Prospective, randomised trial comparing fluids and dobutamine optimisation of oxygen delivery in high-risk surgical patients

Submission date Recruitment status Prospectively registered 27/03/2006 No longer recruiting [] Protocol [] Statistical analysis plan Registration date Overall study status 30/03/2006 Completed [X] Results [] Individual participant data Last Edited Condition category Circulatory System 26/03/2008

Plain English summary of protocolNot provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

Protocol serial number 2611/2002

Study information

Scientific Title

Study objectives

We aimed to investigate the effect of oxygen delivery index (DO2I) optimisation with fluids versus with fluids and dobutamine on 60-day hospital mortality and incidence of complications.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval received from the local medical ethics board on the 13th May 2002 (ref: 2611 /2002).

Study design

Randomised controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

High-risk patients undergoing prolonged surgery

Interventions

Therapy consisted of pulmonary artery catheter (PAC)-guided haemodynamic optimisation during the operation and 24 hours postoperatively, using either fluids alone or fluids and dobutamine with the aim of achieving supranormal values (oxygen delivery index [DO2I] greater than 600 ml/min/m^2).

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Dobutamine

Primary outcome(s)

To evaluate the effect of both DO2I optimisation with fluids compared to with fluids and dobutamine on 60-day mortality in high-risk general surgery patients.

Key secondary outcome(s))

The incidence of complications, particularly adverse cardiovascular events.

Completion date

31/05/2004

Eligibility

Key inclusion criteria

Patients older than 18 years old undergoing elective surgeries with greater than or equal to three points according to a risk scoring system adapted from the American College of Cardiology (ACC) or the American Heart Association (AHA) guidelines

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

- 1. Refusal of consent
- 2. Haemodynamic instability prior to surgery
- 3. Congestive heart failure
- 4. Presence of infection
- 5. Acute myocardial ischaemia prior to enrolment
- 6. Life expectancy lower than 60 days
- 7. Disseminated malignancy

Date of first enrolment

13/05/2002

Date of final enrolment

31/05/2004

Locations

Countries of recruitment

Brazil

Study participating centre Av Faria Lima 5416

São Paulo Brazil 15091/000

Sponsor information

Organisation

Faculty of Medicine of São José do Rio Preto (FAMERP) Foundation (Brazil)

ROR

https://ror.org/052e6h087

Funder(s)

Funder type

Hospital/treatment centre

Funder Name

Faculty of Medicine of Sao Jose do Rio Preto Foundation (Fundacao Faculdade de Medicina de Sao Jose do Rio Preto [FAMERP] - Hospital de Base) (Brazil)

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? |
|-----------------|---------|--------------|------------|----------------|-----------------|
| Results article | Results | 01/07/2006 | | Yes | No |