



## Clinical trial results: Does allopurinol reduce right ventricular mass in lung disease associated pulmonary hypertension?

### Summary

EudraCT number	2014-002305-38
Trial protocol	GB
Global end of trial date	16 June 2017

### Results information

Result version number	v2 (current)
This version publication date	02 November 2018
First version publication date	09 June 2018
Version creation reason	<ul style="list-style-type: none"><li>• Correction of full data set</li><li>Noticed mistake in the results of the primary outcome</li></ul>

### Trial information

#### Trial identification

Sponsor protocol code	2013CV11
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#### Additional study identifiers

ISRCTN number	ISRCTN11081180
ClinicalTrials.gov id (NCT number)	-
WHO universal trial number (UTN)	-
Other trial identifiers	Sponsor Reference : 2013CV11

Notes:

#### Sponsors

Sponsor organisation name	University of Dundee - NHS Tayside
Sponsor organisation address	George Pirie Way, Dundee, United Kingdom,
Public contact	Stephen McSwiggan, University of Dundee, Tayside Clinical Trials Unit, 0044 1382383233, s.j.mcswiggan@dundee.ac.uk
Scientific contact	Stephen McSwiggan, University of Dundee, Tayside Clinical Trials Unit, 0044 1382383233, s.j.mcswiggan@dundee.ac.uk

Notes:

#### Paediatric regulatory details

Is trial part of an agreed paediatric investigation plan (PIP)	No
Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial?	No
Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial?	No

Notes:

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**Results analysis stage**

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Analysis stage	Final
Date of interim/final analysis	22 November 2017
Is this the analysis of the primary completion data?	Yes
Primary completion date	16 June 2017
Global end of trial reached?	Yes
Global end of trial date	16 June 2017
Was the trial ended prematurely?	No

Notes:

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**General information about the trial**

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Main objective of the trial:

The primary objective will be to see if Allopurinol can improve right ventricular hypertrophy in patients with pulmonary hypertension associated with COPD or interstitial lung disease(ILD). This will be done by measuring the size of the right side of the heart muscle with an MRI scan before and after one years of treatment with allopurinol or placebo.

Protection of trial subjects:

All adverse events (AEs) and serious adverse events (SAEs) will be recorded from the time a participant consents to join the study until the last study visit. Participants with unresolved AEs at the last study visit will be followed up until resolution or 30 days after last patient, last visit (LPLV), whichever is sooner. SUSARS will be followed until resolution.

Background therapy:

All the patients currently prescribed medication for their lung disease will continue as normal.

Evidence for comparator:

A possible new way to treat lung disease related pulmonary hypertension (PH) is Allopurinol (Xanthine Oxidase Inhibitor) which decreases both uric acid and oxidative stress. The case for allopurinol is based on several different factors. Firstly, in primary pulmonary hypertension serum uric acid independently predicts mortality. Furthermore, when vasodilator therapy is given, the change in urate correlates very well ( $r= 0.68$   $p<0.0011$ ) with the change in total pulmonary resistance. This accords well with experimental evidence that uric acid decreases NO production in cultured pulmonary artery endothelial cells. Secondly, both hypoxia and tobacco smoke are known from many studies to up-regulate xanthine oxidase and therefore to increase its production of both uric acid and oxidative stress. Thirdly, and most importantly, there are five experimental studies all showing that allopurinol inhibits hypoxia induced pulmonary vasoconstriction, pulmonary hypertension, endothelial dysfunction and vascular remodelling. Fourthly, there is one human study where allopurinol improved endothelial function in hypoxic patients. However, this study looked at the brachial artery. Indeed, there is a wealth of data that allopurinol improves systemic endothelial function in many other diseases characterised by oxidative stress. Although this is supportive to some extent, the pulmonary vasculature is clearly very different from the systemic vasculature. Fifthly, allopurinol profoundly reduces oxidative stress (OS) and OS is known to directly promote RV hypertrophy as well as cause pulmonary vascular abnormalities. There is a sixth, albeit, fairly speculative further reason for studying allopurinol in lung disease. Allopurinol blocks an oxidase enzyme which "wastes" molecular oxygen by converting it into oxygen free radicals. Therefore in theory blocking this oxidase should boost tissue oxygen.

Actual start date of recruitment	01 February 2015
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

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**Population of trial subjects**

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**Subjects enrolled per country**

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Country: Number of subjects enrolled	United Kingdom: 72
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Worldwide total number of subjects	72
EEA total number of subjects	72

Notes:

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**Subjects enrolled per age group**

In utero	0
Preterm newborn - gestational age < 37 wk	0
Newborns (0-27 days)	0
Infants and toddlers (28 days-23 months)	0
Children (2-11 years)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	9
From 65 to 84 years	63
85 years and over	0

## Subject disposition

### Recruitment

Recruitment details:

Of 191 patients screened, 72 were randomised, and 66 completed per protocol.

### Pre-assignment

Screening details:

Aged 18 years or over, previously diagnosed with COPD or ILD, screening echocardiography based diagnosis of PH, stable lung disease medication for at least two weeks prior to consent, no contraindications to MRI, no allergy or intolerance to allopurinol, LVEF > 45% on echocardiography, CKD class 3B or greater, severe hepatic disease

### Period 1

Period 1 title	Overall trial (overall period)
Is this the baseline period?	Yes
Allocation method	Randomised - controlled
Blinding used	Double blind
Roles blinded	Subject, Investigator, Monitor, Data analyst

Blinding implementation details:

Double blind medication (allopurinol or placebo) will be prepared, packaged and labelled by Tayside Pharmaceuticals.

Randomisation was carried out by Tayside Pharmaceuticals using block randomisation in twelve groups of six (with three active/three placebo in each block). They used a validated randomisation program and securely backed up both the randomisation seed and the randomisation allocation. A copy of the allocation was supplied to the Clinical Trials Pharmacy at Ninewells Hospital.

### Arms

Are arms mutually exclusive?	Yes
<b>Arm title</b>	Placebo

Arm description:

Received placebo tablets

Arm type	Placebo
Investigational medicinal product name	Placebo
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Tablet
Routes of administration	Oral use

Dosage and administration details:

100mg once daily for 2 weeks, then 300mg once daily for 4 weeks and then 300mg twice daily for 10.5 weeks

<b>Arm title</b>	Allopurinol
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Arm description:

Received allopurinol tablets

Arm type	Active comparator
Investigational medicinal product name	Allopurinol
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Tablet
Routes of administration	Oral use

Dosage and administration details:

100mg once daily for 2 weeks, 300mg once daily for 4 weeks and then 300mg twice daily for 10.5 weeks

<b>Number of subjects in period 1</b>	Placebo	Allopurinol
Started	36	36
Completed	32	31
Not completed	4	5
Adverse event, serious fatal	1	-
Physician decision	1	-
Consent withdrawn by subject	1	3
Adverse event, non-fatal	1	2

## Baseline characteristics

### Reporting groups

Reporting group title	Overall trial
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Reporting group description: -

Reporting group values	Overall trial	Total	
Number of subjects	72	72	
Age categorical			
Units: Subjects			
Adults (18-64 years)	9	9	
From 65-84 years	63	63	
Age continuous			
Units: years			
arithmetic mean	71		
standard deviation	± 6	-	
Gender categorical			
Units: Subjects			
Female	28	28	
Male	44	44	
Long-term oxygen use			
Units: Subjects			
Yes	5	5	
No	67	67	
Chronic lung disease			
Units: Subjects			
COPD	67	67	
ILD	5	5	
BMI			
Units: kg/m <sup>2</sup>			
arithmetic mean	29		
standard deviation	± 5	-	
Smoking history			
Units: Pack-years			
arithmetic mean	48.6		
standard deviation	± 27.8	-	
FEV1			
Units: % predicted			
arithmetic mean	60		
standard deviation	± 21	-	
Pulmonary acceleration time			
Units: ms			
arithmetic mean	96.0		
standard deviation	± 10.9	-	

