# The Onycho Trial

Published: 22-11-2019 Last updated: 15-05-2024

Local antimycotic treatment of fungal toenail infection is more effective than placebo

Ethical review Approved WMO

**Status** Recruitment stopped

**Health condition type** Fungal infectious disorders

Study type Interventional

## **Summary**

#### ID

NL-OMON26092

**Source** 

Nationaal Trial Register

**Brief title** 

Onycho trial

#### **Condition**

· Fungal infectious disorders

#### **Synonym**

Fungal nail infection; nail fungus; tinea unguium

#### **Health condition**

Onychomycosis

#### Research involving

Human

### **Sponsors and support**

**Primary sponsor:** Leiden University Medical Center (LUMC)

**Source(s) of monetary or material Support:** Fonds Alledaagse Ziekten (FAZ)

#### Intervention

#### **Explanation**

#### **Outcome measures**

#### **Primary outcome**

Complete cure, consisting of both clinical and mycological cure of the index toenail at 6 months

#### **Secondary outcome**

Clinical improvement (defined as either  $\leq$ 10% involvement of the index toenail or as  $\geq$ 40% reduction)

Symptom burden as expressed by the ONYCHO questionnaire score

Quality of life based on the Short Form-12 survey

Adverse effects

Therapy compliance

Patient-perceived improvement

Treatment acceptability

## **Study description**

#### **Background summary**

Fungal infection (onychomycosis) of the nails is a common ailment seen in GP practice, often found to be annoying and unsightly. In most cases it involves the greater toenail. The only clinically proven effective treatment is oral terbinafine or an imidazole for at least 3 months. GP's and dermatologists regard onychomycosis primarily as a cosmetic problem and not so much a medical one, therefore understandably being hesitant or reluctant to prescribe oral terbinafine. If treatment is chosen for more extensive forms of onychomycosis, oral therapy remains first choice however. With less severe, more limited forms of onychomycosis, local therapy might be a good alternative. If proven effective, this could lead to fewer prescriptions of oral terbinafine which is desirable given the rare but potentially serious side effects. A recent Cochrane Review states that more research into the effectiveness of local treatment is needed. Little research has been done into one of the most frequently used antimycotic

agents in the Netherlands, miconazole. Given the already proven effectiveness and potential side effects of terbinafine orally, this study focus is on comparing the two most commonly used topical agents (miconazole and amorolfine) versus placebo. The aim of this study is to investigate the effect of local treatment of onychomycosis of the toenail(s) with miconazole or amorolfine as compared to placebo.

#### **Study objective**

Local antimycotic treatment of fungal toenail infection is more effective than placebo

#### Study design

Total treatment and follow-up of 6 months

#### Intervention

Miconazole; Amorolfine

### **Contacts**

#### **Public**

Leids Universitair Medisch Centrum Roeland Michiel Watjer Albinusdreef 2 2333 ZA Leiden The Netherlands

#### Scientific

Leids Universitair Medisch Centrum Roeland Michiel Watjer Albinusdreef 2 2333 ZA Leiden The Netherlands

## **Eligibility criteria**

#### Age

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

#### Inclusion criteria

- 1. Age 18 70 years
- 2. Onychomycosis of 1 up to a maximum of 3 nails per foot
- 3. Limited form of onychomycosis, defined as at least 10% and not more than 75% of the nail (visually) affected
- 4. No involvement of the matrix
- 5. No spikes

#### **Exclusion criteria**

- 1. Known allergy or hypersensitivity for one of the study medications
- 2. Pregnancy or lactation
- 3. Presence of malignancy
- 4. Generalized fungal infection of the (rest of) the foot
- 5. Patients treated with oral antimycotic therapy within the last 6 months
- 6. Use of vitamin-K antagonists, oral antidiabetics and/or phenytoin
- 7. Peripheral arterial occlusive disease stages III and IV

## Study design

### **Design**

Study phase: 3

Study type: Interventional

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Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Double blinded (masking used)

Control: Placebo

Primary purpose: Treatment

#### Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 10-02-2020

Enrollment: 111

Type: Actual

### **IPD** sharing statement

Plan to share IPD: Undecided

### **Ethics review**

Approved WMO

Date: 26-08-2019

Application type: First submission

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

## **Study registrations**

## Followed up by the following (possibly more current) registration

ID: 52904

Bron: ToetsingOnline

Titel:

### Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register ID

NTR-new NL8193

CCMO NL68851.058.19
EudraCT 2019-000335-77
OMON NL-OMON52904

# **Study results**