An eight-week, randomized, double-blind, parallel-group, multicenter study to evaluate the efficacy and safety of the combination of aliskiren/HCTZ (150/25 mg and 300/25 mg) in comparison with HCTZ 25 mg in patients with essential hypertension not adequately responsive to HCTZ 25 mg monotherapy

Published: 17-08-2006
Last updated: 20-05-2024

The primary objective of this study is to demonstrate the efficacy of the combination therapy of aliskiren (150 mg and 300 mg) and HCTZ 25 mg in hypertensive patients who do not show sufficient blood pressure response to a 4-week treatment of HCTZ...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Vascular hypertensive disorders
Study type	Interventional

Summary

ID

NL-OMON30094

Source
ToetsingOnline

Brief title
Phase III study in hypertensive patients non reponder on HCTZ

Condition

- Vascular hypertensive disorders

Synonym
high blood pressure, hypertension

Research involving
Human

Sponsors and support

Primary sponsor: Novartis
Source(s) of monetary or material Support: farmaceutische industrie

Intervention

Keyword: Aliskiren, hypertension, non-responder HCTZ

Outcome measures

Primary outcome

MSDBP (mean sitting diastolic bloodpressure)

Secondary outcome

MSDBP (mean sitting systolic bloodpressure)

ECG, Adeverse Events, labevaluations, physical examination

proportion of patients achieving a blood pressure control target of < 140/90

mmHg at the end of study for all treatments arms

Study description

Background summary

The renin-angiotensin system (RAS) plays a major role in the regulation of arterial blood pressure and the pathogenesis of hypertension. Aliskiren is a new drug from a new class of antihypertensiva, the renin inhibitors. This renin inhibitor blocks the RAS so that angiotensinogen is no longer converted in angiotensin I.

Thiazide-type diuretics have been recommended as first line antihypertensive therapy. HCTZ is the most commonly prescribed thiazide-type diuretic. Adequate and timely control of blood pressure in hypertensive patients is the goal for

the treatment of hypertension. In order to achieve this goal two or more antihypertensive drugs may be needed. The combination of a RAS blocking drug such as ACE inhibitor or ARB and a diuretic such as HCTZ is commonly used in the clinical practice for the treatment of hypertension. This Phase III study is designed to evaluate the efficacy and the safety of the combination of aliskiren/HCTZ (150/25 mg) and aliskiren/HCTZ (300/25 mg) in patients with essential hypertension whose blood pressure is not adequately controlled by HCTZ 25 mg monotherapy.

Study objective

The primary objective of this study is to demonstrate the efficacy of the combination therapy of aliskiren (150 mg and 300 mg) and HCTZ 25 mg in hypertensive patients who do not show sufficient blood pressure response to a 4-week treatment of HCTZ 25 mg.

Study design

This is a randomized, double-blind, parallel-group, multi center, phase III study. For every patient the study starts with a screeningsvisit and for patients currently on antihypertensiva a washout period is started on this visit for a maximum of 10 days. All patients will be treated with HCTZ 25 mg during 4 weeks in the single-blind run-in period. If after this period the patient is not adequately controlled by HCTZ monotherapy, this means on visit 5 a MSDBP * 90 mmHg en < 110 mmHg, and additionally fulfills all other in/exclusion criteria, then patient is randomized in the following 3 arms: aliskiren/HCTZ (150/25 mg) or aliskiren/HCTZ (300/25 mg) or HCTZ 25 mg monotherapy. This double-blind treatment will last 8 weeks.

Intervention

Patients are treated with HCTZ 25 mg from visit 2 during 4 weeks and on visit 5 patients recieve: HCTZ (25 mg), or aliskiren/HCTZ 150/25 mg or aliskiren/HCTZ 300/25 mg (ratio 1:1:1) during 8 weeks.

Study burden and risks

Burden:
9 visits of approximately 1 hour during 12-13 weeks, 4x blooddraw.

Risks:
From earlier studies it appeared that the adverse events seen with aliskiren are comparable with placebo.
The most common adverse events reported in research studies to date with aliskiren were:
* Headache

* Diarrhea
* Dizziness
* Fatigue
* Back pain
* Nausea
* Nasopharyngitis

The most common side effects to date with HCTZ are electrolyte (blood salt) and fluid imbalance (symptoms: dry mouth, fatique and muscle cramps), increase in blood glucose level, and general weakness.

Clinical studies testing the combination of aliskiren + HCTZ have also been done and some are ongoing. In clinical studies, this combination of aliskiren/HCTZ was well tolerated. The most common adverse events reported to date were headache, diarrhea, nasopharyngitis (inflammation of the nose and pharynx), and dizziness.

Contacts

Public
Novartis

raapopseweg 1
6824 DP
Nederland
Scientific
Novartis

raapopseweg 1
6824 DP
Nederland

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adults (18-64 years)
Elderly (65 years and older)

Inclusion criteria

For full list, see protocol;Patients with a diagnosis of hypertension:;Newly diagnosed patients or patients who have not been treated for hypertension within the 4 weeks prior to Visit 1 must have a msDBP * 95 mmHg and < 110 mmHg at Visit 1.;All patients who have been treated for hypertension within the 4 weeks prior to Visit 1 must have a msDBP * 85 mmHg and < 110 mmHg at Visit 2.;All patients must have a msDBP * 90 mmHg and < 110 mmHg at Visit 5.

Exclusion criteria

For full list, see protocol;Severe hypertension (msDBP * 110 mmHg and/or msSBP * 180 mmHg).;History or evidence of a secondary form of hypertension.;Previous or current diagnosis of heart failure.;History of hypertensive encephalopathy or cerebrovascular accident, transient ischemic cerebral attack (TIA), myocardial infarction, coronary bypass surgery, or any percutaneous coronary intervention (PCI).;Serum potassium < 3.5 mEq/L (mmol/L) or * 5.3 mEq/L (mmol/L), serum sodium less than the lower limit of normal or dehydration.;Patients with Type 1 or Type 2 diabetes mellitus who are not well controlled based on the investigator*s clinical judgment. Patients with diabetes mellitus enrolled in this study should be well controlled. It is recommended that patients currently being treated for diabetes mellitus be on a stable dose of oral antidiabetic medication for at least 4 weeks prior to Visit 1.;Patients who previously enrolled in the active drug treatment period of a clinical trial that contained the treatment combination of aliskiren/HCTZ.

Study design

Design

Study phase:	3
Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Active
Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	09-10-2006
Enrollment:	70
Type:	Actual

Medical products/devices used

Product type:	Medicine
Brand name:	geneesmiddel is verkrijgbaar als generiek
Generic name:	hydrocloorthiazide
Registration:	Yes - NL intended use
Product type:	Medicine
Brand name:	nog niet geregistreerd voor deze indicatie
Generic name:	aliskiren

Ethics review

Approved WMO Date:	17-08-2006
Application type:	First submission
Review commission:	IRB Amsterdam: Independent Review Board Amsterdam (Amsterdam)
Approved WMO Date:	30-08-2006
Application type:	First submission
Review commission:	IRB Amsterdam: Independent Review Board Amsterdam (Amsterdam)

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
EudraCT	EUCTR2005-004580-40-NL
Other	NA
CCMO	NL13582.003.06