# Factor XIII in patients with alcohol abuse disorder

| Submission date   | Recruitment status               | Prospectively registered      |
|-------------------|----------------------------------|-------------------------------|
| 10/12/2008        | Stopped                          | ☐ Protocol                    |
| Registration date | Overall study status             | Statistical analysis plan     |
| 03/12/2009        | Stopped                          | Results                       |
| Last Edited       | Condition category               | ☐ Individual participant data |
| 28/09/2015        | Mental and Behavioural Disorders | ☐ 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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# Additional identifiers

**Protocol serial number** N/A

# Study information

#### Scientific Title

Can the infusion of factor XIII shorten the length of hospital stay in patients with chronic alcohol use disorder? A prospective, randomised, placebo-controlled trial

# **Acronym**

## Study objectives

- 1. Chronic alcohol use leads to a variation of the pre- and post-operative plasma concentration of factor XIII
- 2. The application of factor XIII results in lower bleeding complications after surgery, less infections and impaired wound healing
- 3. Factor XIII can shorten the hospital stay in patients with chronic alcohol use disorder

On 28/09/2015 the target number of participants was changed from 40 to 80.

# Ethics approval required

Old ethics approval format

## Ethics approval(s)

Ethics Committee of Charité - University Medicine Berlin, 08/07/2004

## Study design

Prospective randomised placebo-controlled double-blinded two-arm single-centre trial

# Primary study design

Interventional

# Study type(s)

Treatment

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

Chronic alcohol use disorder

#### **Interventions**

There are five drug administration points, the duration of infusion takes about 20 minutes:

- 1. Pre-operative 2500 IE intravenous (i.v.) fibrogammin or placebo (NaCL 0.9% Lsg.)
- 2. Post-operative 1250 IE i.v. fibrogammin or placebo
- 3. First day post-operative 1250 IE i.v. fibrogammin or placebo
- 4. Second day post-operative 1250 IE i.v. fibrogammin or placebo
- 5. Third day post-operative 1250 IE i.v. fibrogammin or placebo

Blood samples are taken 2 x pre-operatively (1 x before and after fibrogammin) and 1 x post-operatively and on the 1, 4, and 10 day post-operative; clinical evaluation of the patient (bleeding /wound/complications) every day.

Please note that as of 22/10/2010 the status of this trial has been updated to "Completed". The end date of this trial was recorded as 18/01/2010. The originally anticipated end date was 20/10/2010.

Please note that as of 28/09/2015 the status of this trial has been updated to "Stopped": recruiting participants has halted prematurely and will not resume due to futility; participants are no longer being examined or treated.

#### Intervention Type

Drug

#### Phase

Phase IV

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

Factor XIII

## Primary outcome(s)

Modified factor XIII levels in peripherial blood samples and immune suppression, examined at six measure points during hospital stay.

## Key secondary outcome(s))

- 1. Evaluation of peri-operative coagulation function and status at six measure points during the hospital stay
- 2. Peri-operative incidence of bleeding complications and impaired wound healing, examined the whole time during hospital stay of the patient
- 3. Length of hospital stay

## Completion date

18/01/2010

## Reason abandoned (if study stopped)

Objectives no longer viable

# **Eligibility**

# Key inclusion criteria

Current inclusion criteria as of 28/09/2015:

- 1. Aged greater than or equal to 18 years, either sex
- 2. Written informed consent of the patient
- 3. 40 patients without daily alcohol consumption and 40 patients with alcohol consumption more or equal to 60 g per day
- 4. Patients undergoing elective tumour resection in oropharyngeal region and elective orthopedic surgery

#### Previous inclusion criteria:

- 1. Aged greater than or equal to 18 years, either sex
- 2. Written informed consent of the patient
- 3. Alcohol consumption more or equal to 60 g per day
- 4. Patients undergoing elective tumour resection in oropharyngeal region

# Participant type(s)

**Patient** 

# Healthy volunteers allowed

No

#### Age group

Adult

#### Lower age limit

#### Sex

All

#### Key exclusion criteria

- 1. Age under 18 years
- 2. No wiritten consent from patient
- 3. Liver cirrhosis (stage Child B or C)
- 4. Congenital or acquired coagulation disorders
- 5. Terminal renal insufficiency
- 6. Angina pectoris or congestive heart failure
- 7. Immune suppression
- 8. History of pulmonary embolism or deep venous thrombosis

#### Added 28/09/2015:

9. Therapy with Anticoagulant of Vitamin-K-Antagonist-Type

#### Date of first enrolment

29/08/2007

#### Date of final enrolment

18/01/2010

# Locations

#### Countries of recruitment

Germany

#### Study participating centre

Charité - University Medicine Berlin (Charité - Universitätsmedizin Berlin)

Berlin Germany 10117

# Sponsor information

#### Organisation

Charité - University Medicine Berlin (Charité - Universitätsmedizin Berlin) (Germany)

#### **ROR**

https://ror.org/001w7jn25

# Funder(s)

## Funder type

Hospital/treatment centre

#### Funder Name

Charité Universitätsmedizin Berlin

# Alternative Name(s)

Medical School - Charité - University Medicine Berlin

#### **Funding Body Type**

Private sector organisation

# **Funding Body Subtype**

For-profit companies (industry)

#### Location

Germany

# **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?

Participant information sheet Participant information sheet 11/11/2025 11/11/2025 No Yes