

Manchester vascular access study

Submission date 03/04/2014	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 03/04/2014	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 24/09/2020	Condition category Urological and Genital Diseases	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

Haemodialysis (HD) is a life-saving and life-sustaining treatment. Effective HD requires a reliable, long-term and safe vascular access (approach into the blood stream). Native AV fistulae (AVFs) are the preferred vascular access for their low complication rates and longevity. However, AVFs have high early failure rates, but once matured they have a relatively longer operational life and a lower complication rate, especially from infections, when compared to prosthetic grafts (AVGs) and dialysis catheters. This study aims to understand the natural history of AVF maturation and identify factors influencing outcomes.

Who can participate?

Patients in need of upper limb AVF for haemodialysis

What does the study involve?

The patient attends three extra scans. Blood samples are taken and the patient is followed up over a monthly basis for a year. They may have two additional visits to the hospital.

What are the possible benefits and risks of participating?

Participants receive two additional scans and are closely monitored. Participants may need to have extra needles inserted for research blood tests, although every effort will be made to take them at the scheduled blood tests, thus further reducing the small risks associated with taking blood from the veins.

Where is the study run from?

Central Manchester University Hospitals NHS Foundation Trust (UK)

When is the study starting and how long is it expected to run for?

October 2011 to March 2022

Who is funding the study?

Bioconnect Systems Inc. (USA)

Who is the main contact?

Miss Carla Barrett

carla.barrett@cmft.nhs.uk

Contact information

Type(s)

Scientific

Contact name

Miss Carla Barrett

Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

12048

Study information

Scientific Title

Understanding haemodialysis vascular access maturation: a prospective observational study to understand the natural history and biology of AV access maturation and identify risk factors for AVF failure

Acronym

MANVAS

Study objectives

To understand the natural history of AVF maturation and identify factors influencing outcomes.

Ethics approval required

Old ethics approval format

Ethics approval(s)

NRES Committee North West Preston, 17/02/2011, ref. 11/H1016/3

Study design

Randomised; Interventional; Design type: Not specified, Screening

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Screening

Participant information sheet

Not available in web format, please contact carla.barrett@cmft.nhs.uk to request a patient information sheet

Health condition(s) or problem(s) studied

Topic: Renal disorders; Subtopic: Renal disorders; Disease: All Renal disorders

Interventions

Extra bloods at baseline: Patients will have an extra blood test at this point for haematological /biochemical parameters and DNA/stem cell sampling and analysis. Extra blood tests will be optional and will not be mandatory for all participating centres. Perioperatively - blood tests, patients will undergo further blood tests peri-operatively and these will be linked to their peri-operative clinically indicated blood tests; blood tests will be optional and are not mandatory for study inclusion. US scan - follow-up, Doppler ultrasound scan will be used to assess maturation.

It is anticipated that most patients will have two extra visits with tests during their visits (routine postoperative visit and scan at 6 weeks is standard clinical practice). For the minority of patients who have not used their fistula by 6 months, we will perform the final study evaluation with US at 6 months.

Intervention Type

Other

Phase

Not Applicable

Primary outcome measure

Successful (unassisted) maturation defined as either A or B
A: Use of the AVF with two needles

Secondary outcome measures

Not provided at time of registration

Overall study start date

20/10/2011

Completion date

01/03/2022

Eligibility

Key inclusion criteria

1. The participant is in need of AV dialysis access for haemodialysis.
2. Participant is available and can return for follow-up visits

Target Gender: Male & Female ; Lower Age Limit 18 years

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

Planned Sample Size: 250; UK Sample Size: 250

Key exclusion criteria

Inability to give consent and comply with the study follow-up schedule

Date of first enrolment

20/10/2011

Date of final enrolment

30/06/2015

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Manchester Royal Infirmary

Manchester

United Kingdom

M13 9WL

Sponsor information

Organisation

Central Manchester & Manchester Childrens University Hospital NHS Trust (UK)

Sponsor details

Department of Gastroenterology
Manchester Royal Infirmary
Oxford Road
Manchester
England
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M13 9PL

Sponsor type

Hospital/treatment centre

ROR

<https://ror.org/00he80998>

Funder(s)**Funder type**

Industry

Funder Name

Bioconnect Systems Inc. (USA)

Results and Publications**Publication and dissemination plan**

Not provided at time of registration

2014 thesis in https://www.research.manchester.ac.uk/portal/files/54552626/FULL_TEXT.PDF
(added 01/09/2020)

Intention to publish date**Individual participant data (IPD) sharing plan****IPD sharing plan summary**

Not provided at time of registration