# Mild renal insufficiency and forearm blood flow.

No registrations found.

| | |
|---|---|
| **Ethical review** | Not applicable |
| **Status** | Recruiting |
| **Health condition type** | - |
| **Study type** | Interventional |

## Summary

### ID

NL-OMON25685

**Source**
Nationaal Trial Register

**Brief title**
N/A

**Health condition**

1. Hypertension (hypertensie);

2. high blood pressure (hoge bloeddruk);

3. mild renal insufficiency (milde nierfunctiestoornissen).

### Sponsors and support

**Primary sponsor:** dr. A.A. Kroon
**Source(s) of monetary or material Support:** Nederlandse Hartstichting

### Intervention

### Outcome measures

**Primary outcome**

Forearm blood flow (FBF).

### Secondary outcome

ADMA (asymmetric dimethylarginine) concentration in the blood.

## Study description

### Background summary

In this study the relationship between the systemic NO-mediated endothelium-dependant vasodilatation, measured as forearm blood flow and venous ADMA-level is studied, in hypertensive as well as healthy subjects. In the hypertensive subjects it also will be examined to what extend the forearm blood flow (FBF) can be influenced by treatment with an angiotensin-II- receptorblocker (eprosartan) and/or a statin (rosuvastatin).

### Study objective

The ADMA-level in hypertensive subjects will be reversely related to the basal blood flow and the endothelial NO-availability in the forearm. Pre-treatment with an angiotensin-II-receptorblocker and/or a statin will decrease the ADMA-levels via increased clearance of ADMA and, consequently, will ‘normalise’ the forearm blood flow and NO-availability.

### Study design

Baseline forearm blood flow measurement (without medication) at t=0. Second forearm blood flow measurement 3 weeks later.

### Intervention

The patients will be treated with eprosartan 600 mg and/or rosuvastatin 20 mg during a three-weeks interval.

## Contacts

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# Eligibility criteria

## Inclusion criteria

1. Hypertension (without medication blood pressure >140/90 mmHg and <180/110 mmHg);

2. creatinine clearance 60-90 ml/min;

3. microalbuminuria (30-300 mg albumin/24 hours);

4. age 18-75 years;

5. BMI between 18 and 30 kg/m2.

## Exclusion criteria

1. Diabetes mellitus;

2. contra-indication for use of an angiontensin-II-receptorblocker or statin.

# Study design

## Design

| | |
|---|---|
| Study type: | Interventional |
| Intervention model: | Parallel |
| Allocation: | Randomized controlled trial |

| | |
|---|---|
| Masking: | Open (masking not used) |
| Control: | Active |

### Recruitment

NL

| | |
|---|---|
| Recruitment status: | Recruiting |
| Start date (anticipated): | 01-11-2007 |
| Enrollment: | 60 |
| Type: | Anticipated |

## Ethics review

Not applicable

| | |
|---|---|
| Application type: | Not applicable |

## 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 | NL1071 |
| NTR-old | NTR1104 |
| Other | : 2605 |
| ISRCTN | ISRCTN wordt niet meer aangevraagd |

# Study results

**Summary results**
N/A