ClinicalTrials.gov Protocol and Results Registration System (PRS) Receipt
Release Date: 11/30/2010

ClinicalTrials.gov ID: NCT00385593

Study Identification

Unique Protocol ID:	D5890L00010
Brief Title:	Symbicort Single Inhaler Therapy vs Conventional Best Practice for the Treatment of Persistent Asthma in Adults
Official Title:	A Comparison of Symbicort Single Inhaler Therapy (Symbicort Turbuhaler 160/4.5 Micrograms, 1 Inhalation b.i.d. Plus as Needed) and Conventional Best Practice for the Treatment of Persistent Asthma in Adults - a 26-week, Randomised, Open-label, Parallel-group, Multicentre Study. Study SPAIN
Secondary IDs:	2005-005974-64 SPAIN

Study Status

Record Verification:	November 2010
Overall Status:	Terminated
Study Start:	September 2006
Primary Completion:	
Study Completion:	October 2008 [Actual]

Sponsor/Collaborators

Sponsor:	AstraZeneca
Responsible Party:	
Collaborators:	

Oversight

FDA Regulated?:	
IND/IDE Protocol?:	No
Review Board:	Approval Status: Approved Approval Number: 2005-005974-64 Board Name: CEIC Regional de la CCAA de Madrid Board Affiliation: Agencia Española del Medicamento y Productos Sanitarios Phone: +34 91 5 86 71 28 Email: comite.regional@salud.madrid.org
Data Monitoring?:	
Plan to Share Data?:	
Oversight Authorities:	Spain: Spanish Agency of Medicines

Study Description

Brief Summary:	This study is intended to extend the knowledge of Symbicort Single Inhaler Therapy into a more general setting in order to assess the real-life impact of introducing this new treatment concept. The study will compare the Symbicort Single Inhaler Therapy concept with a conventional stepwise treatment regimen according to the investigator's judgement in patients who present with symptoms on inhaled glucocorticosteroids (GCS) treatment or who require and are already on treatment with a combination of inhaled and long-acting B2 agonists (LABA).
Detailed Description:	

Conditions

Conditions:	ASTHMA, BRONCHIAL
Keywords:	

Study Design

Study Type:	Interventional
Primary Purpose:	Treatment
Study Phase:	Phase 3
Intervention Model:	Parallel Assignment
Number of Arms:	

Masking:	Open Label
Allocation:	Randomized
Endpoint Classification:	Efficacy Study
Enrollment:	654 [Actual]

Arms and Interventions

Intervention Details:
Drug: Symbicort (budesonide/formoterol) Turbuhaler
Drug: Conventional treatment

Outcome Measures

[See Results Section.]

Eligibility

Minimum Age:	18 Years
Maximum Age:	
Gender:	Both
Accepts Healthy Volunteers?:	No

Criteria: Inclusion Criteria:

- Minimum of 3 months history of asthma, diagnosed according to the American Thoracic Society (ATS) definition (9).
- Prescribed inhaled GCS at a dose of 400µg/day of budesonide (or equivalents)and within the approved label for the relevant drug during the last 3 months prior to Visit 1.
- Either daily maintenance treatment with both inhaled GCS and LABA or daily treatment with inhaled GCS alone (i.e. without LABA)
- A history of suboptimal asthma control the month prior to enrolment as judged by the investigator
- Use of ≥3 inhalations of as needed medication for symptom relief during the last 7 days before enrolment

Exclusion Criteria:

- Previous treatment with Symbicort Single Inhaler;
- Use of any b-blocking agent, including eye-drops and oral GCS as maintenance treatment.
- Known or suspected hypersensitivity to study therapy or excipients.
- A history of smoking ≥ 10 pack years.
- Asthma exacerbation requiring change in asthma treatment during the last 14 days prior to or at Visit 1.

Contacts/Locations

Study Officials: Carlos Barcina, MD
Study Director
AstraZeneca

Locations: Spain
Research Site
A Coruna, Spain

Research Site
Alagon, Spain

Research Site
Alicante, Spain

Research Site
Almoradi, Spain

Research Site
Barcelona, Spain

Research Site
Burgos, Spain

Research Site
Cadiz, Spain

Research Site
Caravaca, Spain

Research Site
Cartagena, Spain

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Cordoba, Spain

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Coslada, Spain

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Dos Hermanas, Spain

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Elche, Spain

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Fuencarral, Spain

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Fuenlabrada, Spain

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Galdacano, Spain

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Gallur, Spain

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Idiazabal, Spain

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Jaen, Spain

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Lugo, Spain

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Madrid, Spain

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Malaga, Spain

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Mataro, Spain

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Oviedo, Spain

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Pamplona, Spain

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Pinto, Spain

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Pozuelo de Alarcon, Spain

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Sagunto, Spain

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Salamanca, Spain

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San Juan, Spain

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Valladolid, Spain

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Vigo, Spain

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Viladecans, Spain

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Vilanova, Spain

Research Site
Villabona, Spain

Research Site
Villanueva de la Canada, Spain

Research Site
Vitoria, Spain

Research Site
Zaragoza, Spain

References

Citations:

Links:

Study Data/Documents:

Study Results

Participant Flow

Recruitment Details	654

Reporting Groups

	Description
SMART	Symbicort Turbuhaler 160/4.5µg, 1 inhalation b.i.d. + as needed (in response to symptoms)
Conv. Best Practice	Conventional best practice, active stepwise individualized treatment according to international asthma treatment guidelines (GINA guidelines)); stepwise treatment according to the investigator's clinical judgement.

