# Does one-time ashwagandha intake improve cognitive function?

Submission date	Recruitment status No longer recruiting	Prospectively registered		
31/10/2021		☐ Protocol		
Registration date 02/11/2021	Overall study status Completed	Statistical analysis plan		
		[X] Results		
<b>Last Edited</b> 03/01/2023	<b>Condition category</b> Other	[] Individual participant data		

#### **Plain English Summary**

Background and study arms

Ashwagandha (ASH) has long been used in the traditional Ayurvedic system of medicine to enhance memory and improve cognition. Human intervention studies have linked Ashwagandha to increased cognition in patients with early dementia or bipolar disorder, but studies in healthy populations are limited. It is currently unknown if one-time supplementation with Ashwagandha can improve cognitive performance in young healthy adults. The aim of this study is to examine the effect of acute ingestion of 400 mg of ashwagandha on executive function including general attention, sustained attention, attentional shifting, and/or working memory in young adults.

Who can participate?

Healthy men and women between the ages of 18 to 59 years

What does the study involve?

Participants will be randomly allocated to receive ASH or placebo (dummy) capsules, and then perform four cognitive function tests that assess a range of cognitive and executive function aspects.

What are the possible benefits and risks of participating? The potential benefit of participating is an increase in executive functioning.

Where is the study run from? Texas A&M University (USA)

When is the study starting and how long is it expected to run for? April 2019 to November 2019.

Who is funding the study? Specnova Inc. (USA)

Who is the main contact? Dr Richard B. Kreider rbkreider@tamu.edu

# Contact information

#### Type(s)

Scientific

#### Contact name

Prof Richard Kreider

#### **ORCID ID**

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#### Contact details

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# Additional identifiers

#### **EudraCT/CTIS** number

Nil known

#### **IRAS** number

#### ClinicalTrials.gov number

Nil known

# Secondary identifying numbers

AcuteAshwagandha2019

# Study information

#### Scientific Title

The effect of acute ashwagandha supplementation on cognitive function

# Study hypothesis

Acute ashwagandha extract improves cognition.

# Ethics approval required

Old ethics approval format

# Ethics approval(s)

Approved 19/07/2019, Texas A&M University Institutional Review Board (517 Blocker Building, 155 Ireland Street, Texas A&M University, College Station, TX 778431, USA; +1 (0)979 458 4067; irb@tamu.edu), ref: IRB2019-0453D

#### Study design

Interventional double-blinded randomized crossover controlled trial

#### Primary study design

Interventional

#### Secondary study design

Randomised cross over trial

#### Study setting(s)

Other

#### Study type(s)

Other

#### Participant information sheet

No participant information sheet available

#### Condition

Improving cognition in healthy individuals

#### **Interventions**

Subjects consumed capsules containing 400 mg of a proprietary root and leaves extract of ashwagandha (NooGandha®, Specnova, Boca Raton, FL, USA) or capsules containing 400 mg of a wheat flour placebo (Placebo) once they have completed baseline testing with 8 ounces of water. A computer generated randomization to treatment was used. Once subjects were randomized to start, they followed the counter balance progression.

#### Intervention Type

Supplement

#### Primary outcome measure

The Psychology Experiment Building Language (PEBL) software program (Version 2.1, http://pebl.sourceforge.net) was used to administer four cognitive function tests that assessed a range of cognitive and executive function aspects:

- 1. Berg-Wisconsin Card Sorting Task test (BCST) at baseline, 1, 2, 3, 4, 5 and 6 hours after ingestion
- 2. The Go/No-Go test (GNG) at baseline, 1, 2, 3, 4, 5 and 6 hours after ingestion
- 3. Sternberg Task Test (STT) at baseline, 1, 2, 3, 4, 5 and 6 hours after ingestion
- 4. Psychomotor Vigilance Task Test (PVTT) at baseline, 1, 2, 3, 4, 5 and 6 hours after ingestion

# Secondary outcome measures

There are no secondary outcome measures

# Overall study start date

01/04/2019

#### Overall study end date

10/11/2019

# Eligibility

#### Participant inclusion criteria

Apparently healthy males and females between the ages of 18 to 59 years were recruited to participate in the study.

All subjects were healthy and free from known:

- 1. Cognitive deficit conditions
- 2. Wheat flour allergies
- 3. Sleep disorders
- 4. Cardiovascular, metabolic, or pulmonary diseases
- 5. History of hypertension, migraine headaches, cardiac arrhythmias, or anxiety
- 6. Gastrointestinal reflux disease or ulcers

#### Participant type(s)

Healthy volunteer

#### Age group

Adult

#### Lower age limit

18 Years

#### Upper age limit

59 Years

#### Sex

Both

#### Target number of participants

15

#### Total final enrolment

15

#### Participant exclusion criteria

Subjects who were taking prescription medications in the month prior to the initiation of the study and/or were told by a physician to abstain or restrict caffeine and/or stimulant intake

#### Recruitment start date

20/07/2019

#### Recruitment end date

10/11/2019

# Locations

#### Countries of recruitment

United States of America

# Study participating centre Texas A&M University

675 Kimbrough Blvd Building #1542 College Station, Texas United States of America 77843-4253

# Sponsor information

#### Organisation

Specnova Inc.

#### Sponsor details

8609 Westwood Center Drive #110 Tysons Corner, VA United States of America 22182 +1 (0)720 245 4096 sebastian@specnova.com

#### Sponsor type

Industry

#### Website

https://www.specnova.com

# Funder(s)

#### Funder type

Industry

#### **Funder Name**

Specnova Inc.

# **Results and Publications**

#### Publication and dissemination plan

Planned publication in peer-reviewed scientific journal.

#### Intention to publish date

# Individual participant data (IPD) sharing plan

All data generated or analyzed during this study will be included in the subsequent results publication.

# IPD sharing plan summary

Published as a supplement to the results publication

# **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		20/09/2022	03/01/2023	Yes	No