# Oxygen concentration and myocardial stunning

Submission date 28/09/2010	<b>Recruitment status</b> Stopped	<ul><li>Prospectively registered</li><li>Protocol</li></ul>		
Registration date	Overall study status Stopped Condition category Circulatory System	Statistical analysis plan		
09/03/2012		☐ Results		
Last Edited		Individual participant data		
21/11/2019		<ul><li>Record updated in last year</li></ul>		

#### Plain English summary of protocol

Not provided at time of registration

# Contact information

## Type(s)

Scientific

#### Contact name

Dr Christopher McIntyre

#### Contact details

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# Additional identifiers

Clinical Trials Information System (CTIS)

2007-004012-31

Protocol serial number

RD 5130-009-07

# Study information

#### Scientific Title

The effects of improving oxygen concentration in the reduction of dialysis induced myocardial stunning - a pilot study

#### Study objectives

Increasing oxygen concentration by administering inhaled oxygen reduces the severity and frequency of haemodialysis induced myocardial stunning.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Trent Research Ethics Committee, 06/07/2009, ref: 09/H0405/18

#### Study design

Randomised controlled cross-over trial

#### Primary study design

Interventional

#### Study type(s)

Treatment

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

Dialysis-induced myocardial stunning

#### **Interventions**

4 litres oxygen delivered by nasal cannulae during standard 4-hour haemodialysis.

## Intervention Type

Other

#### Phase

Not Applicable

#### Primary outcome(s)

- 1. Myocardial stunning
- 2. Development of regional wall motion abnormalities

Key observations are taken pre-dialysis (baseline) and 15 minutes prior to end of dialysis (peak stress) by cardiac echocardiography (for later offline semi-automated analysis for regional wall motion abnormalities).

# Key secondary outcome(s))

Intradialytic haemodynamics; haemodynamic variables observed pre-dialysis, and throughout dialysis treatment, with continuous non-invasive measurement by finometer, and NICOM (bioreactance).

## Completion date

01/11/2010

# Reason abandoned (if study stopped)

Lack of staff/facilities/resources

# **Eligibility**

#### Key inclusion criteria

- 1. Male and female
- 2. Over 18 years old
- 3. Chronic haemodialysis greater than 4 months

#### Participant type(s)

**Patient** 

### Healthy volunteers allowed

No

#### Age group

Adult

#### Lower age limit

18 years

#### Sex

All

#### Key exclusion criteria

- 1. Cardiac transplant
- 2. New York Heart Association (NYHA) grade IV heart failure
- 3. Chronic obstructive airways disease, other chronic/acute lung condition exacerbating hypoxia and/or unable to tolerate O2 therapy
- 4. Patient on long-term oyxgen therapy (LTOT)

#### Date of first enrolment

01/06/2010

#### Date of final enrolment

01/11/2010

# Locations

#### Countries of recruitment

**United Kingdom** 

England

# Study participating centre Royal Derby Hospital

Derby United Kingdom DE22 3NE

# Sponsor information

#### Organisation

Derby Hospitals NHS Foundation Trust (UK)

# Funder(s)

#### Funder type

Charity

#### **Funder Name**

Kidney Research UK

Alternative Name(s)

## **Funding Body Type**

Private sector organisation

## **Funding Body Subtype**

Trusts, charities, foundations (both public and private)

#### Location

**United Kingdom** 

# **Results and Publications**

Individual participant data (IPD) sharing plan

### IPD sharing plan summary

### **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
HRA research summary			28/06/2023	No	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes