# The Impact of Laboratory-based Prompts on the Management of Patients with Chronic Kidney Disease

Submission date	Recruitment status	<ul><li>Prospectively registered</li></ul>
10/02/2006	No longer recruiting	∐ Protocol
Registration date	Overall study status	Statistical analysis plan
10/07/2006	Completed	Results
Last Edited	Condition category	Individual participant data
14/02/2008	Nutritional, Metabolic, Endocrine	<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

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#### Contact details

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# Additional identifiers

**EudraCT/CTIS** number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N/A

# Study information

#### Scientific Title

#### **Study objectives**

A laboratory prompt, which identifies a patient with chronic kidney disease (CKD) as being at high risk for cardiovascular disease and progression to kidney failure, improves the management of cardiovascular disease risk factors and kidney disease by physicians.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Approved by Bioethics Committess at the University of Calgary and the University of Alberta, 2005, reference number: 18050

#### Study design

Cluster randomized trial

#### Primary study design

Interventional

#### Secondary study design

Randomised controlled trial

#### Study setting(s)

Not specified

# Study type(s)

Quality of life

# Participant information sheet

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

Chronic kidney disease

#### Interventions

The following prompt will be added to laboratory reports for patients who meet the inclusion criteria and are seen by a physician practice randomized to receive the prompt:

This patient has reduced kidney function and is at risk for cardiovascular events and progression to kidney failure. The National Kidney Foundation recommends:

- 1. Measure random urine albumin to creatinine (Alb:Cr) ratio
- 2. Institute an angiotensin-converting enzyme inhibitor (ACEi) or angiotensin receptor blocker (ARB) in patients with diabetes, or those with an Alb:Cr >35 mg/mmol
- 3. Referral to a nephrologist if GFR <30 ml/min/1.73 m^2
- 4. Assess and treat modifiable risk factors for cardiovascular (CV) and renal disease:
- a. Target blood pressure (BP) less than 130/80 mmHg
- b. Target low-density lipoprotein cholesterol(LDL-C) <2.5 mmol/l
- c. If diabetic, target hemoglobin A1C (HbA1C) <7.0%

The above recommendations are general in nature and may not apply to all patients. Further information is available at http://www.akdn.info

The control group will receive usual care.

#### Intervention Type

Other

#### Phase

Not Specified

#### Primary outcome measure

Use of ACEi or ARB in patients >65 years of age with CKD who have a clear indication for ACEi or ARB use as defined by the presence of diabetes or significant albuminuria.

#### Secondary outcome measures

- 1. Use of an ACEi or ARB in patients >65 years of age with CKD
- 2. Subsequent measurement of lipids, hemoglobin A1C (in patients with diabetes, if not done in previous six months), urine protein or urine albumin, and subsequent frequency of measurement of serum creatinine
- 3. Referral to a specialist
- 4. Addition of cholesterol-lowering drugs in patients >65 years of age
- 5. Addition of new blood pressure medication(s) in patients >65 years of age
- 6. Health care costs

#### Overall study start date

01/04/2006

#### Completion date

31/03/2008

# **Eligibility**

#### Key inclusion criteria

All patients >18 years of age who are registered with one of the participating general practices and have a GFR measured at <60 ml/min during the one-year study period will be included. All participating general practices will be geographically separated (not located in the same office building), and staffed by >1 full time practitioners who do not see outpatients in another general practice unit (to reduce the risk of contamination).

# Participant type(s)

Patient

#### Age group

Adult

#### Lower age limit

18 Years

Sex

#### Both

#### Target number of participants

46 Family Practices per group (92 total)

### Key exclusion criteria

Those patients not meeting the inclusion criteria.

#### Date of first enrolment

01/04/2006

#### Date of final enrolment

31/03/2008

# Locations

#### Countries of recruitment

Canada

# Study participating centre 1403-29th St NW

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Alberta

Canada T2N 2T9

# Sponsor information

#### Organisation

Alberta Heritage Foundation for Medical Research (Canada)

#### Sponsor details

Suite 1500 10104-103 Avenue Edmonton Canada T5J 4A7 +1 780 423 5727 ahfmrinfo@ahfmr.ab.ca

#### Sponsor type

Research organisation

#### Website

http://www.ahfmr.ab.ca

#### **ROR**

https://ror.org/006b2g567

# Funder(s)

#### Funder type

Research organisation

#### **Funder Name**

Alberta Heritage Foundation for Medical Research (Canada)

#### Alternative Name(s)

**AHFMR** 

#### **Funding Body Type**

Government organisation

# **Funding Body Subtype**

Local government

#### Location

Canada

# **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