# The role of hypovolaemia In the acidosis of severe malaria in children

Submission date	<b>Recruitment status</b> No longer recruiting	Prospectively registered		
22/07/2005		Protocol		
Registration date 22/07/2005	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	Individual participant data		
14/02/2020	Infections and Infestations			

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Dr Kathryn Maitland

#### Contact details

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# Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

Secondary identifying numbers

062258

# Study information

#### Scientific Title

The role of hypovolaemia In the acidosis of severe malaria in children

#### **Study objectives**

- 1. To establish to what degree hypovolaemia contributes to the clinical spectrum of severe malaria
- 2. To establish, through intervention studies, whether the acidosis of severe malaria can be corrected by adequate volume replacement
- 3. To examine the safety and efficacy of adequate volume replacement and determine the optimum intravenous fluid (0.9% saline or 4.5% albumin) to use in children with severe malaria

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Not provided at time of registration

#### 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

Severe malaria

#### **Interventions**

Open phase II randomised trial comparing the safety and efficacy of volume expansion with 0.9% saline or human albumin to control in children with severe malaria and moderate acidosis (base deficit of eight to 15) and comparing safety and efficacy of 0.9% saline and human albumin as volume expansion in children with severe malaria complicated by severe acidosis (base deficit of more than 15).

#### Intervention Type

Other

#### Phase

#### Primary outcome measure

Percentage reduction in acidosis by eight hours.

# Secondary outcome measures

- 1. Death
- 2. Severe adverse events
- 3. Neurological sequalae

## Overall study start date

01/05/2001

## Completion date

01/10/2002

# **Eligibility**

## Key inclusion criteria

- 1. A clinical feature of severe malaria (prostration, coma or deep breathing) plus P. falciparum
- 2. A base deficit of more than eight
- 3. Parental consent

## Participant type(s)

Patient

#### Age group

**Not Specified** 

#### Sex

**Not Specified** 

#### Target number of participants

53

#### Total final enrolment

53

#### Key exclusion criteria

- 1. Clinical features of oedematous malnutrition
- 2. Features suggestive of pulmonary oedema (oxygen saturations <90% and bilateral creptitations)
- 3. Raised intracranial pressure (unequal pupillary reaction to light and/or raised blood pressure concurrent with bradycardia)
- 3. Refusal of consent

#### Date of first enrolment

01/05/2001

#### Date of final enrolment

# Locations

#### Countries of recruitment

Kenya

# Study participating centre

**KEMRI** 

Kilifi

Kenya

# Sponsor information

## Organisation

Imperial College London (UK)

# Sponsor details

Level 2, Faculty Building Clinical Research Office South Kensington campus London England United Kingdom SW7 2AZ

clinical.researchoffice@imperial.ac.uk

# Sponsor type

University/education

#### Website

http://www3.imperial.ac.uk/

#### **ROR**

https://ror.org/041kmwe10

# Funder(s)

# Funder type

Charity

#### Funder Name

The Wellcome Trust (UK) (grant ref: 062258)

# **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	01/10/2003	14/02/2020	Yes	No