

# Evaluation of dysphagia in inclusion body myositis and oculopharyngeal muscle dystrophy by combining novel ultrasound and real-time MRI

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<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	Muscle disorders
<b>Study type</b>	Observational invasive

## Summary

### ID

NL-OMON45446

### Source

ToetsingOnline

### Brief title

RT-MRI and ultrasound evaluation of dysphagia in IBM and OPMD

### Condition

- Muscle disorders
- Neuromuscular disorders

### Synonym

dysphagia, swallowing disorder

### Research involving

Human

## Sponsors and support

**Primary sponsor:** Neurologie

**Source(s) of monetary or material Support:** AFM (association française contre les myopathies)

## Intervention

**Keyword:** diagnosis, dysphagia, inclusion body myositis, oculopharyngeal muscle dystrophy

## Outcome measures

### Primary outcome

- A. to establish the pattern of weakness in a predefined set of muscles in patients with IBM with and without clinical evidence of dysphagia.
- B. to compare the findings in dysphagic IBM patients with another neuromuscular disease that causes dysphagia: OPMD.
- C. to evaluate the use of novel diagnostic tools in dysphagia, to develop a diagnostic protocol in neuromuscular diseases to evaluate dysphagia with minimal invasive techniques.

### Secondary outcome

- A. to promote international collaboration to expand the existing cohorts of patients affected by these relatively rare diseases.
- B. the creation of mechanism-based hypothesis on new treatment strategies in dysphagia in IBM and OPMD, which might give rise to a follow-up trial.
- C. to investigate various outcome measures in IBM with the ultimate goal to find a sensitive, validated and relevant dysphagia outcome measure, with a high sensitivity to change, that can be used in upcoming therapeutic trials.

# Study description

## Background summary

Sporadic inclusion body myositis (IBM) is the most frequently occurring acquired myopathy in patients aged over 50 years. The disease is characterised by slowly progressive asymmetric muscle weakness, especially the finger flexors and the quadriceps are affected early in the disease course. Dysphagia is present in a large subset of patients and can even precede the onset of generalized weakness with a few years. Oculopharyngeal muscular dystrophy (OPMD) is another neuromuscular disease that equally affects patients at and advanced age. The most important clinical characteristics are proximal weakness, ptosis and dysphagia. Dysphagia can lead to various problems, like dietary changes, pneumonia and malnutrition. In both diseases, the cause and pathophysiology of dysphagia i.e. the pattern of affected muscles is unknown. Up to recently, the analysis of dysphagia was restricted to clinical observation, combined with videofluoroscopy and oesophageal manometry. These techniques have some limitations, for example, soft tissues are not optimally imaged and patients perceive this kind of investigations as burdensome.

## Study objective

In order to develop treatment strategies guided by the key mechanisms that play a role in dysphagia in OPMD and IBM, the exact pattern of weakness should be identified. The current protocol allows us to test the feasibility of two non-invasive techniques, quantitative muscle ultrasound (QMUS) and real-time magnetic resonance imaging (RT-MRI), to assess swallowing in detail. This can lead to the development of new diagnostic protocols and it will contribute to the development of validated outcome measures.

## Study design

The included patients will undergo a series of testing (physical examination, questionnaire, swallowing tests, quantitative muscle ultrasound, real-time MRI).

## Study burden and risks

The risks in this protocol are related to RT-MRI: swallowing of a small quantity of fluids imposes a risk of aspiration of fluids in patients with severe dysphagia. Furthermore, a first claustrophobic reaction could occur during the MRI-scan. The scan will take place in Göttingen, which means the participants will have to travel between the study sites. These risks and burdens are limited, as the expected results of the study (especially the development of non-invasive assessment of swallowing) will be of immediate

benefit to the patients.

## 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

patients diagnosed with IBM based on the ENMC 2011 criteria \*clinicopathologically\* or \*clinically defined\* IBM AND patients diagnosed with OPMD - genetic confirmation (PABPN1 mutation present) who can also be participating in the \*Projet Stratégique eOPMD: Pathophysiology and therapeutic approaches in Oculopharyngeal Muscular Dystrophy\*

### Exclusion criteria

presence of diseases that might significantly influence the results of the current study, including: another neuromuscular disorder other than IBM/OPMD, another degenerative disease that might impede swallowing, significant intellectual impairment which impedes the performance of testing; contraindications to undergo MRI-scanning: the presence of metal (including metal splinters in the eye for example), the presence of electronic devices (e.g. a pacemaker), old clipping of cerebral vessels, body weight >140kg; a known pineapple-juice intolerance of allergy.

## Study design

### Design

**Study type:** Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Basic science

### Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 20-11-2017

Enrollment: 20

Type: Actual

## Ethics review

Approved WMO

Date: 24-04-2017

Application type: First submission

Review commission: CMO regio Arnhem-Nijmegen (Nijmegen)

Approved WMO

Date: 25-07-2018

Application type: Amendment

Review commission: CMO regio Arnhem-Nijmegen (Nijmegen)

## 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	NL60136.091.17