

Re-evaluation of the upper level of intake for zinc using novel molecular biomarkers of copper status

Submission date

31/05/2007

Recruitment status

No longer recruiting

Registration date

12/06/2007

Overall study status

Completed

Last Edited

08/05/2013

Condition category

Nutritional, Metabolic, Endocrine

☐ Prospectively registered

☐ Protocol

☐ Statistical analysis plan

☒ Results

☐ Individual participant data

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

Dr Jesse Bertinato

Contact details

HPFB, Nutrition Research Division
Health Canada, PL 2203C
Sir Frederick G. Banting Research Centre
251 Sir Frederick Banting Driveway
Ottawa
Canada
K1A 0L2
+1 613 957 0924
jesse_bertinato@hc-sc.gc.ca

Additional identifiers

Protocol serial number

N/A

Study information

Scientific Title

Acronym

ZIP (Zinc Intake Project)

Study objectives

High intakes of zinc reduce copper status in healthy children.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approval received from:

1. Health Canadas Research Ethics Board on the 2nd September 2005 (ref: REB-2004-0057)
2. University of Guelph Research Ethics Board on the 4th May 2005 (ref: REB# 05JA018)

Study design

Randomised, double-blind, placebo-controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Decreased copper status

Interventions

Each boy (25 per group) will take two zinc tablets per day (one in the morning with breakfast and one in the evening with dinner) for 120 days that will provide a total of either 0 (placebo group), 5, 10 or 15 milligrams of supplemental zinc per day.

Subjects will be measured and weighed at the beginning (Day 0), middle (Day 60) and end (Day 120) of the study. Blood and urine samples will be collected at Day 0, 60 and 120 to assess general health of the boys and determine zinc and copper status.

The amounts of zinc and copper obtained by diet will be assessed by a three-day food record (to be completed by the caregivers of the boys at the beginning and end of the study) and food frequency questionnaire (to be completed by the caregivers of the boys at the end of the study).

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Zinc

Primary outcome(s)

Effects of different levels of zinc intake on copper status will be determined by measuring the following indices of copper nutriture:

1. Expression of erythrocyte copper chaperone for Cu/Zn superoxide dismutase
2. Plasma copper concentration
3. Plasma ceruloplasmin activity
4. Erythrocyte Cu/Zn superoxide dismutase activity

Key secondary outcome(s))

Effects of different levels of zinc intake on:

1. Height
2. Weight
3. Complete blood counts
4. Lipid profile

Completion date

01/09/2008

Eligibility**Key inclusion criteria**

1. Healthy boys 7 to 8 years of age
2. Boys not taking a mineral supplement and have not taken a mineral supplement three months prior to commencing the study
3. Boys not taking sodium fluoride or aspirin
4. Boys living in Guelph, Ontario vicinity
5. Informed consent by the caregivers of the boys
6. Assent by the boys

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Child

Lower age limit

7 years

Upper age limit

8 years

Sex

Male

Key exclusion criteria

Individuals not fulfilling the above inclusion criteria.

Date of first enrolment

01/02/2007

Date of final enrolment

01/09/2008

Locations

Countries of recruitment

Canada

Study participating centre

HPFB, Nutrition Research Division

Ottawa

Canada

K1A 0L2

Sponsor information

Organisation

Health Canada (Canada)

ROR

<https://ror.org/05p8nb362>

Funder(s)

Funder type

Government

Funder Name

Health Canada (Canada) - Nutrition Research Division (ref: project # 4500550)

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	01/03/2013		Yes	No