Double Blind Randomised Placebo Controlled Trial of Oral Co-trimoxazole in Pulmonary Fibrosis

Submission date	Recruitment status No longer recruiting	Prospectively registered		
25/08/2005		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
09/09/2005	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
05/07/2018	Circulatory System			

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

Protocol serial number

UK study number for local regional ethical committee (LREC) 64/99

Study information

Scientific Title

Double Blind Randomised Placebo Controlled Trial of Oral Co-trimoxazole in Pulmonary Fibrosis

Acronym

Septrin and CFA

Study objectives

Oral Co-trimoxazole improves exercise capacity in patients with pulmonary fibrosis

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

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Idiopathic pulmonary fibrosis (UIP/NSIP/Mixed)

Interventions

Investigations prior to selection and randomisation:

All selected patients underwent baseline investigations before entry. This included:

- 1. Arterial gases at rest (on air)
- 2. Pulmonary function tests (laboratory measurement of TLC, DLCO)
- 3. St Georges Hospital respiratory questionnaire (SGHRQ), and MRC 5 Point Dyspnoea Score
- 4. Two shuttle-walking tests (2 weeks apart) demonstrating oxygen desaturation below 90% (either during or upon cessation of exercise)
- 5. An echocardiogram and ECG
- 6. Routine bloods tests including serum samples for cytokine measurements
- 7. Sputum samples for pneumocystis silver stain at request of Ethics Committee

Randomisation:

Patients were randomly allocated to active or placebo treatments by our clinical trials pharmacist, using computer generated random numbers. This assigned patients to study treatment groups, with a patient number. The study was conducted double blind. To preserve the double blind status of the trial, medication was issued by the pharmacist; using identical placebo tablets and labelling to ensure all treatment packs were identical.

Drug Treatment:

Co-trimoxazole or identical placebo (480 mg) tablets were supplied with dosage according to body-weight. Patients up to 70 kg received 960 mg bd, those above 70 kg, took 1440 mg (3 x 480 mg) bd. Folic acid 5 mg was given 3 times a week (minimum dose) to protect the bone marrow. Ranitidine 150 mg bd was supplied but optional for any indigestion. Patients on oral daily prednisolone had no adjustments to their prednisolone dose throughout the double blind study, except that permitted during a viral illness.

Assessment during Study:

On entry to the study all patients made visits for the following assessments every 2 weeks:

- 1. Body-weight
- 2. Resting respiratory rate and chest auscultation
- 3. FVC
- 4. Oxygen saturations at rest and during shuttle walking test and recovery recorded by Pulsox 3i wrist watch Minolta range
- 5. MRC-5 Point Dyspnoea Score
- 6. Compliance with treatment/side effects/study withdrawal and deaths were assessed and recorded
- 7. Blood tests (FBC, U & E, LFTs, ESR and CRP)

At 3 months all patients had arterial gases, full pulmonary function tests, serum cytokines and SGHRQ, repeated. Six weeks of pulmonary rehabilitation (rehab) was then commenced. Two weeks post rehabilitation final assessments were made before decoding. These assessments were identical to the regular 2 week assessments during the study.

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Co-trimoxazole

Primary outcome(s)

Exercise capacity (shuttle walking test) with area under the curve oxygen desaturation

Key secondary outcome(s))

- 1. Respiratory function tests (FVC, TLC, DLCO)
- 2. Arterial oxygen measurements
- 3. Quality of life data
- 4. Benefit of pulmonary rehabilitation

Twenty patients were selected.

Completion date

01/02/2004

Eligibility

Key inclusion criteria

- 1. Male or female below 85 years old
- 2. Demonstrated breathlessness with oxygen desaturation below 90% on two baseline shuttle walking tests (SWT)
- 3. Physical examination, HRCT scan and pulmonary function test results compatible with IPF (with or without histological diagnosis)
- 4. New diagnosis of IPF without treatment or previous diagnosis on regular daily prednisolone
- 5. Symptoms of exertional dyspnoea affecting life quality
- 6. Normal glucose 6-phosphate dehydrogenase levels to avoid drug induced haemolysis. Normal vitamin B12 levels

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

- 1. Recognised secondary causes of pulmonary fibrosis
- 2. Co-trimoxazole allergy or severe upper GI symptoms
- 3. Abnormal liver function tests or concurrent drug treatments that disturb liver function including azathioprine
- 4. Inability to perform the shuttle test due to musculoskeletal or cardiac causes

Date of first enrolment

21/02/2000

Date of final enrolment

01/02/2004

Locations

Countries of recruitment

United Kingdom

England

Study participating centre St Helier Hospital

Carshalton United Kingdom SM5 1AA

Sponsor information

Organisation

The Peel Trust Fund (UK)

ROR

https://ror.org/05ag50972

Funder(s)

Funder type

Charity

Funder Name

Part funded by The Peel Trust Fund for funding of placebo and Co-trimoxazole drugs only

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	01/05/2008		Yes	No