Overall Study

	SMART	Conv. Best Practice
Started	328	326
Completed	270	289
Not Completed	58	37
Adverse Event	3	2
Withdrawal by Subject	17	7
Lost to Follow-up	12	8
Protocol Violation	7	4
Several reasons	17	15
Incorrect inclusion	2	0
Incorrect randomization	0	1

Baseline Characteristics

Reporting Groups

	Description
SMART	Symbicort Turbuhaler 160/4.5µg, 1 inhalation b.i.d. + as needed (in response to symptoms)
Conv. Best Practice	Conventional best practice, active stepwise individualized treatment according to international asthma treatment guidelines (GINA guidelines)); stepwise treatment according to the investigator's clinical judgement.

Baseline Measures

	SMART	Conv. Best Practice	Total
Number of Participants	328	326	654
Age, Continuous [units: Years] Mean (Standard Deviation)	43.7 (16.4)	44.3 (16.5)	44.0 (16.5)

	SMART	Conv. Best Practice	Total
Gender, Male/Female [units: Participants]			
Female	218	202	420
Male	110	124	234

Outcome Measures

1. Primary Outcome Measure:

Measure Title	Time to First Severe Asthma Exacerbation
Measure Description	Severe asthma exacerbation is defined as deterioration in asthma leading to at least one of Hospitalization/Emergency room (or equivalent) treatment due to asthma or Oral Glucocorticosteroids (GCS) treatment for at least 3 days.
Time Frame	Baseline up to 6 months
Safety Issue?	No

Analysis Population Description
[Not Specified]

Reporting Groups

	Description
SMART	Symbicort Turbuhaler 160/4.5µg, 1 inhalation b.i.d. + as needed (in response to symptoms)
Conv. Best Practice	Conventional best practice, active stepwise individualized treatment according to international asthma treatment guidelines (GINA guidelines)); stepwise treatment according to the investigator's clinical judgement.

Measured Values

	SMART	Conv. Best Practice
Number of Participants Analyzed	328	326
Time to First Severe Asthma Exacerbation [units: Days] Mean (Standard Deviation)	174.39 (1.76)	178.97 (1.86)

2. Secondary Outcome Measure:

Measure Title	Total Number of Severe Exacerbations

Measure Description	Severe asthma exacerbation is defined as deterioration in asthma leading to at least one of Hospitalization/Emergency room (or equivalent) treatment due to asthma or Oral (GCS) treatment for at least 3 days.
Time Frame	Baseline up to 6 months
Safety Issue?	No

Analysis Population Description
[Not Specified]

Reporting Groups

	Description
SMART	Symbicort Turbuhaler 160/4.5µg, 1 inhalation b.i.d. + as needed (in response to symptoms)
Conv. Best Practice	Conventional best practice, active stepwise individualized treatment according to international asthma treatment guidelines (GINA guidelines)); stepwise treatment according to the investigator's clinical judgement.

Measured Values

	SMART	Conv. Best Practice
Number of Participants Analyzed	328	326
Total Number of Severe Exacerbations [units: Exacerbations]	24	34

3. Secondary Outcome Measure:

Measure Title	Mean Use of as Needed Medication
Measure Description	Mean use of as needed medication during the treatment period
Time Frame	Baseline up to 6 months
Safety Issue?	No

Analysis Population Description
[Not Specified]

Reporting Groups

	Description
SMART	Symbicort Turbuhaler 160/4.5µg, 1 inhalation b.i.d. + as needed (in response to symptoms)

	Description
Conv. Best Practice	Conventional best practice, active stepwise individualized treatment according to international asthma treatment guidelines (GINA guidelines)); stepwise treatment according to the investigator's clinical judgement.

Measured Values

	SMART	Conv. Best Practice
Number of Participants Analyzed	308	320
Mean Use of as Needed Medication [units: Inhalations] Mean (Full Range)	1.03 (0 to 6)	1.02 (0 to 9)

4. Secondary Outcome Measure:

Measure Title	Use of Inhaled Steroids
Measure Description	Mean micrograms/day of inhaled steroids (beclomethasone dipropionate equivalents)
Time Frame	Baseline up to 6 months
Safety Issue?	No

Analysis Population Description
[Not Specified]

Reporting Groups

	Description
SMART	Symbicort Turbuhaler 160/4.5µg, 1 inhalation b.i.d. + as needed (in response to symptoms)
Conv. Best Practice	Conventional best practice, active stepwise individualized treatment according to international asthma treatment guidelines (GINA guidelines)); stepwise treatment according to the investigator's clinical judgement.

