

# The effects of low dose 1,25-dihydroxyvitamin D3 on the polarising of cellular immune reactivity towards type 2 immunity.

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-OMON29360

### Source

NTR

### Brief title

N/A

### Health condition

auto-immune diseases

## Sponsors and support

**Primary sponsor:** dr. E.M.W. Eekhoff

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**Source(s) of monetary or material Support:** Medicina Interna

## Intervention

## Outcome measures

### Primary outcome

We expect the serum level of 1,25(OH)<sub>2</sub>D<sub>3</sub> to rise and to induce the activity of T lymphocytes and the dendritic cells which regulate the immunity and reduce the activity of type 1 T lymphocytes involved in auto-immune diseases. Their activity will be measured by the decrease of interferon gamma production.

### Secondary outcome

We expect the type 1 cytokines to be decreased and the type 2 cytokines to be upregulated.

## Study description

### Background summary

N/A

### Study objective

Short term oral low dose 1,25(OH)<sub>2</sub>D<sub>3</sub> in man will increase type-2 and decrease type-1 cellular immune reactivity without affecting serum calcium levels. Hereby, the potential usage of 1,25(OH)<sub>2</sub>D<sub>3</sub> for immuno-therapeutical approaches will be investigated.

### Study design

N/A

### Intervention

Twelve volunteers will receive 10 capsules of 0,5 µg calcitriol, the other twelve volunteers will receive 10 capsules placebo. They have to take the medication twice a day during 5 days.

## Contacts

### Public

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## Eligibility criteria

### Inclusion criteria

1. Written informed consent;
2. women, aged 20-30 years;
3. use of oral contraception with estrogen and progestin;
4. apparently health.

### Exclusion criteria

1. Men;
2. pregnancy;
3. smoking;
4. alcohol abuse: > 3 Units/day;
5. use of drugs, except for incidental analgesic agents;
6. use of diuretic medication or corticosteroids;
7. auto immune diseases;

8. renal impairment (serum creatinine >150 µmol/l);
9. malignant disease;
10. kidney-stones (also when this occurs in the family), urinary tract infections;
11. infectious diseases;
12. use of antibiotics;
13. use of any medication that influence T-lymphocytes or vitamin D metabolism;
14. disease or use of any medication known to affect Ca metabolism or skeletal physiology;
15. serious mental impairment i.e. preventing to understand the study protocol/aim.

## Study design

### Design

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

### Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	15-11-2006
Enrollment:	24
Type:	Actual

## Ethics review

Positive opinion

Date: 10-08-2006  
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	NL784
NTR-old	NTR796
Other	MEC VU : 2006/160
ISRCTN	ISRCTN12365646

## Study results

### Summary results

N/A