## End points

### End points reporting groups

Reporting group title	Placebo
Reporting group description:	
Received placebo tablets	
Reporting group title	Allopurinol
Reporting group description:	
Received allopurinol tablets	

### Primary: Change in right ventricular mass (RVM)

End point title	Change in right ventricular mass (RVM)
End point description:	
End point type	Primary
End point timeframe:	
12 months	

End point values	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: gram(s)				
arithmetic mean (standard error)	0.97 ( $\pm$ 1.20)	1.85 ( $\pm$ 1.56)		

### Statistical analyses

Statistical analysis title	Intention-to-treat analysis
Comparison groups	Allopurinol v Placebo
Number of subjects included in analysis	71
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.66
Method	t-test, 2-sided

### Primary: Change in right ventricular mass index (RVMI)

End point title	Change in right ventricular mass index (RVMI)
End point description:	
End point type	Primary

End point timeframe:  
12 months

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: gram(s)/square meter				
arithmetic mean (standard error)	0.50 ( $\pm$ 0.60)	0.70 ( $\pm$ 0.75)		

### Statistical analyses

<b>Statistical analysis title</b>	Intention-to-treat analysis
Comparison groups	Placebo v Allopurinol
Number of subjects included in analysis	71
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.83
Method	t-test, 2-sided

### Secondary: Change in left ventricular mass (LVM)

End point title	Change in left ventricular mass (LVM)
End point description:	
End point type	Secondary
End point timeframe:	12 months

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: gram(s)				
arithmetic mean (standard error)	-1.9 ( $\pm$ 2.8)	0.8 ( $\pm$ 3.2)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in left ventricular mass index (LVMI)

End point title	Change in left ventricular mass index (LVMI)
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

End point values	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: gram(s)/square meter				
arithmetic mean (standard error)	-1.1 ( $\pm$ 1.2)	0.1 ( $\pm$ 1.5)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in SGRQ total score

End point title	Change in SGRQ total score
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

End point values	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: unit(s)				
arithmetic mean (standard error)	-1.3 ( $\pm$ 2.0)	-0.9 ( $\pm$ 1.7)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: BDI-TDI score

End point title	BDI-TDI score
End point description:	
End point type	Secondary

End point timeframe:

12 months

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: unit(s)				
arithmetic mean (standard error)	-0.1 ( $\pm$ 0.9)	-0.7 ( $\pm$ 0.9)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in six minute walk distance (6MWD)

End point title | Change in six minute walk distance (6MWD)

End point description:

End point type | Secondary

End point timeframe:

12 months

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: meter				
arithmetic mean (standard error)	-10.0 ( $\pm$ 12.5)	8.8 ( $\pm$ 10.0)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in NT-ProBNP

End point title | Change in NT-ProBNP

End point description:

End point type | Secondary

End point timeframe:

12 months

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: picogram(s)				
arithmetic mean (standard error)	289.4 ( $\pm$ 213.3)	-87.6 ( $\pm$ 127.2)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in right ventricular end-systolic volume (RVESV)

End point title | Change in right ventricular end-systolic volume (RVESV)

End point description:

End point type | Secondary

End point timeframe:

12 months

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: millilitre(s)				
arithmetic mean (standard error)	3.8 ( $\pm$ 2.8)	4.8 ( $\pm$ 2.5)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in right ventricular end-diastolic volume (RVEDV)

End point title | Change in right ventricular end-diastolic volume (RVEDV)

End point description:

End point type | Secondary

End point timeframe:

12 months

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: millilitre(s)				
arithmetic mean (standard error)	5.6 ( $\pm$ 4.2)	8.8 ( $\pm$ 4.2)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in right ventricular stroke volume (RVSV)

End point title	Change in right ventricular stroke volume (RVSV)
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End point description:

End point type	Secondary
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End point timeframe:

12 months

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: millilitre(s)				
arithmetic mean (standard error)	1.6 ( $\pm$ 2.7)	3.0 ( $\pm$ 3.1)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in right ventricular ejection fraction (RVEF)

