# A new peritoneal dialysis fluid for Japan: A randomized non-inferiority clinical trial of safety and efficacy

Submission date	<b>Recruitment status</b> No longer recruiting	Prospectively registered	
02/02/2016		☐ Protocol	
<b>Registration date</b> 08/03/2016	Overall study status Completed	Statistical analysis plan	
		[X] Results	
Last Edited	Condition category	Individual participant data	
25/04/2023	Urological and Genital Diseases		

#### Plain English summary of protocol

Background and study aims

Chronic kidney disease (CKD) is a long-term condition where the kidneys do not work properly. In a healthy person, the kidneys are responsible for filtering out the waste products and excess water in the blood, and converting them into urine. In patients suffering from CKD, the kidneys are unable to do this, and so the body is unable to get rid of the waste products building up in the blood. There are a number of treatments available which act to replace the function of the kidneys. One technique used is continuous ambulatory peritoneal dialysis (CAPD). This type of treatment is normally repeated between three and five times day, and is very popular as it can be done at home or work while the patient goes about their daily life. In this technique, the thin membrane (lining) that lines the peritoneal cavity (space in the abdomen that separates the organs from the abdominal wall) acts as a natural filter. It involves filling the abdominal cavity with a special fluid (dialysate) which is left to absorb waste products before being drained away. The dialysate used for CAPD contains different concentrations of sugars and salts and different amounts of waste are filtered out of the body depending on the concentrations used. It has been found that the concentrations of different mineral salts (particularly magnesium and calcium) in some dialysates can react in the body to produce high levels of bicarbonate in the blood. Biocarbonate is important for maintaining the pH of the blood (preventing it from becoming too acidic or alkaline) but if levels are too high (metabolic alkalosis) it can lead to dangerous consequences. A possible solution is a by using a double-chambered bag, such as with the product BLR250 which keeps bicarbonate separate from calcium and magnesium in order to prevent the creation of more bicarbonate. The aim of this study is to test the safety of using BLR250 for CAPD and to find out if it can prevent metabolic alkalosis.

#### Who can participate?

CKD patients over 20 years old who have been treated using CAPD for at least 3 months.

#### What does the study involve?

Participants are randomly allocated to one of two groups. For those in group one, each time the CAPD procedure is done, 2L of BLR250 is used as the dialysate fluid. For group two, each time the CAPD procedure is done, 2L of Dianeal PD-4 (normal dialysate solution) is used as the

dialysate fluid. Participants in both groups use their assigned dialysate every time they dialyse for 8 weeks. At the start of the study, and then again after 4, 8 and 12 weeks, participants have a blood test in order to measure how well the dialysis is working at replacing kidney function, and to have the amounts of bicarbonates and different minerals in the blood measured.

What are the possible benefits and risks of participating? Participants may benefit from a lower blood bicarbonate level. There are no risks for participants taking part in the study as the techniques used in the study are treatments that are already offered in standard practice, although some participants may experience pain or bruising when having blood taken.

Where is the study run from? 24 hospitals in Japan.

When is the study starting and how long is it expected to run for? March 2003 to March 2004

Who is funding the study? Baxter Limited (Japan)

Who is the main contact? Mr Shohi Saraya

# Contact information

#### Type(s)

Scientific

#### Contact name

Mr Shoji Saraya

#### Contact details

Toranomon Hills Mori Tower 20F 1-23-1, Toranomon Minato-ku Tokyo Japan 105-6320

# Additional identifiers

EudraCT/CTIS number

**IRAS** number

ClinicalTrials.gov number

**Secondary identifying numbers** BLR250-01

# Study information

#### Scientific Title

A randomized parallel-group comparative study to verify efficacy (non-inferiority) of BLR250 using Dianeal PD-4 as a comparator in patients with chronic renal failure receiving CAPD (Continuous Ambulatory Peritoneal Dialysis)

#### Study objectives

To verify the efficacy (non-inferiority) and safety of BLR250 using Dianeal PD-4 as a comparator in patients with chronic renal failure receiving CAPD therapy.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Institutional Review Board, Baxter Limited (Japan), 23/07/2002

#### Study design

Prospective randomized parallel trial

#### Primary study design

Interventional

#### Secondary study design

Randomised parallel trial

#### Study setting(s)

Home

#### 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

Chronic renal failure

#### Interventions

Participants fulfilling the eligibility are randomly allocated into one of two arms.

Active treatment arm: Each participant is given BLR250 to use as their peritoneal dialysate for a total of 8 weeks. The process is repeated between 3 and 5 times every day as required, using a total of 2L dialysate at each exchange.

Control treatment arm: Each participant is given Dianeal PD-4 to use as their peritoneal dialysate for a total of 8 weeks. The process is repeated between 3 and 5 times every day as required, using a total of 2L dialysate at each exchange.

All participants are followed up at 4 weeks.

#### Intervention Type

Drug

#### Phase

Phase III

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

1. BLR250 2. Dianeal PD-4

#### Primary outcome measure

Peritoneal creatinine clearance and ultrafiltration volume are measured using blood and dialysis effluent analysis at baseline, 4, 8 and 12 weeks.

