# **Glucotoxity and Endothelial Function**

Published: 04-07-2008 Last updated: 07-05-2024

The main purpose of this study is to evaluate the effect of glycemic control on microvascular endothelial function in type 2 diabetes mellitus.

Ethical review	Approved WMO
Status	Will not start
Health condition type	Glucose metabolism disorders (incl diabetes mellitus)
Study type	Observational invasive

# **Summary**

### ID

NL-OMON31935

**Source** ToetsingOnline

Brief title Glucotoxity and Endothelial Function

# Condition

- Glucose metabolism disorders (incl diabetes mellitus)
- Arteriosclerosis, stenosis, vascular insufficiency and necrosis

**Synonym** diabetes mellitus

**Research involving** Human

# **Sponsors and support**

**Primary sponsor:** Erasmus MC, Universitair Medisch Centrum Rotterdam **Source(s) of monetary or material Support:** Ministerie van OC&W

# Intervention

Keyword: diabetes mellitus, endothelium, glycoHb, vascular function

### **Outcome measures**

#### **Primary outcome**

To assess the relationship between glycemic control and endothelial function on

the microvascular level in diabetes mellitus type 2 (NO, ET-1, Ang II).

#### Secondary outcome

To assess underlying mechanisms involved in microvascular endothelial

dysfunction and possibly its improvement

# **Study description**

#### **Background summary**

Diabetes-associated atherosclerosis is a major clinical problem. Diabetic patients have a two- to fourfold increased incidence of coronary artery disease and stroke and a tenfold increased incidence of lower extremity vascular disease (1,2). Not only macrovascular, but also microvascular dysfunction is a considerable cause of morbidity and mortality in diabetic subjects. Microvascular dysfunction, besides leading to nephropathy and retinopathy, also affects the microcirculation of the myocardium (3,4). Diabetes mellitus is associated with a diminished coronary flow reserve and impaired cardiac ischemic preconditioning (3,4). Intervention studies have shown that improved glycemic control reduces the risk of especially microvascular complications in diabetes (5,6).

With regard to the pathogenesis of vascular disease in diabetes endothelial dysfunction is considered to be a critical initial event (7,8). This endothelial dysfunction might be caused by an adverse effect of hyperglycemia (glucotoxicity) on endothelial vascular function. However, elevated blood pressure and dyslipidemia may be involved as well.

#### **Study objective**

The main purpose of this study is to evaluate the effect of glycemic control on microvascular endothelial function in type 2 diabetes mellitus.

#### Study design

This is a prospective, non-randomized, single-center study which will evaluate the ability of glycemic control to reverse or improve endothelium-dependent and endothelium-independent microvascular function in patients with poorly controlled diabetes mellitus type 2.

#### Study burden and risks

to undergo two skin biopsies: one at baseline and the second after 12 weeks improved glycemic control. At the same time-points serum will be collected. The biopsies will be used for isolation of microvascular resistance vessels. The isolated vessels will be used in a standard microvascular functional assay to study NO-dependent and -independent vasodilatation and endothelin-1 (ET-1) and angiotensin II (Ang II)-induced vasoconstriction. The collected serum will be used for experiments with cultured endothelial cells.

# Contacts

#### Public

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# **Trial sites**

# **Listed location countries**

Netherlands

# **Eligibility criteria**

Age Adults (18-64 years)

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Elderly (65 years and older)

#### **Inclusion criteria**

Male or female type 2 diabetic patients; Documented GlycoHb > 8.5% for at least 6 weeks; Age 30-60 years; BMI 25-35 kg/m2; LDL-cholesterol concentration < 3.0 mmol/l; Blood pressure < 140/90 mmHg

### **Exclusion criteria**

(Clinical or laboratory) evidence of atherosclerosis or cardiovascular disease; Other systemic disorder with likelihood of (micro)vascular involvement; diabetic nephropathy (albuminuria > 300 mg per day); Kidney disease other than diabetes (serum creatinine > 120  $\mu$ mol/l); Alcohol abuse; Unwillingness to give written informed consent; Condition that precludes follow-up; Oral anticoagulant therapy or bleeding diathesis

# Study design

### Design

Study type: Observational invasive		
Masking:	Open (masking not used)	
Control:	Uncontrolled	
Primary purpose:	Treatment	

### Recruitment

NL	
Recruitment status:	Will not start
Enrollment:	20
Туре:	Actual

# **Ethics review**

Approved WMO Date: Application type:

04-07-2008 First submission

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Review commission:

METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

# **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 CCMO ID NL22134.078.08