End point title	Change in right ventricular ejection fraction (RVEF)
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End point description:

End point type	Secondary
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End point timeframe:

12 months

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: percent				
arithmetic mean (standard error)	1.7 (± 1.7)	1.3 (± 2.4)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in left ventricular end-systolic volume (LVESV)

End point title	Change in left ventricular end-systolic volume (LVESV)			
End point description:				
End point type	Secondary			
End point timeframe:				
12 months				

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: millilitre(s)				
arithmetic mean (standard error)	2.9 (± 2.6)	1.3 (± 2.4)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in left ventricular end-diastolic volume (LVEDV)

End point title	Change in left ventricular end-diastolic volume (LVEDV)			
End point description:				
End point type	Secondary			
End point timeframe:				
12 months				

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: millilitre(s)				
arithmetic mean (standard error)	3.8 (± 4.1)	7.2 (± 4.4)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in left ventricular stroke volume (LVSV)

End point title	Change in left ventricular stroke volume (LVSV)
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: millilitre(s)				
arithmetic mean (standard error)	0.4 (± 2.6)	5.8 (± 3.3)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in left ventricular ejection fraction (LVEF)

End point title	Change in left ventricular ejection fraction (LVEF)
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: percent				
arithmetic mean (standard error)	0.0 ( $\pm$ 1.3)	3.0 ( $\pm$ 2.0)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in SF-36 score for physical functioning

End point title	Change in SF-36 score for physical functioning
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: unit(s)				
arithmetic mean (standard error)	2.9 ( $\pm$ 2.4)	-1.1 ( $\pm$ 3.1)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in SF-36 score for physical role limitations

End point title	Change in SF-36 score for physical role limitations
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: unit(s)				
arithmetic mean (standard error)	8.2 (± 6.4)	1.7 (± 5.7)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in SF-36 score for emotional role limitations

End point title	Change in SF-36 score for emotional role limitations
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: unit(s)				
arithmetic mean (standard error)	1.5 (± 8.5)	-5.8 (± 6.5)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in SF-36 score for energy/fatigue

End point title	Change in SF-36 score for energy/fatigue
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: unit(s)				
arithmetic mean (standard error)	4.5 (± 3.8)	-0.8 (± 2.6)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in SF-36 score for emotional well-being

End point title	Change in SF-36 score for emotional well-being
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: unit(s)				
arithmetic mean (standard error)	0.3 (± 3.1)	4.6 (± 2.8)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in SF-36 score for social functioning

End point title	Change in SF-36 score for social functioning
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: unit(s)				
arithmetic mean (standard error)	-1.6 (± 4.0)	-2.4 (± 3.6)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in SF-36 score for pain

End point title	Change in SF-36 score for pain
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: unit(s)				
arithmetic mean (standard error)	1.1 (± 4.7)	-4.1 (± 3.5)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in SF-36 score for general health

End point title	Change in SF-36 score for general health
End point description:	
End point type	Secondary
End point timeframe:	
12 months	

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: unit(s)				
arithmetic mean (standard error)	0.0 (± 3.3)	0.1 (± 2.7)		

### Statistical analyses

No statistical analyses for this end point

### Secondary: Change in SF-36 score for health change

End point title	Change in SF-36 score for health change
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End point description:

End point type	Secondary
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End point timeframe:

12 months

<b>End point values</b>	Placebo	Allopurinol		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	35	36		
Units: unit(s)				
arithmetic mean (standard error)	7.0 (± 5.3)	5.6 (± 4.0)		

### Statistical analyses

No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

All adverse events were recorded from the time the participants consented to join the study until the last study visit. Participants with unresolved AEs at the last study visit were followed up until resolution or 30 days after last patient, last visit.

