

# Glutathione status in platelets from patients with Type 2 Diabetes: therapeutic potential of N-Acetylcysteine (NAC) to help prevent platelet hyperaggregability

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<b>Registration date</b> 03/05/2011	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 03/09/2012	<b>Condition category</b> Nutritional, Metabolic, Endocrine	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

Prof Sandra MacRury

### Contact details

Department of Diabetes and Cardiovascular Science  
UHI Millennium Institute  
Centre for Health Science  
Old Perth Road  
Inverness  
United Kingdom  
IV2 3JH  
+44 (0)1463 279583  
[sandra.macrury@uhi.ac.uk](mailto:sandra.macrury@uhi.ac.uk)

## Additional identifiers

EudraCT/CTIS number

IRAS number

**ClinicalTrials.gov number**

**Secondary identifying numbers**

CZB/4/622

## **Study information**

### **Scientific Title**

Glutathione status in platelets from patients with Type 2 Diabetes: therapeutic potential of N-Acetylcysteine (NAC) to help prevent platelet hyperaggregability, a double-blind placebo-controlled randomized crossover study

### **Acronym**

NAC study

### **Study objectives**

Oral NAC has efficacy in preventing hyperactivity of platelets in type 2 diabetes, either as an adjunct to existing therapy or as an independent anti-thrombotic agent available to patients contraindicated for aspirin.

### **Ethics approval required**

Old ethics approval format

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

North of Scotland Research Ethics Service, ref no: 06/S0901/39, Approval granted : 27th Nov 2006. AM01 Dec 2006, AM02 Nov 07, AM03 17/03/09, AM04 (minor) 08/06/09

### **Study design**

Double-blind placebo-controlled randomised crossover study

### **Primary study design**

Interventional

### **Secondary study design**

Randomised controlled trial

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

Hospital

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

Treatment

### **Participant information sheet**

Not available in web format, please use the contact details below to request a patient information sheet

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

Type 2 Diabetes

### **Interventions**

1. This is a double-blind, placebo-controlled randomised crossover study to investigate the impact of oral dosing (1200 mg/day) with the anti-oxidant N-acetylcysteine (NAC) for 1 week on platelet activity and fibrinolytic potential in patients with type 2 diabetes who are either not receiving (Group A) or are receiving (Group B) aspirin

2. After 1 week on either placebo or NAC, patients will 'cross over' to the alternative treatment arm following a 1 week wash out period. Thus, trial medication will be taken for 2 weeks per patient (1 week on NAC, the other on placebo) over a total period of 3 weeks. The total timeframe of the study is envisaged to be less than 1 year from the start date.

### **Intervention Type**

Other

### **Phase**

Not Applicable

### **Primary outcome measure**

1. Determine the clinical potential of NAC as an anti-thrombotic agent in patients with type-2 diabetes, either alone or as an adjunct to aspirin therapy
  - 1.1. Degree of platelet activation using flow cytometry and platelet aggregometry ex vivo
  - 1.2. Plasma tissue plasminogen activator (t-PA) expression and activity
  - 1.3. Plasminogen activator inhibitor (PAI-1) expression and activity measured at baseline, Day 7, 15 and 21

### **Secondary outcome measures**

1. To determine whether oral dosing with NAC has the same impact on platelet biochemistry and activity, as found with the study in vitro, described above
2. To establish whether fibrinolysis is also affected by oral dosing with NAC in patients with type 2 diabetes

### **Overall study start date**

12/01/2010

### **Completion date**

25/08/2010

## **Eligibility**

### **Key inclusion criteria**

1. Adult type-2 diabetes patients (men or post-menopausal women)
2. Either not receiving (group A) or receiving (group B) aspirin

### **Participant type(s)**

Patient

### **Age group**

Adult

### **Sex**

Both

**Target number of participants**

22 (in each group)

**Key exclusion criteria**

1. Glycated haemoglobin (HbA1c) greater than 10%
2. Random triglyceride greater than 4 mmol L<sup>-1</sup>
3. Creatinine > 150 µmol L<sup>-1</sup>
4. Current or recently stopped (less than 6 months) smoking
5. Receiving other antiplatelet therapy or lipid lowering therapy
6. Asthma sufferer
7. Current use of tetracycline or cough suppressants

**Date of first enrolment**

12/01/2010

**Date of final enrolment**

25/08/2010

**Locations****Countries of recruitment**

Scotland

United Kingdom

**Study participating centre**

**Department of Diabetes and Cardiovascular Science**

Inverness

United Kingdom

IV2 3JH

**Sponsor information****Organisation**

NHS Highland Health Board (United Kingdom)

**Sponsor details**

c/o Ms Frances Hines

NHS Highland

Research Office

The Centre for Health Science

Old Perth Road

Inverness

Scotland

United Kingdom

IV2 3JH  
+44 (0)1463 255822  
frances.hines@nhs.net

**Sponsor type**

Hospital/treatment centre

**ROR**

<https://ror.org/010ypq317>

## Funder(s)

**Funder type**

Government

**Funder Name**

Chief Scientist Office (CSO) - Scottish Health Executive (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**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/11/2012		Yes	No