Measured Values

	SMART	Conv. Best Practice
Number of Participants Analyzed	328	326
Use of Inhaled Steroids [units: micrograms] Mean (Full Range)	799 (250 to 2000)	1184 (200 to 4000)

5. Secondary Outcome Measure:

Measure Title	Change in the Asthma Control Questionnaire(ACQ) Score
Measure Description	The ACQ is a 7-point scale with scores ranging from 0 (very well controlled) to 6 (very badly controlled)
Time Frame	Daily 14 days prior to each of visit 2-4
Safety Issue?	No

Analysis Population Description
[Not Specified]

Reporting Groups

	Description
SMART	Symbicort Turbuhaler 160/4.5µg, 1 inhalation b.i.d. + as needed (in response to symptoms)
Conv. Best Practice	Conventional best practice, active stepwise individualized treatment according to international asthma treatment guidelines (GINA guidelines)); stepwise treatment according to the investigator's clinical judgement.

Measured Values

	SMART	Conv. Best Practice
Number of Participants Analyzed	301	306
Change in the Asthma Control Questionnaire(ACQ) Score [units: Scores on a scale] Mean (Full Range)	0.99 (0 to 4)	1.08 (0 to 3.4)

6. Secondary Outcome Measure:

Measure Title	Peak Expiratory Flow (PEF)
Measure Description	Peak expiratory flow (PEF)
Time Frame	6 months (end of the study)
Safety Issue?	No

Analysis Population Description
[Not Specified]

Reporting Groups

	Description
SMART	Symbicort Turbuhaler 160/4.5µg, 1 inhalation b.i.d. + as needed (in response to symptoms)
Conv. Best Practice	Conventional best practice, active stepwise individualized treatment according to international asthma treatment guidelines (GINA guidelines)); stepwise treatment according to the investigator's clinical judgement.

Measured Values

	SMART	Conv. Best Practice
Number of Participants Analyzed	285	299
Peak Expiratory Flow (PEF) [units: L/min] Mean (Full Range)	405.9 (110 to 900)	400.6 (140 to 900)

Reported Adverse Events

Time Frame	[Not specified]
Additional Description	The safety analysis set included 652 patients, because two patients in the Symbicort SMART arm were excluded from the safety analysis because they didn't take any dose of medication

Reporting Groups

	Description
SMART	Symbicort Turbuhaler 160/4.5µg, 1 inhalation b.i.d. + as needed (in response to symptoms)
Conv. Best Practice	Conventional best practice, active stepwise individualized treatment according to international asthma treatment guidelines (GINA guidelines)); stepwise treatment according to the investigator's clinical judgement.

Serious Adverse Events

	SMART	Conv. Best Practice
	Affected/At Risk (%)	Affected/At Risk (%)
Total	10/326 (3.07%)	5/326 (1.53%)
Congenital, familial and genetic disorders		
Gene Mutation [A] †	1/326 (0.31%)	0/326 (0%)

	SMART	Conv. Best Practice
	Affected/At Risk (%)	Affected/At Risk (%)
Eye disorders		
Cataract [A] †	1/326 (0.31%)	0/326 (0%)
Gastrointestinal disorders		
Diarrhoea [A] †	1/326 (0.31%)	0/326 (0%)
Gastroenteritis [A] †	1/326 (0.31%)	0/326 (0%)
Irritable Bowel Syndrome [A] †	1/326 (0.31%)	0/326 (0%)
General disorders		
Pyrexia [A] †	0/326 (0%)	1/326 (0.31%)
Infections and infestations		
Bursitis Infective [A] †	0/326 (0%)	1/326 (0.31%)
Pneumonia [A] †	1/326 (0.31%)	1/326 (0.31%)
Respiratory Tract Infection [A] †	1/326 (0.31%)	0/326 (0%)
Musculoskeletal and connective tissue disorders		
Epicondylitis [A] †	1/326 (0.31%)	0/326 (0%)
Neoplasms benign, malignant and unspecified (incl cysts and polyps)		
Breast Cancer [A] †	0/326 (0%)	1/326 (0.31%)
Medullary thyroid cancer [A] †	1/326 (0.31%)	0/326 (0%)
Uterine Leiomyoma [A] †	1/326 (0.31%)	0/326 (0%)
Vascular disorders		
Cerebral Haemorrhage [A] †	0/326 (0%)	1/326 (0.31%)

† Indicates events were collected by systematic assessment.
A Term from vocabulary, MedDRA 10.0

Other Adverse Events

Frequency Threshold Above Which Other Adverse Events are Reported: 0%

	SMART	Conv. Best Practice
	Affected/At Risk (%)	Affected/At Risk (%)
Total	0/326 (0%)	0/326 (0%)

Limitations and Caveats

The study was prematurely stopped, because it was not possible to recruit the sample size required in the period of time established.

More Information

Certain Agreements:

Principal Investigators are NOT employed by the organization sponsoring the study.

There is NOT an agreement between the Principal Investigator and the Sponsor (or its agents) that restricts the PI's rights to discuss or publish trial results after the trial is completed.

Results Point of Contact:

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