# Detection of novel genetic variants within the aquaporins 1 and 5

Submission date	<b>Recruitment status</b> No longer recruiting	Prospectively registered	
06/05/2009		[] Protocol	
Registration date	Overall study status	[] Statistical analysis plan	
03/07/2009	Completed	[X] Results	
Last Edited 03/07/2009	<b>Condition category</b> Respiratory	Individual participant data	

#### Plain English summary of protocol

Not provided at time of registration

## **Contact information**

**Type(s)** Scientific

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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

Detection of novel genetic polymorphisms (single nucleotide polymorphisms [SNPs]) within the aquaporins 1 and 5: an observational single-centre study

#### **Study objectives**

We hypothesised that single nucleotide polymorphisms (SNPs) within the aquaporins 1 and 5 contribute to the phenotypic variability of acute respiratory distress syndrome (ARDS), sepsis or bronchial asthma.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Local ethics committee (Vorsitzender der Ethikkommission, Institut für Pharmakologie, Universitätsklinikum Essen) approved on the 9th December 2002 (ref: 01-97-1697, 05-2776, 06-3078, 07-3313)

#### Study design

Observational single-centre case-control study

**Primary study design** Observational

**Secondary study design** Case-control study

**Study setting(s)** Hospital

**Study type(s)** Diagnostic

#### Participant information sheet

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

Aquaporines, cell migration and inflammation

#### Interventions

The following analyses will be performed on each participant:

1. Deoxyribonucleic acid (DNA) extraction from rest material of the routine diagnostic, e.g., saliva, urine or blood

2. Identification of novel DNA polymorphisms through sequencing polymerase chain reaction (PCR) products of the AQP1 and 5 promoter. The method of "slowdown PCR" should be used to amplify promoter fragments with extremely high GC content (greater than 85%).

3. Determination of transcriptional activity of haplotypes by reporter assays in different cell lines

4. Haplotype-dependent analysis of radiation and chemotherapeutics on cell proliferation in cell systems

5. Haplotype-dependent analysis of messenger ribonucleic acid (mRNA) level by quantitative real time PCR

6. Haplotype-dependent analysis of protein level by Western Blot

7. Haplotype-dependent analysis of cell migration

8. Haplotype-dependent analysis of transcription factors which bind to the polymorphic regions

by electrophoretic mobility shift assay (EMSA)

9. Genotyping of ARDS, sepsis, bronchial asthma patients and healthy caucasian subjects by restriction fragment length polymorphism (RFLP) and pyrosequencing and haplotype-dependent analysis of survival and disease course using SPSS and GraphPad Prism software

#### Intervention Type

Other

**Phase** Not Applicable

#### Primary outcome measure

Detection of SNPs wthin the Aqquaporin 1 and 5 gen which contribute to the phenotypic variability of ARDS, sepsis and bronchial asthma, measured at 30 day survival and 100 day survival

#### Secondary outcome measures

Analysis of survival, disease course and rehabilitation, measured at 30 day survival and 100 day survival

#### Overall study start date

01/01/2005

#### **Completion date**

01/01/2011

# Eligibility

#### Key inclusion criteria

1. Acute respiratory distress syndrome:

1.1. Timing: acute onset

1.2. Oxygenation: partial pressure of oxygen in arterial blood (PaO2)/fraction of inspired oxygen (FiO2) ratio less than 200 mmHg (regardless of positive end expiratory pressure [PEEP])

1.3. Chest radiograph: bilateral infiltrates seen on frontal chest radiograph

1.4. Pulmonary artery wedge (PAW): less than 18 mmHg when measured or no clinical evidence of left atrial hypertension

2. Lung function testing with body plethysmography-revealed bronchial asthma

- 3. Patients with severe sepsis
- 4. Aged 18 to 70 years, both genders

#### Participant type(s)

Patient

Age group

Adult

**Lower age limit** 18 Years

Sex

Both

Target number of participants

200 healthy caucasian subjects, 150 ARDS-, 200 sepsis- and 100 bronchial asthma patients

**Key exclusion criteria** No written informed consent is obtained

Date of first enrolment 01/01/2005

Date of final enrolment 01/01/2011

## Locations

**Countries of recruitment** Germany

**Study participating centre Klinik fur Anasthesiologie und Intensivmedizin** Essen Germany 45122

## Sponsor information

**Organisation** German Research Council (Deutsche Forschungsgemeinschaft [DFG]) (Germany)

#### Sponsor details

c/o Dr Simone Mueller Lebenswissenschaften 1 Geschaftsstelle Kennedyallee 40 Bonn Germany 53170

**Sponsor type** Research council

Website http://www.dfg.de/

ROR https://ror.org/018mejw64

## Funder(s)

**Funder type** Research council

**Funder Name** German Research Council (Deutsche Forschungsgemeinschaft [DFG]) (Germany) - pending as of 06/05/2009

### **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?
Results article	results	01/11/2008		Yes	No