# Vascular function in polycystic ovary patients after treatment with metformin: its role in polycystic-ovary-syndrome-associated insulin resistance

Submission date	Recruitment status	<ul><li>Prospectively registered</li></ul>
14/02/2006	No longer recruiting	☐ Protocol
Registration date	Overall study status	<ul><li>Statistical analysis plan</li></ul>
14/02/2006	Completed	Results
Last Edited	Condition category	<ul><li>Individual participant data</li></ul>
05/11/2008	Nutritional, Metabolic, Endocrine	<ul><li>Record updated in last year</li></ul>

## Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Dr I.J.G. Ketel

### Contact details

VU University Medical Center
Department of Reproductive Medicine (Poli H)
P.O. Box 7057
Amsterdam
Netherlands
1007 MB
+31 (0)20 4440041
ijg.ketel@vumc.nl

# Additional identifiers

**EudraCT/CTIS** number

IRAS number

ClinicalTrials.gov number

# Secondary identifying numbers

**NTR550** 

# Study information

### Scientific Title

## **Study objectives**

The specific aim in the current study is to evaluate if the use of the insulin lowering agent metformin in polycystic ovary syndrome (PCOS) has an effect on micro and macro circulation.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Received from the local medical ethics committee

## Study design

Randomised, double blind, placebo controlled, parallel group trial

## Primary study design

Interventional

## Secondary study design

Randomised controlled trial

## Study setting(s)

Not specified

# Study type(s)

Treatment

## Participant information sheet

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

Polycystic ovary syndrome (PCOS)

## **Interventions**

Medication:

Patients will be randomised to receive metformin or placebo, two times a day 1000 mg for 6 months.

### Vascular measurements:

The measurements will take place at baseline and after metformin therapy. The micro and macro circulation will be measured.

## Intervention Type

Drug

### Phase

**Not Specified** 

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

Metformin

## Primary outcome measure

Vascular function after metformin therapy compared to vascular function at baseline (micro and macrovascular measurements)

## Secondary outcome measures

No secondary outcome measures

## Overall study start date

01/01/2006

## Completion date

01/10/2007

# Eligibility

## Key inclusion criteria

- 1. PCOS as judged in early routine patient work-up by three out of the following four criteria:
- 1.1. Oligomenorrhoea (mean length of the menstrual cycle greater than 35 days) or amenorrhoea (based on history of oligomenorrhoea)
- 1.2. Evidence of hyperandrogenism, whether clinical (hirsutism, acne, or male pattern balding) or biochemical (elevated serum androgen level [total testosterone greater than 2 nmol/l, and/or androstedione greater than 9], determined in a period while the patient was not using any medication with potential endocrine influence)
- 1.3. Elevated serum leuteinising hormone (LH) level (greater than 6.5 IU/l), determined at least 2 weeks after the beginning of a menstrual period and 3 weeks before the subsequent menstrual period in the presence of a normal follicle-stimulating hormone (FSH) level (less than 10 IU/l, determined in a period while the patient was not using any medication with potential endocrine influence)
- 1.4. A polycystic ovary morphology (defined by the presence of eight or more subcapsular follicular cysts less than or equal to 10 mm and increased ovarian stroma) by ultrasound performed at our department
- 2. Aged 18 40 years
- 3. One phase combined oral contraceptives with 30 ethinylestradiol (preferred are Microgynon 30®, Stediril 30, Yasmin® and Diane® 35) for at least 3 months but no other medication to avoid hormonal cyclicity and for contraceptive purposes
- 4. Informed consent

## Participant type(s)

**Patient** 

## Age group

Adult

## Lower age limit

## Sex

Female

## Target number of participants

40

## Key exclusion criteria

- 1. Cardiovascular disease (hypertension [greater than 160/90 mmHg], stroke, coronary artery disease, peripheral vascular disease, heart failure)
- 2. Diabetes mellitus (according to American Diabetes Association [ADA] criteria)
- 3. Hypothyroidism, hyperprolactinemia, Cushing's syndrome nonclassical congenital adrenal hyperplasia
- 4. Smoking for the last three months
- 5. Alcohol use greater than 4 units/day
- 6. Pregnancy
- 7. Diseases that influence reproductive hormone status
- 8. Kidney and liver dysfunction or congestive heart failure (which can cause lactic acidosis when taking metformin)

## Date of first enrolment

01/01/2006

## Date of final enrolment

01/10/2007

# Locations

### Countries of recruitment

Netherlands

# Study participating centre VU University Medical Center Amsterdam

Netherlands 1007 MB

# Sponsor information

## Organisation

Vrije University Medical Centre (VUMC) (The Netherlands)

# Sponsor details

Van der Boechorststraat 7 Amsterdam Netherlands 1081 BT

# Sponsor type

Hospital/treatment centre

## Website

http://www.vumc.nl

## **ROR**

https://ror.org/00q6h8f30

# Funder(s)

## Funder type

Industry

## Funder Name

Merck (France) - Commercial Unit CardioMetabolic Care

# **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