

# Comparative study of two types of pacing for the treatment of unexplained syncope (vasovagal syndrome)

<b>Submission date</b> 15/04/2010	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 23/07/2010	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 29/12/2020	<b>Condition category</b> Signs and Symptoms	<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
N/A

# Study information

## Scientific Title

Comparative study of two types of pacing for the treatment of unexplained syncope (vasovagal syndrome): a multicentre, single-blinded, randomised controlled trial with a direct individual benefit

## Study objectives

To compare the effectiveness of a dual chamber pacing (DDD) at 70 beats per minute (bpm) and a single chamber atrial pacing (AAI) at 30 bpm in patients suffering from vasovagal syndrome related to a predominant cardio-inhibitory reflex determined by adenosine-5'-triphosphate (ATP) test.

Null hypothesis:

The cumulative percentage syncope recurrence in the 30 bpm AAI-mode stimulated group,  $r_p$ , equals that in the 70 bpm DDD-mode group,  $r_w$ . Thus,  $r_p = r_w = r_0$ .

Alternative hypothesis:  $r_p = ar_w$ , where  $a \neq 1$ .

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

1. The Ethics Committee of Poitiers University approved on the 1st of September 1999 (ref: 99.07.22)
2. Individual ethics committees of each clinical centre

## Study design

Prospective multicentre comparative randomised single blind study with a direct individual benefit

## Primary study design

Interventional

## Secondary study design

Randomised controlled trial

## Study setting(s)

Hospital

## Study type(s)

Treatment

## Participant information sheet

Can be found at [https://www.healthstudies.umn.edu/trc/en/en\\_protocol-2002-02-21.pdf](https://www.healthstudies.umn.edu/trc/en/en_protocol-2002-02-21.pdf) (see pg. 15-16)

## Health condition(s) or problem(s) studied

Syncope (unknown origin)

## **Interventions**

ATP testing was carried out prior to randomisation. Only patients with block at least 10 seconds in duration were randomised to pacemaker implantation and programming with either:

1. Dual chamber pacing (DDD) at 70 bpm
2. Single chamber atrial pacing (AAI) at 30 bpm

An injection of adenosine triphosphate will be used to screen for cardiac pause.

The implantation is permanent, but the programming was set for the duration of the study to the random assignment. At the end of the study the recommended programming was to the more successful settings in the study, DDD @ 70bpm. The total follow-up was from January 2000 until May 2005.

## **Intervention Type**

Other

## **Phase**

Not Applicable

## **Primary outcome measure**

Recurrence of syncope

## **Secondary outcome measures**

1. Duration of cardiac pause
2. Reprogramming of pacemaker
3. Recurrences after reprogramming

## **Overall study start date**

01/07/2000

## **Completion date**

31/12/2005

# **Eligibility**

## **Key inclusion criteria**

1. Adult patients (greater than or equal to 18 years), agreeing to take part in the study and having signed the informed consent form
2. Patients having presented one or more episodes of syncope or pre-syncope unexplained by the usual screening tests: questionnaire, clinical examination, orthostatic hypotension investigation, biological tests, electrophysiological study (if necessary), echocardiogram (ECG), Holter, exercise test (optional), electroencephalogram (EEG) (optional), and brain scan (optional)
3. Negative sino-carotid massage (SCM)
4. Head-up tilt test conducted according to Appendix B protocol, whatever the result
5. Positive adenosine-5'-triphosphate (ATP) test, confirmed by double reading by principal investigator

## **Participant type(s)**

Patient

## **Age group**

Adult

**Lower age limit**

18 Years

**Sex**

Both

**Target number of participants**

200 patients (100 per group)

**Total final enrolment**

80

**Key exclusion criteria**

1. Syncope etiology revealed by usual screening testings
2. Positive SCM
3. Atrial or ventricular tachyarrhythmia
4. Defibrillator implanted (DAI)
5. Pacemaker previously implanted
6. Patient on waiting list for or having had heart transplantation
7. Sick sinus syndrome, brady-tachy syndrome
8. Atrial fibrillation, paroxysmal or permanent first and second-degree atrio-ventricular block, trifascicular block
9. Ongoing pregnancy. Women of childbearing age should be using reliable contraception.
10. Acute systemic infection or other surgical contra-indication for pacemaker implantation
11. Chronic obstructive bronchopneumopathy
12. Asthma
13. Diabetes

**Date of first enrolment**

01/07/2000

**Date of final enrolment**

31/12/2005

**Locations**

**Countries of recruitment**

Belgium

France

**Study participating centre**

Croix Rousse University Hospital

Lyon

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# Sponsor information

## Organisation

Croix Rousse University Hospital (France)

## Sponsor details

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## Sponsor type

Hospital/treatment centre

## ROR

<https://ror.org/006evg656>

# Funder(s)

## Funder type

Industry

## Funder Name

Medtronic, Inc. (USA)

# Results and Publications

## Publication and dissemination plan

Not provided at time of registration

## Intention to publish date

## Individual participant data (IPD) sharing plan

## IPD sharing plan summary

Not provided at time of registration

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	03/01/2012	29/12/2020	Yes	No