# Human Exposure to RhinOvirus \* Effect of a plant-based polysaccharide food supplement on upper respiratory symptoms

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This study is designed to test if consumption of a vegetable extract as a food ingredient improves resistance to an experimental respiratory tract infection with RV16 in healthy volunteers. Primary Objective: \* To test and quantify the effect of the...

Ethical review Approved WMO

**Status** Recruitment stopped **Health condition type** Viral infectious disorders

Study type Interventional

## **Summary**

#### ID

NL-OMON44493

#### **Source**

**ToetsingOnline** 

**Brief title** 

**HERO Reborn** 

#### **Condition**

- Viral infectious disorders
- Respiratory tract infections

#### **Synonym**

acute rhinitis, common cold

#### **Research involving**

Human

### **Sponsors and support**

Primary sponsor: Nutrileads B.V.

Source(s) of monetary or material Support: Nutrileads BV en Europese Unie (EFRO

subsidie)

#### Intervention

**Keyword:** anti-viral response, common cold, rhinovirus infection, Vegetable extract

#### **Outcome measures**

#### **Primary outcome**

st Severity of symptoms using validated WURSS-21 questionnaire on day -1 to 13

following experimental infection

\* Viral titer in nasal lavage

#### **Secondary outcome**

- \* Duration of infection based on combination of RV16 viral titers, symptoms and elevated IL8 in nasal lavage
- \* Change in IL-8 and IP10 levels in nasal lavage
- \* Increase in phagocyte activity between baseline and day before infection

# **Study description**

#### **Background summary**

Common cold symptoms are unpleasant, dangerous for people with a compromised immune system, and have a significant economic impact, accounting for millions of workdays missed annually, worldwide. Enhancing resistance to common cold infections will generally contribute to wellbeing. In recent proof of concept studies, a polysaccharide component of certain food crops has been shown to modulate immune response in a way that suggests it may be effective in supporting protection against infections. The promising outcomes of these earlier studies need to be confirmed in a randomized controlled trial, testing the effect on symptoms in otherwise healthy subjects.

#### Study objective

This study is designed to test if consumption of a vegetable extract as a food ingredient improves resistance to an experimental respiratory tract infection with RV16 in healthy volunteers.

#### Primary Objective:

\* To test and quantify the effect of the vegetable extract on reduction of severity of common cold symptoms after experimental infection with RV16, as assessed by the WURSS-21 questionnaire over 13 days following infection \* To test and quantify the effect of a vegetable extract on reduction of viral load in nasal lavage, after experimental infection with RV16, over 13 days following infection

#### Secondary Objectives:

- \* To test the effect of a vegetable extract on duration of infection based on a combination of RV16 viral titers, symptoms and elevated IL-8 in nasal lavage
- \* To test the effect of a vegetable extract on change in IL-8 and IP10 levels and cell differentials in nasal lavage over 13 days following infection, compared to pre-infection levels
- \* To test the effect of a vegetable extract on the increase in phagocyte activity between baseline and the day before experimental infection

#### Study design

Randomized, double-blind, placebo-controlled trial with three parallel arms, in which all groups will be challenged with a low dose of human rhinovirus-16 (HRV-16).

#### Intervention

Three groups: placebo low dose of a vegetable extract high dose of a vegetable extract

#### Study burden and risks

Study participants will have no direct benefit from participating. The main burden for participants is that they will suffer from a common cold episode and will have to visit the AMC hospital 10 times over a period of 15 weeks. The RV16 infection protocol has often been used to challenge healthy individuals, mild (allergic) asthmatics and COPD patients. The rationale for using RV16 is that this rhinovirus strain causes mild common cold symptoms as compared to other rhinovirus strains. In addition, RV16 is not considered to be very contagious. No adverse effects of using RV16 in healthy individuals and patients have been reported.

Blood samples will be collected 8 times; a nasal lavage will be performed on 6 occasions. Questionnaires have to be completed on 21 days during the study. Participants will experience the physical discomfort associated with a common cold episode. The health risks associated with participation are considered to be minimal.

## **Contacts**

#### **Public**

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## **Trial sites**

#### **Listed location countries**

**Netherlands** 

# **Eligibility criteria**

#### Age

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

#### Inclusion criteria

Healthy adults (men and women) from the general population

- 1. Age \*18 and \*65 years of age
- 2. Sero-negative (\* 1:6) to HRV-16 at screening
- 3. Body mass index (BMI) \* 18.5 and \* 30.0 kg/m2
- 4. Healthy (assessed by study physician, based on medical history and used medication as
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provided by the participant)

- 5. Willingness to comply with study procedures
- 6. Having a GP
- 7. Signed informed consent

#### **Exclusion criteria**

- \* History of hay fever and rhino-sinusitis
- \* History of asthma or COPD
- \* History of food allergy or food intolerance
- \* Underlying pulmonary, cardiovascular or auto-immune disease Use of statins
- \* History of significant medical or psychiatric disease, at the discretion of the study physician
- \* Pregnant or intending to become pregnant during the study period and lactating women
- \* Frequent contact with elderly, immune deficient or severe asthma/COPD patients or children under the age of 2 years during the course of the trial
- \* NutriLeads or AMC employee of departments of Respiratory Medicine and Experimental Immunology
- \* Current or ex-smoker (last half year)
- \* Consumption of > 14 alcoholic units in a typical week (females) or > 21 alcoholic units in a typical week (males)
- \* Strenuous exercise (> 10 hrs/wk)
- \* Any other medication at the discretion of the study physician
- \* Recreational drug abuse
- \* Language limitations regarding interviews and guestionnaires
- \* Volunteers who share the same house(hold)
- \* Currently participating in another clinical trial
- \* Reported, unexplainable weight loss or gain >3 kg in the last month before screening visit
- \* Night shift worker

# Study design

## Design

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Double blinded (masking used)

Control: Placebo

Primary purpose: Prevention

#### Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 02-11-2017

Enrollment: 168

Type: Actual

# **Ethics review**

Approved WMO

Date: 19-10-2017

Application type: First submission

Review commission: METC Amsterdam UMC

Approved WMO

Date: 19-12-2017

Application type: Amendment

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

CCMO NL62623.018.17