Transfusion Effects of Myelodysplastic Patients: Limiting Exposure

Submission date	Recruitment status	Prospectively registered
20/12/2005	No longer recruiting	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
20/12/2005	Completed	[X] Results
Last Edited	Condition category	[] Individual participant data
27/09/2017	Cancer	

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

Transfusion Effects of Myelodysplastic Patients: Limiting Exposure

Acronym

TEMPLE study

Study objectives

- 1. There is no difference in Health Related Quality of Life (HRQoL) using a Haemoglobin (Hb) transfusion trigger of 7.2 g/dl compared to Hb transfusion trigger of 9.6 g/dl
- 2. A Hb transfusion trigger of 7.2 g/dl leads to a diminished use of Red Blood Cell (RBC) transfused compared to a Hb transfusion trigger of 9.6 g/dl
- 3. A Hb transfusion trigger of 7.2 g/dl leads to a decrease in the development of RBC alloantibodies

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval received from the local medical ethics committee

Study design

Multicentre, randomised, single blind, 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

Myelodysplastic Syndrome (MDS)

Interventions

Red blood cell transfusion.

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

Fatigue.

Secondary outcome measures

- 1. Health Related Quality of Life (HRQoL)
- 2. Blood usage and the costs
- 3. Haemoglobin increase after transfusion
- 4. Heart beat, blood pressure, temperature, platelet count
- 5. Development of RBC alloantibodies
- 6. Mortality

Overall study start date

10/02/2002

Completion date

31/12/2006

Eligibility

Key inclusion criteria

- 1. Diagnosis myelodysplastic syndrome (primary or secondary) based on cytopenia in at least 1 cell line and dysplasia in 2 cell lines (and no other cause [especially deficiencies]) and a pathologic anatomic diagnosis after bone marrow punction
- 2. Refractory Anaemia (RA):
- 2.1. Blood: less than or equal to 1% blasts, less than or equal to 1 x 10^9 monocytes
- 2.2. Bone marrow: less than 5% blasts, ringed sideroblasts less than or equal to 15% of the erythroid cells
- 3. Refractory Anaemia with Ringed Sideroblasts (RARS):
- 3.1. Blood: less than or equal to 1% blasts, less than or equal to 1 x 10^9 monocytes
- 3.2. Bone marrow: less than 5% blasts, ringed sideroblasts greater than 15% of the erythroid cells
- 4. Refractory Anaemia with Excess Blasts (RAEB):
- 4.1. Blood: less than 5% blasts, less than or equal to 1×10^9 monocytes
- 4.2. Bone marrow: blasts greater than or equal to 5% to less than or equal to 20%
- 5. Chronic Myelomonocytic Leukaemia (CMML):
- 5.1. Blood: greater than 1 x 10⁹/l monocytes, less than 5% blasts
- 5.2. Bone marrow: blasts less than 20%, increase of the monocytic component
- 6. Erythrocyte transfusion need
- 7. Working knowledge of the national language
- 8. Written consent for participating this study (informed consent)

Participant type(s)

Patient

Age group

Not Specified

Sex

Both

Target number of participants

200

Key exclusion criteria

- 1. Candidate for bone marrow or organ transplantation
- 2. Medication: growth factors (Granulocyte Monocyte Colony Stimulating Factor [GM-CSF]), or Erythropoietin (EPO)
- 3. Patients who will receive an intensive chemotherapeutic treatment with a cytopenia, expected longer than 2 weeks
- 4. Refractory anaemia with excess blasts in transformation (RAEB-t):
- 4.1. Blood: 5% blasts or Auer rods
- 4.2. Bone marrow: or blasts greater than 20% to less than 30% or Auer rods
- 5. Pregnancy at the moment of inclusion
- 6. Patients with congenital severe haemolytic anaemia, like thalassemia or sickle cell anaemia
- 7. Patients with Acquired Immune Deficiency Syndrome (AIDS) or a severe congenital or acquired (e.g., iatrogenic) immunological disorder
- 8. Severe active infections at the moment of inclusion
- 9. Severe cardiac, pulmonal, neurological, metabolic or psychiatric disease at the moment of inclusion

Date of first enrolment

10/02/2002

Date of final enrolment

31/12/2006

Locations

Countries of recruitment

Netherlands

Study participating centre
Sanquin Blood Bank South West Region
Rotterdam
Netherlands

3015 CN

Sponsor information

Organisation

Sanquin Blood Bank South West Region (The Netherlands)

Sponsor details

Wytemaweg 10 Rotterdam Netherlands 3015 CN

Sponsor type

Research organisation

Website

http://www.sanquin.nl/sanquin-nl/sqn_home_nl.nsf

ROR

https://ror.org/01fm2fv39

Funder(s)

Funder type

Government

Funder Name

The Netherlands Ministry of Health, Welfare and Sport (The Netherlands)

Funder Name

National Institute of Public Health and Environmental Protection (RIVM) (The Netherlands)

Funder Name

Friends of the Blood Transfusion Foundation (Stichting Vrienden van de Bloedtransfusie) (The Netherlands)

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

Study outputs

Output typeDetailsDate createdDate addedPeer reviewed?Patient-facing?Results articleresults01/04/2003YesNo