

# Fluvastatin and bisoprolol for the reduction of perioperative cardiac mortality and morbidity in high-risk patients undergoing non-cardiac surgery

<b>Submission date</b> 07/03/2007	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
<b>Registration date</b> 07/03/2007	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 24/11/2011	<b>Condition category</b> Surgery	<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**Protocol serial number**  
NTR900

## Study information

## Scientific Title

### Acronym

DECREASE IV

### Study objectives

The general objective of the DECREASE-IV trial is to assess the clinical efficacy of beta-blocker therapy, statin therapy and combination therapy with beta-blockers and statins in patients undergoing major non-cardiac surgery.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Ethics approval received from the local medical ethics committee

### Study design

Randomised, active controlled, factorial group, multicentre trial

### Primary study design

Interventional

### Study type(s)

Treatment

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

Non-cardiac surgery, perioperative cardiac complications

### Interventions

A computerised version of this scheme will be applied, which enables an automated check on all in- and exclusion criteria. According to the outcome of the risk-evaluation scheme, patients with a chance of more than 2% on perioperative cardiovascular death will undergo further cardiac evaluation, including Electrocardiogram (ECG) and/or stress myocardial testing. Patients with extensive myocardial ischaemia are excluded.

Participants will then be randomised according to an open-label, factorial design between:

1. Beta-blocker therapy (bisoprolol)
2. Statin (fluvastatin)
3. Combination of beta-blockers and statins (bisoprolol and fluvastatin)
4. Neither beta-blockers nor statins (control group)

Study medication is started within zero to 30 days prior to surgery and will be continued until 30 days after surgery.

### Intervention Type

Drug

### Phase

Not Specified

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

Fluvastatin and bisoprolol

**Primary outcome(s)**

The primary efficacy objective is to determine the impact of perioperative administration of bisoprolol, fluvastatin and their combination on the incidence of 30-day cardiovascular events, i. e. the composite of cardiac death, and non-fatal Myocardial Infarction (MI), in moderate and high risk patients undergoing non-cardiac surgery.

**Key secondary outcome(s)**

1. To determine the impact of perioperative administration of bisoprolol and/or fluvastatin on:
  - 1.1. the incidence of total mortality, cardiovascular death, and non-fatal myocardial infarction during one year follow-up
  - 1.2. the length of hospital stay, and length of Intensive Care Unit (ICU)/Critical Care Unit (CCU) stay
  - 1.3. the 30-day incidence of clinically significant cardiac arrhythmias and heart failure and the need for coronary revascularisation procedures
2. The DECREASE-IV trial has five safety objectives, namely to determine the impact of the different treatments on:
  - 2.1. the 30-day congestive heart failure
  - 2.2. the 30-day incidence of clinically significant bradycardia
  - 2.3. the 30-day incidence of clinically significant hypotension
  - 2.4. the 30-day incidence of clinically significant liver dysfunction
  - 2.5. the occurrence of myopathy

**Completion date**

01/07/2008

**Eligibility****Key inclusion criteria**

1. Aged 40 years or older
2. Scheduled for elective non-cardiac surgery
3. Have an estimated risk for cardiovascular death of more than 1%

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Sex**

Not Specified

**Key exclusion criteria**

1. The use of beta-blockers
2. A contraindication for beta-blocker use

3. The use of statins prior to randomisation
4. A contraindication for statin use
5. Unstable coronary heart disease, evidence of three-vessel disease or left main disease
6. Elevated cholesterol according to the national cholesterol consensus
7. Emergency surgery
8. Inability or unwillingness to provide written informed consent
9. Previous participation in this same trial

**Date of first enrolment**

01/07/2004

**Date of final enrolment**

01/07/2008

## **Locations**

**Countries of recruitment**

Netherlands

**Study participating centre**

**Erasmus Medical Centre**

Rotterdam

Netherlands

3015 GD

## **Sponsor information**

**Organisation**

Erasmus Medical Centre (Netherlands)

**ROR**

<https://ror.org/018906e22>

## **Funder(s)**

**Funder type**

Hospital/treatment centre

**Funder Name**

Erasmus Medical Centre (Netherlands)

# 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?
<a href="#">Results article</a>	results	01/06/2009		Yes	No
<a href="#">Protocol article</a>	protocol	01/12/2004		Yes	No