Clinical Trials Update

Six Weeks of Prednisolone Reduced Hand Osteoarthritis Pain
A short course of a potent dose of prednisolone safely reduced finger pain and local joint inflammation in patients with hand osteoarthritis, a trial in The Lancet reported.

The study’s 92 participants were randomly assigned to receive 10 mg of oral prednisolone or placebo once a day for 6 weeks, followed by 2 weeks of tapering, and then a 6-week follow-up without study medication. At the start of the trial, participants had signs of inflammation in their finger joints and most had a pain flare-up during a 48-hour washout of nonsteroidal anti-inflammatory drugs.

The mean change in finger pain between baseline and week 6 on the 100-mm visual analog scale was −21.5 in the prednisolone group and −5.2 in the placebo group, a statistically significant difference. Five serious adverse events occurred: a myocardial infarction in the prednisolone group and 4 events in the placebo group.

Based on the large effect size, this new short-term treatment option is more effective for reducing hand osteoarthritis pain and improving function in patients with joint inflammation than existing therapies, according to the authors.

Self-tests Increased HIV Diagnoses
Free HIV self-tests mailed to men who have sex with men increased HIV testing and diagnosis in a randomized trial in JAMA Internal Medicine.

All of the study’s 2665 internet-recruited participants received a link to online information on HIV prevention and local HIV testing services. The intervention group also received 4 HIV self-tests in the mail and had the option to request additional tests during the 12-month trial.

More participants in the self-test group reported testing for HIV 3 or more times (76.6%) compared with the control group (22%). The HIV infections were identified in 1.9% of the self-test group vs 0.8% in the control group for a total of 36 infections. Study participants also gave self-tests to members of their social network, which led to an additional 34 identified infections.

An effective HIV prevention strategy may include mailing self-tests to high-risk individuals who can share them with their social network, the authors suggested.

Physiotherapy Not Effective for Pediatric Constipation
Adding physiotherapy to conventional treatment for functional constipation in children had no beneficial effect, a trial in the Journal of Pediatrics concluded. Physiotherapy trains pelvic floor and abdominal muscles for better intra-abdominal pressure during bowel movements. In the study, conventional treatment consisted of toilet training, nutritional advice, and laxatives.

The study involved 245 children aged 4 through 17 years with functional constipation. The patients were randomly assigned to a maximum of 9 half-hour physiotherapy sessions focused on resolving dyssynergic defecation plus conventional treatment, or to conventional treatment alone.

At 4 months, 17% of children receiving physiotherapy had treatment success, defined as no laxative use in the previous 4 weeks, compared with 28% who received conventional treatment alone. By 8 months, nearly equal percentages of children in both groups had treatment success. Parents, however, reported significantly more symptom improvement after physiotherapy than after conventional treatment.

Testosterone Improved Body Composition in Male Cancer Survivors
Male cancer survivors aged 25 through 50 years who received testosterone replacement had decreased body fat and increased muscle mass in a PLOS Medicine trial.

The study included 136 male survivors of testicular cancer, lymphoma, and leukemia who had borderline low testosterone (7-12 nmol/L). Participants were randomly assigned to receive testosterone (Tostaran 2% gel) or placebo for 26 weeks.

At 6 months, the testosterone group decreased their trunk fat mass by more than 1.5 kg. Quality of life scores did not differ between the 2 groups.

The authors suggested that the treatment should be considered with other interventions to improve body composition among younger male cancer survivors.

Dapagliflozin Cut Risk of Worsening Heart Failure
Dapagliflozin reduced the risk of worsening heart failure and death in patients with and without diabetes, a trial in the New England Journal of Medicine found.

The study involved 4744 patients with heart failure and an ejection fraction of 40% or less who were randomized to receive either dapagliflozin (10 mg once daily) or placebo, in addition to recommended therapy. Forty-five percent of participants had type 2 diabetes.

Over a median of 18.2 months, worsening heart failure (unplanned hospitalization or urgent visit requiring intravenous therapy) or cardiovascular death occurred in 16.3% in the dapagliflozin group and in 21.2% of the placebo group.

Dapagliflozin was equally effective regardless of the presence of diabetes. "Thus, our findings potentially extend the therapeutic role of dapagliflozin beyond patients with diabetes," the authors wrote. – Anita Slomski, MA

Note: Source references are available through embedded hyperlinks in the article text online.