Assessment type	Systematic
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### Dictionary used

Dictionary name	MedDRA
Dictionary version	20

### Reporting groups

Reporting group title	Randomised & analysed subjects
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Reporting group description: -

<b>Serious adverse events</b>	Randomised & analysed subjects		
Total subjects affected by serious adverse events			
subjects affected / exposed	18 / 71 (25.35%)		
number of deaths (all causes)	2		
number of deaths resulting from adverse events	2		
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Bladder cancer			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 1		
Transitional cell cancer of renal pelvis and ureter metastatic			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 1		
Prostate cancer			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Injury, poisoning and procedural complications			
Toxicity to various agents			Additional description: Drug-induced syncope

subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Femoral neck fracture			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Vascular disorders			
Orthostatic hypotension			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Arteriosclerosis			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 1		
Cardiac disorders			
Atrial flutter			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Nervous system disorders			
Encephalopathy			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Syncope			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Gastrointestinal disorders			
Abdominal pain			

subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
<b>Diverticulum</b>			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
<b>Oesophageal obstruction</b>			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
<b>Diverticulum intestinal haemorrhagic</b>			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
<b>Abdominal wall haematoma</b>			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
<b>Renal and urinary disorders</b>			
<b>Urinary retention</b>			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
<b>Infections and infestations</b>			
<b>Lower respiratory tract infection</b>			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
<b>Infective exacerbation of chronic obstructive airways disease</b>			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

Pneumonia			
subjects affected / exposed	2 / 71 (2.82%)		
occurrences causally related to treatment / all	0 / 2		
deaths causally related to treatment / all	0 / 0		
Cellulitis			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		
Urinary tract infection			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences causally related to treatment / all	0 / 1		
deaths causally related to treatment / all	0 / 0		

Frequency threshold for reporting non-serious adverse events: 5 %

<b>Non-serious adverse events</b>	Randomised & analysed subjects		
Total subjects affected by non-serious adverse events			
subjects affected / exposed	63 / 71 (88.73%)		
Vascular disorders			
Hypertension			
subjects affected / exposed	6 / 71 (8.45%)		
occurrences (all)	6		
Intermittent claudication			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
General disorders and administration site conditions			
Chest pain			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
Fatigue			
subjects affected / exposed	2 / 71 (2.82%)		
occurrences (all)	2		
Malaise			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	2		

Peripheral swelling subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Reproductive system and breast disorders Testicular swelling subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Respiratory, thoracic and mediastinal disorders Chronic obstructive pulmonary disease subjects affected / exposed occurrences (all)  Epistaxis subjects affected / exposed occurrences (all)  Oropharyngeal pain subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1  2 / 71 (2.82%) 4  4 / 71 (5.63%) 5		
Psychiatric disorders Sleep disorder subjects affected / exposed occurrences (all)  Depression subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1  4 / 71 (5.63%) 4		
Investigations Alanine aminotransferase increased subjects affected / exposed occurrences (all)  Blood cholesterol increased subjects affected / exposed occurrences (all)  Blood glucose increased subjects affected / exposed occurrences (all)  Blood urea increased	1 / 71 (1.41%) 1  5 / 71 (7.04%) 5  8 / 71 (11.27%) 8		

subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Mean cell volume increased subjects affected / exposed occurrences (all)	2 / 71 (2.82%) 2		
Weight decreased subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Injury, poisoning and procedural complications			
Animal bite subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Contusion subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Laceration subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Overdose subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Procedural vomiting	Additional description: Intermittent vomiting due to post-nasal drip		
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Rib fracture subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Skin injury	Additional description: Injury to left leg - cut to left shin		
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Nervous system disorders			
Dizziness subjects affected / exposed occurrences (all)	5 / 71 (7.04%) 5		
Drug withdrawal convulsions			

subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Dysgeusia	Additional description: Metallic taste		
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Headache			
subjects affected / exposed occurrences (all)	2 / 71 (2.82%) 2		
Lethargy			
subjects affected / exposed occurrences (all)	4 / 71 (5.63%) 4		
Paraesthesia			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Blood and lymphatic system disorders			
Anaemia			
subjects affected / exposed occurrences (all)	3 / 71 (4.23%) 3		
Ear and labyrinth disorders			
Ear pain			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Eye disorders			
Macular degeneration			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Visual acuity reduced			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Retinal detachment			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Ocular hyperaemia			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Gastrointestinal disorders			

