

# Fat Filtration and Organ Injury following Cardiac Surgery

<b>Submission date</b> 24/08/2010	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
<b>Registration date</b> 20/09/2010	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 04/10/2017	<b>Condition category</b> Surgery	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

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

## Contact information

**Type(s)**  
Scientific

**Contact name**  
Mr Richard Issitt

**Contact details**  
Perfusion Department, Level 1 Theatres  
John Radcliffe Hospital  
Headley Way  
Headington  
Oxford  
United Kingdom  
OX3 9DU  
-  
richardissitt@btinternet.com

## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
REM09

# Study information

## Scientific Title

Quantification of lipid and leukocyte filtration and the effects on cerebral and renal injury markers and pulmonary function during cardiopulmonary bypass.

## Study objectives

The hypothesis being tested is that the filtration of lipid emboli and activated leucocytes from the blood will result in lower levels of organ injury as seen by biochemical marker analysis.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

The Oxford Research Ethics Committee C, 25/06/2009, ref: 10/H0606/30

## Study design

Single-centre blind 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 contact details below to request a patient information sheet

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

Cardiopulmonary bypass

## Interventions

Use of the RemoweLL Oxygenator containing a lipid and leucocyte depleting filter against current standard oxygenator during cardiopulmonary bypass for patients undergoing coronary artery bypass grafting.

## Intervention Type

Procedure/Surgery

## Phase

Not Applicable

**Primary outcome measure**

1. Concentration of lipid microemboli measured using light microscopy and Oil Red O staining before and after cardiopulmonary bypass compared to control
2. Percentage of activated leucocytes using flow cytometry marker CD11b before and after cardiopulmonary bypass compared to control

**Secondary outcome measures**

Levels of biochemical markers of organ injury, specifically

1. Brain (neuron-specific enolase [NSE])
  2. Kidneys (Cystatin C and standard laboratory tests) and
  3. Pulmonary function as measured by calculation of the respiratory index
- Comparison between before and after results with trial and standard oxygenator.

**Overall study start date**

06/09/2010

**Completion date**

06/09/2012

## Eligibility

**Key inclusion criteria**

1. Participant is willing and able to give informed consent for participation in the study - any documented history of cognitive impairment will exclude the patient as this may have an effect on biochemical markers of cerebral injury
2. Male or female, aged 18 years or above
3. Patients undergoing elective Coronary Artery Bypass Graft (CABG) surgery
4. Angiographically proven coronary artery stenosis

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Sex**

Both

**Target number of participants**

50 patients, 25 in each group

**Key exclusion criteria**

1. Age less than 18 or more than 90 years old
2. Emergency CABG surgery
3. Previous CABG surgery
4. Gross haemodynamic instability:
  - 4.1. Hypertension (systolic blood pressure >160mmHg)

- 4.2. Hypotension (systolic blood pressure <90mmHg)
- 4.3. Bradycardia (heart rate <60 beats/min)
- 5. Diabetes
- 6. Obesity (BMI >30)
- 7. Pre-operative heparin regime
- 8. Abnormal preoperative white cell count (<4 or >10x10<sup>9</sup> cells/L)
- 9. Renal failure (serum creatinine >150µmol/L)

**Date of first enrolment**

06/09/2010

**Date of final enrolment**

06/09/2012

## **Locations**

**Countries of recruitment**

England

United Kingdom

**Study participating centre**

**John Radcliffe Hospital**

Oxford

United Kingdom

OX3 9DU

## **Sponsor information**

**Organisation**

Eurosets s.r.l. (Italy)

**Sponsor details**

Strada Statale 12

n°143

Medolla

Italy

41036

**Sponsor type**

Industry

**ROR**

<https://ror.org/02pqj5664>

# Funder(s)

## Funder type

Industry

## Funder Name

Eurosets s.r.l. (Italy)

# 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?
<a href="#">Protocol article</a>	results	02/02/2016		Yes	No