# THE TREMOR STUDY: TACROLIMUS EXTENDED RELEASE, MOVEMENT DISORDERS AND OTHER NEUROCOGNITIVE EFFECTS

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Ethical review Approved WMO

**Status** Recruitment stopped

**Health condition type** Nephropathies **Study type** Interventional

# **Summary**

#### ID

NL-OMON43508

#### Source

**ToetsingOnline** 

#### **Brief title**

TREMOR study

## **Condition**

Nephropathies

#### Synonym

kidney transplantation

## **Research involving**

Human

# **Sponsors and support**

**Primary sponsor:** Academisch Medisch Centrum 1 - THE TREMOR STUDY: TACROLIMUS EXTENDED RELEASE, MOVEMENT DISORDERS AND OTHER NEUR ... 26-05-2025 **Source(s) of monetary or material Support:** Chiesi Farmaceutici,unrestricted grant Chiesi Farmaceutici

#### Intervention

**Keyword:** calcineurin inhibitors, kidney transplantation, neurocognitive performance, tremor

### **Outcome measures**

#### **Primary outcome**

The primary outcome is tremor as measured by the ANT Modules Pursuit and Tracking.

## **Secondary outcome**

Secondary outcomes include (1) a selection of neuropsychological assessments from the ANT test battery, (2) tremor as measured by TETRAS (TRG Essential Tremor Rating Assessment Scale), (3) a quality of life assessment and (4) patient drug preference at the end of study.

# **Study description**

#### **Background summary**

Renal transplantation is the optimal form of renal replacement therapy. Compared to dialysis, it increases patient survival and quality of life. Moreover, renal transplantation decreases the economic burden of end-stage-renal replacement therapy to society. After renal transplantation maintenance immunosuppressive therapy is necessary to control graft rejection. These immunosuppressive regimens are frequently associated with side effects, which might detract from the potential gain of the renal transplant. Conversion to another regimen or formula of a specific drug can then be beneficial to reduce side effects.

## Study objective

The main objective of this study is to investigate whether kidney transplant recipient suffering from a tacrolimus-induced tremor can benefit from switching from conventional tacrolimus to LCPT, a new extended release preparation of

tacrolimus (Envarsus®), or cyclosporine (Neoral®).

## Study design

Investigator-driven, open-label, prospective, randomized controlled trial.

#### Intervention

At baseline, participants will undergo pharmacokinetic testing, a quality of life assessment and a computerized neuropsychological test battery (the Amsterdam Neuropsychological Tasks or ANT battery). The ANT battery consists of several computerized tests measuring the basal cognitive processes that regulate daily functioning, including two modules that are well-suited to quantify tremors. At one month, participants will be randomized to (1) continuing their current tacrolimus preparation, (2) switching to Envarsus®, or (3) switching to Neoral®. After one month, the tests will be repeated. Then, the participants in the control group will also be switched to Envarsus®. After one month, all tests will again be repeated.

## Study burden and risks

Participants will be asked to undergo three test cycles. Each cycle is expected to last 8 hours, so that the total required time for completing the study will amount to 24 hours over a period of three months. In each cycle, participants will give at least four 5ml blood samples over a period of six hours for pharmacokinetic testing (more if drug levels are out of range), fill out two questionnaires and undergo a 45-minute neuropsychological assessment. Participating in this study can be beneficial because it may result in a diminished tremor and an improved neurocognitive function. In addition, participants will receive 50 euros per cycle plus compensation for travel expenses and the option of choosing the drug that suited them best at the end of the study.

# **Contacts**

#### **Public**

Academisch Medisch Centrum

Meibergdreef 9 Amsterdam 1105 AZ NL

#### Scientific

Academisch Medisch Centrum

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# **Trial sites**

## **Listed location countries**

**Netherlands** 

# **Eligibility criteria**

## Age

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

## **Inclusion criteria**

Age between 18-70 years
Recipient of a kidney transplantation more than one year ago
On a triple-low-dose immunosuppressive regimen including tacrolimus
Suffering from a tremor
Stable renal function
Able to give informed consent

## **Exclusion criteria**

Not being able to understand the instructions for the tests Chronic diarrhea
Use of protease inhibitors, azoles or sedatives
Thyroid dysfunction
Active psychiatric or neurologic disease
Use of psychotropic drugs, antiepileptics or B2-agonists
Excessive use of caffeine (more than 5 I.E. per day)
Excessive use of alcohol (more than 2 I.E. per day)

# Study design

# **Design**

Study phase: 4

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Open (masking not used)

Control: Active

Primary purpose: Treatment

## Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 17-08-2016

Enrollment: 66

Type: Actual

## Medical products/devices used

Product type: Medicine

Brand name: Advagraf

Generic name: tacrolimus

Registration: Yes - NL intended use

Product type: Medicine

Brand name: Envarsus

Generic name: tacrolimus

Registration: Yes - NL intended use

Product type: Medicine

Brand name: Neoral

Generic name: cyclosporine

Registration: Yes - NL intended use

Product type: Medicine

Brand name: Prograft

Generic name: tacrolimus

Registration: Yes - NL intended use

# **Ethics review**

Approved WMO

Date: 09-06-2016

Application type: First submission

Review commission: METC Amsterdam UMC

Approved WMO

Date: 15-05-2017

Application type: First submission

Review commission: METC Amsterdam UMC

# **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 EUCTR2015-005462-31-NL

CCMO NL55948.018.15