

# The effects of Immunoglobulin M (IgM) enriched immunoglobulin preparations in patients with severe sepsis

**Submission date**  
29/04/2002

**Recruitment status**  
No longer recruiting

Prospectively registered

Protocol

**Registration date**  
29/04/2002

**Overall study status**  
Completed

Statistical analysis plan

Results

**Last Edited**  
07/03/2008

**Condition category**  
Infections and Infestations

Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

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## Additional identifiers

Protocol serial number

N/A

## Study information

Scientific Title

**Study objectives**

To evaluate the effect of IgM-enriched immunoglobulin treatment on progression of organ failure and septic shock in patients with severe sepsis.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Not provided at time of registration

**Study design**

Randomised controlled trial

**Primary study design**

Interventional

**Study type(s)**

Treatment

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

Severe sepsis

**Interventions**

Patients in the study group (n = 21) received intravenous immunoglobulin preparation (Pentaglobin®) in addition to standard therapy. Pentaglobin® was started on the day of diagnosis of severe sepsis. 5 mL/kg/day Pentaglobin® (38 g/L IgG, 6 g/L IgM and 6 g/L IgA) was infused over 6 hours and repeated for three consecutive days.

Patients in the control group (n = 18) received standard sepsis therapy, but no immunoglobulin administration. Blood samples for procalcitonin measurements were taken daily for eight days. Severity of critical illness and development of organ failures were assessed by obtaining daily Acute Physiological and Chronic Health Evaluation II and Sequential Organ Failure Assessment scores.

**Intervention Type**

Drug

**Phase**

Not Specified

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

Pentaglobin®

**Primary outcome(s)**

Procalcitonin (PCT) measurements; blood samples were taken daily for eight days following study admission.

**Key secondary outcome(s)**

1. Severity of critical illness, assessed by obtaining daily acute physiological and chronic health evaluation score (APACHE II)
2. Sequential organ failure assessment (SOFA) score used to assess the development of organ failure
3. Duration of mechanical ventilation
4. Length of stay in the intensive care unit
5. Septic shock incidence
6. 28-day mortality rate

**Completion date**

01/01/2001

## Eligibility

**Key inclusion criteria**

Thirty-nine patients with severe sepsis, defined as:

1. Temperature of greater than 38°C or less than 36°C
2. Heart rate of greater than 90 beats/min
3. Respiratory rate greater than 20/min or arterial carbon dioxide pressure (PaCO<sub>2</sub>) less than 32 mmHg
4. White blood cell count greater than 12000/mm<sup>3</sup> or less than 4000/mm<sup>3</sup>
5. Documented infection and dysfunction of an organ or hypotension

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Not Specified

**Sex**

Not Specified

**Key exclusion criteria**

Does not comply with above inclusion criteria

**Date of first enrolment**

01/01/2000

**Date of final enrolment**

01/01/2001

## Locations

**Countries of recruitment**

Türkiye

**Study participating centre**  
IU Istanbul Tıp Fakültesi Anesteziyoloji AD  
Istanbul  
Türkiye  
34390 Fatih

## Sponsor information

**Organisation**  
Istanbul University (Turkey)

**ROR**  
<https://ror.org/03a5qrr21>

## Funder(s)

**Funder type**  
Not defined

**Funder Name**  
Not provided at time of registration

## 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	01/08/2002		Yes	No