

# Hypitat: Pregnancy-induced hypertension and pre-eclampsia after 36 weeks: induction of labour versus expectant monitoring. A comparison of maternal and neonatal outcome, maternal quality of life and costs.

<b>Submission date</b> 20/12/2005	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
<b>Registration date</b> 20/12/2005	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 19/09/2012	<b>Condition category</b> Pregnancy and Childbirth	<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

**Protocol serial number**  
NTR300

# Study information

## Scientific Title

## Acronym

Hypitat (Hypertension and Preeclampsia Intervention Trial at Term)

## Study objectives

Equivalence between maternal and neonatal outcome.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Approved by the Medical Ethical Committee of the University Medical Centre of Leiden (ref: p04.210)

## Study design

Multicentre randomised active controlled parallel group trial

## Primary study design

Interventional

## Study type(s)

Treatment

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

Pre-eclampsia, pregnancy induced hypertension

## Interventions

In the intervention group, patients get an induction of labour within 24 hours after randomisation. Patients with a cervix that is judged to be 'ripe' at vaginal examination (bishop score greater than 6), labour will be induced with amniotomy and augmentation with oxytocin. In case the cervix is judged to be 'unripe' (bishop score less than 6), cervical ripening will be stimulated with use of intracervical or intravaginal prostaglandines according to the local protocol.

In the expectant group, patients will be monitored until the onset of spontaneous delivery. In this group intervention is recommended in case the foetal or maternal condition does not justify expectant management anymore.

As of 06/01/2009, this record was updated to show the completed status based on the participant inclusion completion date of April 2008. The previous anticipated end date of this trial was 01/02/2009.

## Intervention Type

Other

## Phase

Not Applicable

**Primary outcome(s)**

The primary outcome measure will be maternal mortality or severe maternal morbidity. Severe maternal morbidity will be defined as diastolic BP greater than 110 mmHg, major postpartum haemorrhage, eclampsia, HELLP syndrome or abruptio placenta.

Previous primary outcome measures (as of 22/08/2007):  
Maternal and neonatal outcome, quality of maternal life.

**Key secondary outcome(s)**

Secondary outcomes will be neonatal mortality or neonatal morbidity, instrumental delivery rate, severe maternal quality of life and quality of recovery and costs.

Previous secondary outcome measures (as of 22/08/2007):  
Economic analysis

**Completion date**

01/04/2008

## Eligibility

**Key inclusion criteria**

Current inclusion criteria (as of 22/08/2007):

1. Pregnant women with gestational age 36 0/7 weeks until 41 0/7 weeks
2. Blood pressure greater than 140/95 mmHg in women with pregnancy induced hypertension
3. Blood pressure greater than 140/90 mmHg combined with proteinuria (greater than 300 mg /24 hours) in women with preeclampsia

Previous inclusion criteria:

1. Pregnant women with gestational age 36 0/7 wks until 41 0/7 wks
2. Blood pressure greater than 140/95 mmHg. Eventually combined with proteinuria (greater than 300 mg/24 hour)

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Sex**

Female

**Key exclusion criteria**

1. Treated hypertension before pregnancy
2. Diabetes mellitus
3. Renal disease and previous caesarean section

4. HELLP syndrome
5. Oliguria
6. Cerebral or visual disturbances
7. Pulmonary oedema or cyanosis
8. Non-vertex position

**Date of first enrolment**

01/02/2006

**Date of final enrolment**

01/04/2008

## Locations

**Countries of recruitment**

Netherlands

**Study participating centre**

University Medical Centre Groningen

Groningen

Netherlands

9700 RB

## Sponsor information

**Organisation**

The Netherlands Organisation for Health Research and Development (ZonMw) (Netherlands)

**ROR**

<https://ror.org/01yaj9a77>

## Funder(s)

**Funder type**

Research organisation

**Funder Name**

The Netherlands Organisation for Health Research and Development (ZonMw) (Netherlands)

## 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>	results	19/09/2009		Yes	No
<a href="#">Results article</a>	results	01/12/2010		Yes	No
<a href="#">Results article</a>	results	01/12/2011		Yes	No
<a href="#">Results article</a>	results	01/12/2011		Yes	No
<a href="#">Results article</a>	results	01/12/2011		Yes	No
<a href="#">Results article</a>	results	01/08/2012		Yes	No
<a href="#">Protocol article</a>	methods of valuation/preference protocol:	04/07/2007		Yes	No
<a href="#">Protocol article</a>	trial protocol:	27/07/2007		Yes	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes