# Dual site versus single site irrigated tip catheters in the ablation of atrial flutter

Submission date	Recruitment status	[X] Prospectively registered
27/03/2009	Stopped	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
20/04/2009 Last Edited	Stopped  Condition category	Results
		Individual participant data
30/07/2013	Circulatory System	<ul><li>Record updated in last year</li></ul>

## Plain English summary of protocol

Background and study aims

Catheter ablation is a procedure that is used to carefully destroy a diseased area of the heart and interrupt abnormal electrical circuits. This study is designed to compare three different types of catheter commonly used to perform ablations for atrial flutter (abnormal heart rhythm). In particular we are interested to know whether cooling the tip of the catheter by sprinkling water through it (irrigation) at two sites rather than one makes it more effective.

## Who can participate?

Male or female patients aged 18 years or above who are having an ablation procedure to prevent or treat atrial flutter.

## What does the study involve?

Patients will be randomly allocated to be treated with one of the three catheters. We will record how long the procedure takes, how much energy we need to give and how long we X-ray you for.

## What are the possible benefits and risks of participating?

There are no direct benefits to you of taking part in this study. Hopefully our findings will help select the best catheter design for future patients. There are no additional risks to you of taking part in this study above and beyond the risks of the procedure. Catheter ablation is associated with a risk of damage to blood vessels, damage to structures within the heart and leaving people needing a pacemaker afterwards. Sometimes the treatment does not work and people go on experiencing arrhythmias. The ablation procedure is carried out under the guidance of X-rays which deliver a small radiation dose. Partly for this reason this is not a procedure which should normally be carried out if you are pregnant.

Where is the study run from? John Radcliffe Hospital (Oxford, UK).

When is the study starting and how long is it expected to run for? The study is expected to run from June 2009 to January 2011.

Who is funding the study? The study is sponsored by the Oxford Radcliffe Hospitals NHS trust.

Who is the main contact? Dr Kim Rajappan kim.rajappan@orh.nhs.uk

## **Contact information**

## Type(s)

Scientific

#### Contact name

Dr Kim Rajappan

#### Contact details

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## Additional identifiers

**EudraCT/CTIS** number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

09/H0605/7

# Study information

## Scientific Title

A randomised controlled trial of dual site versus single site irrigated tip catheters in the ablation of atrial flutter

## Study objectives

That a difference may exist in catheter abaltion of atrial flutter using an ablation catheter with a dual ring of irrigation ports versus that with a single ring.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Not provided at time of registration

## Study design

Three-arm multicentre randomised controlled trial

## Primary study design

Interventional

## Secondary study design

Randomised controlled trial

## Study setting(s)

Hospital

## Study type(s)

Treatment

## Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

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

Atrial flutter

#### **Interventions**

Study design:

A single blind 1:1:1 randomisation schedule by means of site specific sealed envelope system controlled by study administrator.

## Study procedures:

Patients deemed by an electrophysiologist to be indicated to undergo a cavotricuspid isthmus ablation will be randomised by a site specific sealed envelope system to one of the three catheters. The ablation will be performed with coronary sinus and right atrial multipolar catheters, whilst recording radiofrequency lesion time, fluoroscopy time and procedure time. Conduction time will be assessed in both directions between proximal coronary sinus and the low right atrial free wall at 600 msec paced cycle length pre- and post-block (unless the patient is in atrial flutter at the start of the case in which case this will be assessed after termination of flutter only). Recurrence during a 30 minute post ablation wait time will be recorded as an event and additional time after this included in the final totals. Diagnostic catheters used and any mapping system used will be recorded.

#### Study treatment:

All participants will be undergoing clinically indicated cavotricuspid isthmus ablation.

#### Duration of study:

Participation will be from consent until follow up between three and four months post procedure. We expect to recruit all the patients within a twelve month period.

#### Intervention Type

Other

#### Phase

Not Applicable

## Primary outcome measure

Radiofrequency time to cavotricuspid isthmus block, time from when ablation starts to when the procedure is deemed complete.

## Secondary outcome measures

- 1. Fluoroscopy time to cavotricuspid isthmus block, the amount of x-ray screening time needed for the primary endpoint to be achieved
- 2. Total procedure time, includes all time, i.e., not only the primary endpoint time but any additional time of the procedure before and after

## Overall study start date

01/06/2009

## Completion date

01/01/2011

## Reason abandoned (if study stopped)

Objectives no longer viable

# Eligibility

## Key inclusion criteria

- 1. Patient/subject or legal representative is willing and able to give informed consent for participation in the study
- 2. Male or female, aged 18 years or above
- 3. Diagnosed with atrial flutter

## Participant type(s)

**Patient** 

## Age group

Adult

#### Lower age limit

18 Years

#### Sex

Both

## Target number of participants

63 patients

## Key exclusion criteria

Pregnancy

#### Date of first enrolment

01/06/2009

## Date of final enrolment

01/01/2011

## Locations

## Countries of recruitment

England

**United Kingdom** 

Study participating centre Cardiac Department

Oxford United Kingdom OX3 9DU

# Sponsor information

## Organisation

Oxford Radcliffe Hospitals NHS Trust (UK)

## Sponsor details

John Radcliffe Hospital
Headley Way
Headington
Oxford
England
United Kingdom
OX3 9DU
kim.rajappan@orh.nhs.uk

## Sponsor type

Hospital/treatment centre

#### Website

http://www.oxfordradcliffe.nhs.uk/home.aspx

#### **ROR**

https://ror.org/03h2bh287

# Funder(s)

## Funder type

## Other

## Funder Name

Investigator initiated and funded (UK)

# **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