

# Preventing migraine in children and young people

<b>Submission date</b> 25/09/2008	<b>Recruitment status</b> Stopped	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
<b>Registration date</b> 07/10/2008	<b>Overall study status</b> Stopped	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 11/01/2012	<b>Condition category</b> Nervous System Diseases	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

**Contact name**  
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## Additional identifiers

**Protocol serial number**  
HTA 05/15/01; 29372

## Study information

**Scientific Title**  
A double-blind parallel-group randomised placebo-controlled trial of propranolol and pizotifen in preventing migraine in children

## **Acronym**

P3MC

## **Study objectives**

1. Propranolol is superior to placebo for the prevention of migraine attacks in children aged 5 - 16 years
2. Pizotifen is superior to placebo for the prevention of migraine attacks in children aged 5 - 16 years

More details can be found at <http://www.hta.ac.uk/1526>

Protocol can be found at <http://www.hta.ac.uk/protocols/200500150001.pdf>

## **Ethics approval required**

Old ethics approval format

## **Ethics approval(s)**

Trent Research Ethics Committee (REC) approved in November 2008 (ref: 09/H0405/19)

## **Study design**

Parallel-group randomised controlled trial

## **Primary study design**

Interventional

## **Study type(s)**

Treatment

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

Paediatric migraine

## **Interventions**

Eligible participants will be randomly allocated to the following four arms after the 4-week run-in period, double blind:

Arm 1 (n = 200): Propranolol (oral; tablet or liquid):

Children aged 5 - 7:

Week 1: 10 mg twice daily (bd)

Week 2: 20 mg bd

Week 3 - 14: 30 mg bd

Children aged 8 - 11:

Week 1: 20 mg bd

Week 2: 30 mg bd

Week 3 - 14: 40 mg bd

Children aged 12 - 16:

Week 1: 30 mg bd

Week 2: 40 mg bd

Week 3 - 14: 60 mg bd

Week 15 - 16: Dose of the drug will be reduced gradually before stopping completely

Arm 2 (n = 200): Pizotifen (oral; tablet or liquid):

Children aged 5 - 7:

Week 1: placebo + pizotifen 500 µg once daily (od)

Week 2: placebo + pizotifen 1 mg od

Week 3 - 14: placebo + pizotifen 1.5 mg od

Children aged 8 - 11:

Week 1: placebo + pizotifen 1 mg od

Week 2: placebo + pizotifen 1.5 mg od

Week 3 - 14: placebo + pizotifen 2 mg od

Children aged 12 - 16:

Week 1: placebo + pizotifen 1.5 mg od

Week 2: placebo + pizotifen 2 mg od

Week 3 - 14: placebo + pizotifen 3 mg od

Week 15 - 16: Dose of the drug will be reduced gradually before stopping completely

Arm 3 (n = 100): Propranolol placebo control group

Arm 4 (n = 100): Pizotifen placebo control group

Amended as of 11/01/2012, the trial was stopped early due to poor recruitment at the end of June 2011.

### **Intervention Type**

Drug

### **Phase**

Not Specified

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

Propranolol, pizotifen

### **Primary outcome(s)**

Number of migraine attacks during weeks 11 to 14

### **Key secondary outcome(s)**

1. Response defined as a 50% or greater reduction in number of attacks. Duration of follow-up: 42 weeks.
2. Headache intensity (headache diary). Duration of follow-up: 14 weeks.
3. Use of rescue medication. Duration of follow-up: 14 weeks.
4. School attendance. Duration of follow-up: 14 weeks.
5. Parent/guardian time off work during weeks 11 to 14
6. Recalled attack frequency. Duration of follow-up: 14 weeks.
7. Quality of life and functional outcomes: Paediatric Migraine Disability Assessment (PedMIDAS), Generic Child Quality of Life measure (GCQ), parent Euroqol EQ-5D, child Euroqol EQ-5D

### **Completion date**

01/07/2012

## **Reason abandoned (if study stopped)**

"Participant recruitment issue"

## **Eligibility**

### **Key inclusion criteria**

1. Both males and females, age 5 years 0 months to 16 years 11 months
2. With Migraine with Out aura (MO), Migraine with Aura (MA), Probable Migraine (PM) as defined by the International Headache Society (IHS1) criteria, with 2 to 6 migraine or probable migraine attacks/ 4 weeks by history during the previous 3 months
3. Two to 6 migraine or probable migraine attacks/ 4 weeks during the 4 week run-in
4. Treating paediatrician and parent/ guardian and child or young person believe the attacks are currently frequent and severe enough to merit a try of twice daily preventative medication
5. Satisfactory completion of headache diary during the run-in period at discretion of the investigator

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

Patient

### **Healthy volunteers allowed**

No

### **Age group**

Child

### **Lower age limit**

5 years

### **Upper age limit**

16 years

### **Sex**

Not Specified

### **Key exclusion criteria**

Amended as of 13/07/2009:

1. Asthma, bronchospasm or nocturnal or exercise induced cough or wheeze within the last 12 months or currently on daily asthma preventative treatment
2. Children under paediatric cardiology review, at the discretion of their paediatric cardiologist, e.g. if propranolol or pizotifen were contraindicated
3. Children with any of the following: uncontrolled heart disease, the presence of second or third degree heart block, in cardiogenic shock, bradycardia, severe peripheral arterial disease, metabolic acidosis, sick sinu syndrome, untreated pheochromocytoma, prone to hypoglycaemia (e.g. after prolonged fasting) or Prinzmetal's angina
4. Previous severe adverse event probably related to propranolol or pizotifen
5. On propranolol, another beta-blocker, pizotifen or cyproheptidine in the last 3 months
6. Currently in or have been in another prospective drug trial in the last 3 months
7. Fewer than two or more than six eligible attacks during the 4 week run-in, and stay excluded for 3 months at least

8. Child or family unable to identify their migraine or probable migraine headaches confidently (as may happen with some patients with both mild headaches and migraine on different days, e. g. with chronic daily headache [15 or more headache days/month])
9. Females of child bearing potential who are not using a reliable contraceptive strategy such as abstinence, barrier methods, oral contraceptive pills and contraceptive injections
10. Informed consent not given by parents/guardian, or assent/consent not given by patient

Initial information at time of registration:

1. Asthma or nocturnal or exercise induced cough or wheeze within the last 12 months or currently on daily asthma preventative treatment
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**Date of first enrolment**

01/06/2009

**Date of final enrolment**

01/07/2012

## Locations

**Countries of recruitment**

United Kingdom

England

**Study participating centre**

**University of Nottingham**

Nottingham

United Kingdom

NG7 2UH

## Sponsor information

**Organisation**

University of Nottingham (UK)

ROR

<https://ror.org/01ee9ar58>

## Funder(s)

**Funder type**

Government

**Funder Name**

NIHR Health Technology Assessment Programme - HTA (UK)

## 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?
<a href="#">Protocol article</a>	protocol	16/06/2010		Yes	No
<a href="#">HRA research summary</a>			28/06/2023	No	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes