

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

<b>Submission date</b>	<b>Recruitment status</b>	<input type="checkbox"/> Prospectively registered
28/12/2006	No longer recruiting	<input type="checkbox"/> Protocol
<b>Registration date</b>	<b>Overall study status</b>	<input type="checkbox"/> Statistical analysis plan
28/12/2006	Completed	<input checked="" type="checkbox"/> Results
<b>Last Edited</b>	<b>Condition category</b>	<input type="checkbox"/> Individual participant data
14/01/2021	Circulatory System	

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

Dr L N Broekhuizen

### Contact details

Academic Medical Center (AMC) Amsterdam  
Department of Vascular Medicine, F4-142  
P.O. Box 22660  
Amsterdam  
Netherlands  
1100 DD

-  
L.N.Broekhuizen@amc.uva.nl

## Additional identifiers

### Protocol serial number

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 LeukoTrieines (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

**Study type(s)**

Treatment

**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(s)**

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.

## **Key secondary outcome(s)**

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

## **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

### **Healthy volunteers allowed**

No

### **Age group**

Adult

### **Sex**

Not Specified

### **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

Netherlands

1100 DD

## Sponsor information

### Organisation

Academic Medical Center (AMC) (The Netherlands)

### 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

### 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