Urine r/m/e test (complete urine examination)

#### Secondary outcome measures

- 1. Long-term effects of diacerein alone over 1 year, assessed by:
- 1.1. Visual Analogue Score (VAS) for pain, at 3, 6, 9 and 12 months after beginning treatment, along with every 3 months throughout the 1 year follow-up period
- 1.2. Western Ontario & McMaster Universities Osteoarthritis Index (WOMAC) score at 3, 6, 9 and 12 months after beginning treatment, along with every 3 months throughout the 1 year follow-up period
- 1.3. Kellgren-Lawrence Classification of Osteoarthritis (KL grading), determined from an X-ray taken 12 months after beginning treatment and at the end of the 1 year follow-up period
- 2. Change and maintenance of functional status of patients, assessed using the Western Ontario & McMaster Universities Osteoarthritis (WOMAC) score at 3, 6, 9 and 12 months after beginning treatment
- 3. Change in physical disability, assessed using the Health Assessment Questionnaire (HAQ) at 3, 6, 9 and 12 months after beginning treatment
- 4. Change in radiographic findings over 1 year, assessed using the Kellgren-Lawrence Classification of Osteoarthritis (KL grading), determined from an X-ray taken 12 months after beginning treatment

## Overall study start date

01/06/2017

## Completion date

15/09/2020

# **Eligibility**

## Key inclusion criteria

- 1. Aged 18 years or older
- 2. Knee pain that worsens on activity and is relieved with rest
- 3. Early morning pain
- 4. Reduced medial joint space on AP view X-ray of the knee
- 5. Knee effusion

#### Participant type(s)

**Patient** 

#### Age group

Adult

## Lower age limit

18 Years

#### Sex

Both

## Target number of participants

384

#### Key exclusion criteria

- 1. Psychiatric patient
- 2. Pregnant
- 3. Breastfeeding
- 4. No informed consent

#### Date of first enrolment

01/09/2019

## Date of final enrolment

15/04/2020

## Locations

#### Countries of recruitment

Nepal

# Study participating centre National Center for Rheumatic Diseases

Ratopul Kathmandu Nepal 44600

# Sponsor information

#### Organisation

National Center for Rheumatic Diseases

#### Sponsor details

Ratopul, Gaushala Kathmandu-9 Nepal 44600

#### Sponsor type

Hospital/treatment centre

# Funder(s)

#### Funder type

Not defined

#### Funder Name

National Center for Rheumatic Disease, Kathmandu, Nepal

## **Results and Publications**

#### Publication and dissemination plan

We intend to publish clinicodemographic data, safety-efficacy results, and future ad-hoc results.

#### Intention to publish date

30/12/2020

#### Individual participant data (IPD) sharing plan

The datasets generated during and analysed during the current study will be available upon request from Dr Binit Vaidya (drbvaidya@gmail.com).

## IPD sharing plan summary

Available on request