

# Efficacy of inhaled recombinant human deoxyribonuclease in mechanically ventilated pediatric patients with an atelectasis

<b>Submission date</b> 28/09/2006	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 28/09/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 06/01/2009	<b>Condition category</b> Respiratory	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

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

## Contact information

**Type(s)**  
Scientific

**Contact name**  
Dr R Boogaard

**Contact details**  
Erasmus Medical Center  
Sophia Childrens Hospital  
Department of Pediatric Pulmonology  
SB-2666  
P.O. Box 2060  
Rotterdam  
Netherlands  
3000 CB  
+31 (0)10 4636683  
r.boogaard@erasmusmc.nl

## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

## Secondary identifying numbers

NTR725

# Study information

## Scientific Title

### Study objectives

Recombinant human deoxyribonuclease (rhDNase) can liquefy mucous in children with an atelectasis during mechanical ventilation, resulting in improved mucociliary clearance, less mucous retention and less airway obstruction, thereby enhancing the rate of resolution of an atelectasis. Moreover we expect the ventilator settings, pulmonary ventilation and ventilation-perfusion mismatch to improve faster, possibly resulting in a shorter time spent on a ventilator and on the Intensive Care Unit (ICU).

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Ethics approval received from the local medical ethics committee

### Study design

Randomised controlled trial

### Primary study design

Interventional

### Secondary study design

Randomised controlled trial

### Study setting(s)

Hospital

### Study type(s)

Treatment

### Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

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

Atelectasis during mechanical ventilation

### Interventions

Intervention group: Twice daily: inhaled rhDNase, 2.5 ml and twice daily 4 ml isotonic saline (NaCl 0.9%), for two days.

Control group: Twice daily: inhaled isotonic saline 2.5 ml and twice daily 4 ml isotonic saline, for two days.

**Intervention Type**

Drug

**Phase**

Not Specified

**Drug/device/biological/vaccine name(s)**

Recombinant human deoxyribonuclease (rhDNase)

**Primary outcome measure**

Change in a Chest radiograph-score (CXR-score) at 48 hours.

**Secondary outcome measures**

1. Change in a Chest radiograph-score at 24 hours
2. Change in:
  - a. ventilatory settings
  - b. saturation
  - c. blood-gas values
  - d. DeoxyriboNucleic Acid (DNA) content and cytokines in tracheal aspirates
  - e. duration of mechanical ventilation
  - f. length of stay

**Overall study start date**

01/09/2006

**Completion date**

31/12/2010

**Eligibility****Key inclusion criteria**

1. Aged zero to 18 years
2. Mechanical ventilation
3. Presence of an atelectasis on a chest radiograph
4. First dose of study medication can be administered preferably within six hours (maximum 12 hours) after an atelectasis has been diagnosed

**Participant type(s)**

Patient

**Age group**

Child

**Upper age limit**

18 Years

**Sex**

Both

**Target number of participants**

80

**Key exclusion criteria**

1. Children with neuromuscular disorders and impaired ability to cough, cardiomyopathy, or cystic fibrosis
2. Post-gestational age less than 32 weeks
3. Mechanical ventilation during muscle paralysis
4. Atelectasis due to a bronchoscopically diagnosed:
  - a. foreign body aspiration
  - b. tracheal or bronchial compression by lymph nodes or vessels
5. Recurrent atelectasis due to an anatomical airway-abnormality
6. RhDNase treatment in the previous 48 hours
7. Clinical condition or ventilator settings that are not compatible with nebulising medication (according to the responsible physician)
8. Presence of a pneumothorax
9. Previous participation in the study

**Date of first enrolment**

01/09/2006

**Date of final enrolment**

31/12/2010

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

Netherlands

**Study participating centre**

Erasmus Medical Center

Rotterdam

Netherlands

3000 CB

**Sponsor information****Organisation**

Erasmus Medical Center, Sophia Children's Hospital (Netherlands)

**Sponsor details**

Dr Molewaterplein 60

Rotterdam

Netherlands

3015 GJ

**Sponsor type**

Hospital/treatment centre

**ROR**

<https://ror.org/047afsm11>

**Funder(s)****Funder type**

Industry

**Funder Name**

Roche Nederland BV (Netherlands)

**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