

# The association between the 5-LipOxygenase pathway and abdominal aortic aneurysms

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<b>Registration date</b> 28/12/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 14/01/2021	<b>Condition category</b> Circulatory System	<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**  
NL770, NTR781

# Study information

## Scientific Title

The association between the 5-LipOxygenase pathway and abdominal aortic aneurysms

## Acronym

5-LO pathway

## Study objectives

Rationale: Accumulating evidence suggests that increased generation of LeukoTrienes (LT) by the 5-LipOxygenase (5-LO) pathway may have direct actions on the vessel wall, particularly the adventitia, in the evolution of Abdominal Aortic Aneurysm (AAA). Augmented inflammatory activity may further weaken the arterial wall, which may result in rapid expansion of the AAA and ultimately rupture. Thus, circulating and/or urinary levels of LT may serve as a novel biomarker for monitoring small asymptomatic AAA and may be an useful predictor of aneurysmal expansion.

We hypothesise that:

1. LTs produced by the 5-LO pathway are adversely implicated in the progression of AAA, and
2. Certain 5-LO pathway associated haplotypes (e.g. spanning the LT4h gene or FLAP) may be associated with rapid expansion of AAA.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

The study has been approved by the medical ethics commission of the Academic Medical Centre on November 2, 2006 (ref: MEC 06/240).

## Study design

Non-randomised controlled trial

## Primary study design

Interventional

## Secondary study design

Non randomised controlled trial

## Study setting(s)

Not specified

## Study type(s)

Treatment

## Participant information sheet

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

Abdominal aneurysm of the aorta

## Interventions

Patients with an asymptomatic, small aneurysm of the abdominal aorta and healthy male volunteers will visit the hospital four times during two years, at an interval of six months. During the first visit, patients will undergo a short physical examination, blood sampling, and ultrasound scanning for measurement of the maximum anterior-posterior diameter of the abdominal aorta.

During the follow up visits patients will be subjected only to ultrasound scanning. Except for blood sampling related inconvenience (e.g., hematomas) there are no risks associated with participation. In addition, there are no direct benefits for subjects participating in this study.

### **Intervention Type**

Other

### **Phase**

Not Specified

### **Primary outcome measure**

1. The relation between LT levels (in stimulated neutrophils and urine) and annual rate of expansion of small AAAs.
2. Comparison of LT levels between subjects with AAA and normal controls.
3. The association between at-risk gene variant genes involved in 5-LO pathway and AAA growth rate.
4. To assess the presence of neutrophils and 5-LO products in AAA specimens.

### **Secondary outcome measures**

The relation between other inflammatory markers (e.g. MMP9, hsCRP, MIP-1a, RANTES, MCP-1, CD-40L) and rates of expansion of small AAAs.

### **Overall study start date**

01/11/2006

### **Completion date**

01/11/2009

## **Eligibility**

### **Key inclusion criteria**

1. Presence of asymptomatic, small AAA
2. Older than 20 years
3. Male or female

### **Participant type(s)**

Patient

### **Age group**

Adult

### **Sex**

Not Specified

### **Target number of participants**

**Key exclusion criteria**

1. A clinical condition which is actual and may interfere with the endpoints of the study (e.g. malignancy, infection/sepsis, chronic inflammatory disease )
2. The use of drugs with anti-inflammatory properties including prostaglandin synthetase inhibitors, which have been shown to reduce the inflammatory response
3. The use of immunosuppressants, including glucocorticoids, e.g., cyclosporine
4. Ruptured/symptomatic AAAs

**Date of first enrolment**

01/11/2006

**Date of final enrolment**

01/11/2009

**Locations****Countries of recruitment**

Netherlands

**Study participating centre**

Academic Medical Center (AMC) Amsterdam

Amsterdam

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**Sponsor information****Organisation**

Academic Medical Center (AMC) (The Netherlands)

**Sponsor details**

Department of Vascular Medicine

P.O. Box 22660

Amsterdam

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**Sponsor type**

Hospital/treatment centre

**Website**

<http://www.amc.uva.nl/#http://www.amc.uva.nl/>

ROR

<https://ror.org/03t4gr691>

## Funder(s)

### Funder type

Other

### Funder Name

This study was funded by the principal investigator of this trial, and received no external funding.

## 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>	genetic analysis results	01/02/2012	14/01/2021	Yes	No