#### Secondary outcome measures

- 1. Peritoasuneal urea clearance is measured using blood and dialysis effluent analysis at baseline, 4, 8 and 12 weeks
- 2. Electrolyte (Na, K, Cl, Ca, Mg, P) concentration is measured using blood analysis at baseline, 4, 8 and 12 weeks
- 3. Plasma bicarbonate concentration is measured using blood analysis at baseline, 4, 8 and 12 weeks

#### Overall study start date

24/03/2003

#### Completion date

18/03/2004

# **Eligibility**

#### Key inclusion criteria

- 1. Patients that have been continuously undergoing CAPD therapy for at least 3 months before the start of the baseline period
- 2. Patients that have been continuously using solely 2 L of Dianeal PD-4 for at least 4 weeks before the start of the baseline period  $\frac{1}{2}$
- 3. Patients that have given written consent to participate in this study
- 4. Patients that are aged over 20 years at the time of giving consent

# Participant type(s)

Patient

#### Age group

Adult

#### Sex

Both

# Target number of participants

50 patients in Arm 1 and 58 patients in arm 2 are enrolled.

#### Total final enrolment

108

#### Key exclusion criteria

- 1. Patients that have a tunnel infection or a severe exit-site infection and are likely to develop peritonitis
- 2. Patients that have developed peritonitis or have not recovered from peritonitis within 4 weeks before the start of the baseline period
- 3. Patients with a serious disease other than chronic renal failure (e.g., malignant tumor, hepatic cirrhosis, active hepatitis, chronic heart failure, systemic infection, significant malnutrition, significant peritoneal membrane dysfunction, negative ultrafiltration and likely to convert to hemodialysis)
- 4. Patients that have participated in another clinical study within 6 months before obtaining consent
- 5. Patients that are pregnant, lactating or may be pregnant
- 6. Patients that have been judged to be ineligible to participate in this study by the investigator /sub-investigator

#### Date of first enrolment

24/03/2003

#### Date of final enrolment

28/11/2003

# Locations

#### Countries of recruitment

Japan

Study participating centre Asahikawa Red Cross Hospital Japan 070-8530

Study participating centre Sendai Social Insurance Hospital Japan 981-8501

Study participating centre Tokyo Jikei-kai Medical School Hospital Japan 105-8471

#### Study participating centre Tokyo Jikei-kai Medical School Kashiwa Hospital Japan 277-8567

Study participating centre Mitsui Memorial Hospital Japan 101-8643

Study participating centre Nihon University Itabashi Hospital Japan 173-8610

Study participating centre
St. Marianna University School of Medicine Hospital
Japan
216-8511

Study participating centre Hospital Affiliating with Kanagawa Prefecture Nursing School Japan 235-0022

Study participating centre Showa University Fujigaoka Hospita Japan 227-8501

Study participating centre Aichi Medical University Hospital Japan 480-1195

#### Study participating centre Chukyo Hospita Japan

Japan 457-8510

Study participating centre Clinic affiliating with Inoue Hospital Japan 564-0053

Study participating centre Kinki University School of Medicine Hospital Japan 589-8511

Study participating centre Osaka Koseinenkin Hospital Japan 553-0003

Study participating centre Hiroshima University Hospital Japan 734-8551

Study participating centre Tokushima Red Cross Hospital Japan 773-8502

Study participating centre Saiseikai Yahata General Hospital Japan 805-0050

Study participating centre

#### Shizuoka Genaral Hospital

Japan 420-8527

# Study participating centre Shirasagi Clinic

Japan 546-0002

# Study participating centre Osaka City University School of Medicine Hospital Japan 545-8586

Study participating centre Teine Keijinkai Hospital Japan 006-8555

Study participating centre Tokai University School of Medicine Hospital Japan 259-1193

Study participating centre Tokuyama Central Hospital Japan 745-8522

Study participating centre Hakodate Goryoukaku Hospital Japan 040-8611

Study participating centre

#### Kawasaki Medical School Hospital

Japan 701-0192

# Study participating centre Saiseikai Central Hospital

Japan 108-0073

# Study participating centre Tokyo Kyosai Hospital

Japan 153-8934

#### Study participating centre Kumamoto Central Hospital

Japan 862-0965

# Sponsor information

#### Organisation

**Baxter Limited** 

#### Sponsor details

Toranomon Hills Mori Tower 20F 1-23-1, Toranomon Minato-ku Tokyo Japan 105-6320

#### Sponsor type

Industry

#### Website

http://www.baxter.co.jp

#### **ROR**

https://ror.org/02d6ew870

# Funder(s)

## Funder type

Industry

#### Funder Name

**Baxter Limited** 

# **Results and Publications**

#### Publication and dissemination plan

Planned publication in Clinical and Experimental Nephrology.

#### Intention to publish date

31/07/2016

# Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are not expected to be made available

#### IPD sharing plan summary

Not expected to be made available

#### **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		25/10/2016	25/04/2023	Yes	No