Terlipressin versus albumin in the prevention of paracentesis-associated adverse events in patients with cirrhosis and tense ascites

Submission date	Recruitment status	Prospectively registered
27/01/2006	No longer recruiting	[_] Protocol
Registration date	Overall study status	Statistical analysis plan
27/01/2006	Completed	[_] Results
Last Edited	Condition category	Individual participant data
16/04/2009	Digestive System	[] Record updated in last year

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s) Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers NTR463

Study information

Scientific Title

Terlipressin versus albumin in the prevention of paracentesis associated adverse events in patients with cirrhosis and tense ascites: a multicentre randomised controlled trial

Acronym

TAPP-study

Study objectives

The effect of terlipressin on the effective arterial blood volume (EABV) in patients with cirrhosis and (tense) ascites who receive a therapeutic paracentesis, is equivalent to the current standard treatment with human albumin without the risks of a blood product and with lower costs.

Ethics approval required

Old ethics approval format

Ethics approval(s) Received from the local medical ethics committee

Study design Multicentre randomised active-controlled parallel-group trial

Primary study design Interventional

Secondary study design Randomised controlled trial

Study setting(s) Hospital

Study type(s) Treatment

Participant information sheet

Health condition(s) or problem(s) studied Cirrhosis of the liver/ascites

Interventions

Patients will be randomly assigned to receive either terlipressin or albumin, the standard treatment, intravenously (iv) when they receive a therapeutic paracentesis.

The terlipressin group will receive an iv-bolus of 1 mg terlipressin at onset of therapeutic paracentesis and another iv-bolus of 2 mg 6 hours after paracentesis. The albumin group will receive 8 g of albumin iv per litre of ascitic fluid removed.

At onset, after 6 hours, and on day 6 after paracentesis vital functions, blood, urine, and ascitic fluid samples will be taken to measure the effect of the medication.

Intervention Type

Other

Phase Not Applicable

Primary outcome measure

Decrease in EABV. This is an increase in plasma renin concentration (PRC) of more than 50% of baseline values 6 days after paracentesis.

Secondary outcome measures

- 1. Circulatory parameters
- 2. Renal function
- 3. Body weight (recurrence of ascites)
- 4. Adverse events
- 5. Costs

Overall study start date

01/12/2005

Completion date

30/11/2006

Eligibility

Key inclusion criteria

- 1. Cirrhosis with tense ascites requiring therapeutic paracentesis
- 2. Aged 18 70 years
- 3. Written informed consent

Participant type(s) Patient

Age group

Adult

Lower age limit 18 Years

Sex Both

Target number of participants 84

Key exclusion criteria

- 1. Hypertension treated with medication
- 2. History of cardiac or coronary disease
- 3. Circulatory unstable
- 4. Until 5 days prior to paracentesis:
- 4.1. Infusion of a plasma expander
- 4.2. Gastro-intestinal haemorrhage
- 4.3. Spontaneous bacterial peritonitis

5. Systemic administration of antibiotics within the past 14 days for a period of more than 24 hours, with the exception of quinolones

- 6. Hepatocellular carcinoma
- 7. Hepatic encephalopathy
- 8. Pregnancy or lack of adequate contraception in sexually active females

9. Any other condition which in the opinion of the investigator would make the patient unsuitable for enrolment, or could interfere with the patient participating in and completing the study

Date of first enrolment

01/12/2005

Date of final enrolment 30/11/2006

Locations

Countries of recruitment Netherlands

Study participating centre Erasmus Medical Centre Rotterdam Netherlands 3015 GD

Sponsor information

Organisation Foundation for Liver and Gastrointestinal Research (SLO) (Netherlands)

Sponsor details c/o Erasmus Medical Centre Department of Hepatology and Gastroenterology Room Ca 326 Dr. Molewaterplein 40

Rotterdam Netherlands 3015 GD

Sponsor type Research organisation

ROR https://ror.org/04hzejq44

Funder(s)

Funder type Research organisation

Funder Name

Dutch Society for Hepatology (Nederlandse Vereniging voor Hepatologie [NVH]) (Netherlands)

Funder Name Foundation for Liver and Gastrointestinal Research (SLO) (Netherlands) - Erasmus Medical Centre

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