

Oxygen concentration and myocardial stunning

Submission date 28/09/2010	Recruitment status Stopped	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 09/03/2012	Overall study status Stopped	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 21/11/2019	Condition category Circulatory System	<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

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Contact details

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Additional identifiers

EudraCT/CTIS number

2007-004012-31

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

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

Secondary study design

Randomised cross over 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

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 measure

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).

Secondary outcome measures

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

Overall study start date

01/06/2010

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

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

24

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 oxygen therapy (LTOT)

Date of first enrolment

01/06/2010

Date of final enrolment

01/11/2010

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Royal Derby Hospital

Derby

United Kingdom

DE22 3NE

Sponsor information

Organisation

Derby Hospitals NHS Foundation Trust (UK)

Sponsor details

Uttoxeter Road

Derby

England

United Kingdom

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+44 (0)1332 347141

teresa.grieve@derbyhospitals.nhs.uk

Sponsor type

Hospital/treatment centre

Website

<http://www.derbyhospitals.nhs.uk/>

Funder(s)

Funder type

Charity

Funder Name

Kidney Research UK

Alternative Name(s)

Funding Body Type

Private sector organisation

Funding Body Subtype

Other non-profit organizations

Location

United Kingdom

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

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
HRA research summary			28/06/2023	No	No