

Effects of aspirin on markers of inflammation and coagulation in subclinical atherosclerosis in type 2 diabetic subjects

Submission date

20/12/2005

Recruitment status

No longer recruiting

Registration date

20/12/2005

Overall study status

Completed

Last Edited

03/07/2009

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

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Contact details

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Additional identifiers

Protocol serial number

NTR305; P03-154

Study information

Scientific Title

Acronym

DIASP study

Study objectives

An early intervention with low-dose aspirin in asymptomatic diabetic subjects attenuates progression of atherosclerosis, by decreasing inflammation and coagulation.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Received from local medical ethics committee

Primary study design

Interventional

Study design

Randomised double-blind placebo controlled crossover trial

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Diabetes mellitus type 2 (DM type 2)

Interventions

Subjects will be randomised between aspirin 100 mg and 300 mg. During the study period, each group will be followed 16 weeks. Treatment with aspirin (100 or 300 mg) or placebo for 6 weeks will be followed by a washout period of 4 weeks. After the washout period, patients will be treated by placebo when they received aspirin during the first period, and aspirin when they received placebo.

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Aspirin

Primary outcome(s)

Markers of vascular wall inflammation, represented by hsCRP and IL-6

Key secondary outcome(s)

1. Prostaglandin production, represented by 11-dehydro-thromboxaneB2, 8-isoprostaglandineF2a and 2,3-dinor-6-keto-prostaglandineF1a measured in morning urine samples
2. Vascular wall adhesion molecules, represented by sICAM-1, p-selectin, MCSF, CD40L
3. Coagulation markers, represented by fibrinogen, vWillebrand Factor and PAI-1 activity

Completion date

31/03/2006

Eligibility

Key inclusion criteria

1. Diabetes mellitus type 2
2. Aged greater than 18 years
3. HbA1c less than 10%
4. High sensitivity C-reactive protein (hsCRP) greater than 1.0 mg/l

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 Years

Sex

All

Key exclusion criteria

1. History of myocardial infarction, percutaneous transluminal coronary angioplasty, coronary artery bypass grafting, proven manifest coronary artery disease, angina pectoris, heart failure or severe cardiac arrhythmia
2. History of cerebrovascular accident, transient ischaemic attack
3. History of peripheral vascular disease, ankle/arm index less than 10, history of partial ileal bypass surgery
4. Uncontrolled hypertension
5. Asthma
6. Any bleeding disorder
7. History of gastrointestinal tract bleeding
8. Severe renal or hepatic dysfunction
9. Pregnancy
10. Recent participation in other research projects
11. Recent blood donation
12. Known allergy to salicylic acid
13. Use of all non-steroidal anti-inflammatory drugs (NSAIDs)
14. Use of any anti-thrombotic medication
15. Use of corticosteroids
16. Use of HMG-CoA-reductase inhibitors

Date of first enrolment

27/04/2005

Date of final enrolment

31/03/2006

Locations

Countries of recruitment

Netherlands

Study participating centre

Leiden University Medical Center

Leiden

Netherlands

2300 RC

Sponsor information

Organisation

Leiden University Medical Centre (LUMC) (Netherlands)

ROR

<https://ror.org/027bh9e22>

Funder(s)

Funder type

Hospital/treatment centre

Funder Name

Leiden University Medical Centre (LUMC) (Netherlands) - Department of General Internal Medicine

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	01/07/2007		Yes	No
Results article	results	01/08/2008		Yes	No