Constipation			
subjects affected / exposed	3 / 71 (4.23%)		
occurrences (all)	3		
Diarrhoea			
subjects affected / exposed	6 / 71 (8.45%)		
occurrences (all)	7		
Dyspepsia			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
Gastrooesophageal reflux disease			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
Irritable bowel syndrome			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
Nausea			
subjects affected / exposed	3 / 71 (4.23%)		
occurrences (all)	3		
Rectal haemorrhage			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
Vomiting			
subjects affected / exposed	3 / 71 (4.23%)		
occurrences (all)	3		
Hepatobiliary disorders			
Cholelithiasis			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
Hepatic steatosis			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
Skin and subcutaneous tissue disorders			
Dermatitis			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
Dry skin			

subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 2		
Hyperhidrosis	Additional description: Increased sweating		
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Pruritus			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Rash			
subjects affected / exposed occurrences (all)	2 / 71 (2.82%) 2		
Renal and urinary disorders			
Polyuria			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Urinary retention			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Endocrine disorders			
Goitre			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Musculoskeletal and connective tissue disorders			
Arthralgia			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Back pain			
subjects affected / exposed occurrences (all)	3 / 71 (4.23%) 3		
Groin pain			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Muscle spasms			
subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Musculoskeletal chest pain			

subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Musculoskeletal pain subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Myalgia subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Pain in extremity subjects affected / exposed occurrences (all)	6 / 71 (8.45%) 6		
<b>Infections and infestations</b>			
Cellulitis subjects affected / exposed occurrences (all)	2 / 71 (2.82%) 2		
Eye infection subjects affected / exposed occurrences (all)	2 / 71 (2.82%) 2		
Furuncle subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Gastroenteritis subjects affected / exposed occurrences (all)	3 / 71 (4.23%) 3		
Hordeolum subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Influenza subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Laryngitis subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		
Lower respiratory tract infection subjects affected / exposed occurrences (all)	1 / 71 (1.41%) 1		

Nail infection			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
Nasopharyngitis			
subjects affected / exposed	2 / 71 (2.82%)		
occurrences (all)	3		
Oral candidiasis			
subjects affected / exposed	2 / 71 (2.82%)		
occurrences (all)	3		
Urinary tract infection			
subjects affected / exposed	5 / 71 (7.04%)		
occurrences (all)	7		
Viral infection			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
Metabolism and nutrition disorders			
Diabetes mellitus			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		
Hypercholesterolaemia			
subjects affected / exposed	5 / 71 (7.04%)		
occurrences (all)	5		
Type 2 diabetes mellitus			
subjects affected / exposed	1 / 71 (1.41%)		
occurrences (all)	1		

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
19 January 2015	Amendment to seek approval for patients suffering from interstitial lung disease to be eligible for recruitment in the study.
05 October 2015	Amendment to seek approval to - Change exclusion criteria from 'already had gout' to ' - Change the timing of six minute walk test from doing two at randomisation visit to doing one as a practice test at screening visit and a second one at randomisation. - Remove the measurement of diffusion capacity of lung for carbon monoxide - Add an additional patient identification centre using SPCRN - Allow study visits 3, 4, 6 and 8 to be done at the location of participant's convenience such as their home
21 April 2016	Amendment to seek approval for adding NHS Grampian as another centre for recruitment for the study.
21 December 2016	Amendment to seek approval to: - Change the follow-up period from 12 months to a minimum of 9 months - Change software for the analysis of MRI images to Circle Cardiovascular Imaging (Calgary, Canada)

Notes:

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### Interruptions (globally)

Were there any global interruptions to the trial? No

### Limitations and caveats

Limitations of the trial such as small numbers of subjects analysed or technical problems leading to unreliable data.

None reported

Notes: