

# Dosefinding trial studying effect of 4 weeks Intervention on safety and efficacy in males with Metabolic syndrome with oral Eubacterium hallii

No registrations found.

<b>Ethical review</b>	Positive opinion
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	-
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON22563

### Source

NTR

### Brief title

DIME study

### Health condition

metabolic syndrome, obesity, insulin resistance, NAFLD

## Sponsors and support

**Primary sponsor:** AMC

**Source(s) of monetary or material Support:** investigator initiated

## Intervention

## Outcome measures

### Primary outcome

- Safety (plasma biochemistry eg hepatic /inflammatory/cholesterol markers) and

increase in fecal *E. hallii* levels upon increasing dosages of daily oral *E. hallii* treatment

- Insulin sensitivity as assessed by hyperinsulinemic clamp using stable isotope infusion) at baseline and 4 weeks upon increasing dosages of daily oral *E. hallii* treatment

## **Secondary outcome**

- Effect on daily dietary intake and bowel habits (monitored using standardized questionnaires)
- Intestinal fecal microbiota composition (including fecal *E. hallii*) upon increasing dosages of daily oral *E. hallii* treatment
- Effects on bile acid metabolism in 24h feces
- Liver fat content (hepatic MRI) upon increasing dosages of daily oral *E. hallii* treatment
- Persistence of fecal *E. hallii* after cessation of 4 weeks treatment by collecting fecal samples at 5 and 6 weeks.

## **Study description**

### **Background summary**

Based on our animal data, we will investigate the optimal dose of daily oral *E. hallii* treatment with respect to safety, improvement in insulin sensitivity (clamp) and reduced liver fat content (NAFLD/NASH on liver MRI) in male subjects with metabolic syndrome.

### **Study objective**

We hypothesize that daily oral administration of increasing dosages of *Eubacterium hallii*, an anaerobic intestinal bacterial strain, can exert beneficial effects on insulin sensitivity and liver fat.

### **Study design**

0,1,2,4,5,6 weeks

### **Intervention**

increasing daily dosages of *eubacterium hallii* (10e6, 10e8 and 10e10 cells/ml) for 4 weeks in male subjects with metabolic syndrome

## Contacts

### Public

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### Scientific

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## Eligibility criteria

### Inclusion criteria

- Caucasian obese subjects with metabolic syndrome (males, aged 21 to 69 years-old; body mass index (BMI) 25 to 43 kg/m<sup>2</sup>, fasting plasma glucose > 5.6 mmol/l, fasting triglycerides > 1.7 mmol/l, waist circumference > 102 cm)
- No concomitant medication
- Regular stool pattern

### Exclusion criteria

- History of cardiovascular event (myocardial infarction or pacemaker implantation)
- Cholecystectomy
- Use of medication including proton pump inhibitors
- Oral anticoagulants and/or oral antibiotics in the past three months
- (Expected) prolonged compromised immunity (e.g. due to recent cytotoxic chemotherapy or HIV-infection with a CD4 count < 240).

- Excessive weightloss of >10% in the last months
- Overt untreated GI disease/abnormal bowelhabits;
- Levels of plasma aspartate aminotransferase (ASAT) and alanine aminotransferase (ALAT) are 2.5 times or more the upper limit of the normal range
- History of heavy alcohol use (>12 to 15 g of alcohol per day, or >12 oz of beer, 5 oz of wine, or 1.5 oz of distilled spirits)
- Overt DM2

## Study design

### Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Single blinded (masking used)
Control:	Active

### Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	26-11-2014
Enrollment:	27
Type:	Actual

## Ethics review

Positive opinion	
Date:	22-11-2014
Application type:	First submission

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

### Other (possibly less up-to-date) registrations in this register

No registrations found.

### In other registers

Register	ID
NTR-new	NL4775
NTR-old	NTR4913
Other	: MEC 2014_215

## Study results