# PROphylaxis of ThromboEmbolism in Critical care Trial (PROTECT) Trial: a pilot study

Submission date 01/09/2005	<b>Recruitment status</b> No longer recruiting	<ul> <li>Prospectively registered</li> <li>Protocol</li> </ul>
Registration date 01/09/2005	<b>Overall study status</b> Completed	<ul> <li>[] Statistical analysis plan</li> <li>[X] Results</li> </ul>
Last Edited 03/03/2009	<b>Condition category</b> Surgery	Individual participant data

#### Plain English summary of protocol

Not provided at time of registration

## **Contact information**

**Type(s)** Scientific

**Contact name** Dr Deborah Joanne Cook

#### **Contact details**

McMaster University CE&B HSC-2C11 1200 Main Street West Hamilton, Ontario Canada L8N 3Z5 +1 905 525 9140 (22900) debcook@mcmaster.ca

## Additional identifiers

EudraCT/CTIS number

**IRAS number** 

ClinicalTrials.gov number NCT00182143

Secondary identifying numbers

MCT-57094

## Study information

#### Scientific Title

A randomised controlled pilot study on low molecular weight heparin (LMWH) versus unfractionated heparin (UFH) in thromboembolism in critical care

#### Acronym

PROTECT

**Study objectives** We hypothesised that we would achieve the four feasibility objectives of the PROTECT Pilot.

**Ethics approval required** Old ethics approval format

**Ethics approval(s)** McMaster University Research Ethics Board approved on the 14th March 2002.

**Study design** Randomised controlled 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 Medical-surgical Intensive Care Unit (ICU) patients

Interventions LMWH (dalteparin 5000 IU once daily and placebo once daily) or UFH (5000 IU twice daily).

Intervention Type Drug

**Phase** Not Applicable

Drug/device/biological/vaccine name(s)

Heparins

#### Primary outcome measure

Scientific:

To establish the effect of LMWH versus UFH on DVT rates in medical-surgical ICU patients.

Feasibility:

1. The feasibility of timely enrolment and complete, blinded study drug administration

2. The bioaccumulation of LMWH in patients with acquired renal insufficiency and its association with bleeding

3. The feasibility of scheduled twice weekly lower limb ultrasounds

4. Recruitment rates for a future randomised trial

#### Secondary outcome measures

Scientific:

Among medical-surgical ICU patients, to establish the effect of LMWH versus UFH:

- 1. On PE (PE diagnosed by the PE diagnosis algorithm)
- 2. On bleeding events
- 3. On anti-Xa levels, and thus, the need for dose adjustment
- 4. On thrombocytopenia and heparin-induced thrombocytopenia

Overall study start date

01/02/2003

Completion date 31/12/2005

## Eligibility

#### Key inclusion criteria

- 1. Admission to Intensive Care Unit (ICU)
- 2. Either sex, 18 years of age or over
- 3. Expected ICU admission more than or equal to 72 hours

Participant type(s) Patient

Age group

Adult

**Lower age limit** 18 Years

**Sex** Both

**Target number of participants** 128

Key exclusion criteria

1. Diagnosis of trauma, post-orthopedic surgery, or neurosurgery at ICU admission

 Severe hypertension (systolic blood pressure more than or equal to 180 mmHg for two hours or more) at ICU admission. Intracranial haemorrhage at ICU admission or within three months.
 Known deep vein thrombosis (DVT), pulmonary embolism (PE) or major haemorrhage at ICU admission. Coagulopathy (defined as international normalised ratio [INR] values more than or equal to two times upper limit of normal).

4. Platelet count more than or equal to 50 x 10^9/l. Current therapeutic oral or intravenous anticoagulation for any reason. Current administration of activated protein. Estimated creatinine clearance less than or equal to 30 ml/min.

5. History of allergy to heparin or heparin-induced thrombocytopenia (HIT)

6. Receipt more than or equal to two doses of either low molecular weight heparin (LMWH) or unfractionated heparin (UFH) in ICU or Critical Care Unit (CCU)

7. Pregnancy

8. Limitation of life support or palliative care

9. No informed consent

10. Prior enrolment in this trial or currently in another related randomised trial

#### Date of first enrolment

01/02/2003

#### Date of final enrolment

31/12/2005

## Locations

Countries of recruitment Australia

Canada

Singapore

United States of America

**Study participating centre McMaster University** Hamilton, Ontario Canada L8N 3Z5

## Sponsor information

**Organisation** McMaster University Medical Centre (Canada)

#### Sponsor details

Department of Clinical Epidemiology and Biostatistics 1200 Main Street West Hamilton, Ontario Canada L8N 3Z5 +1 905 525 9140 X 22900 zytaruk@mcmaster.ca

**Sponsor type** Hospital/treatment centre

ROR https://ror.org/05jyrng31

### Funder(s)

**Funder type** Research organisation

#### Funder Name

Canadian Institutes of Health Research (CIHR) (Canada) - http://www.cihr-irsc.gc.ca (ref: MCT-57094)

## **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 type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<u>Results article</u>	results	01/12/2005		Yes	No