NO BLEeding excess with antiplatelet treatment with thromboserin during coronary artery bypass grafting (CABG)

Submission date	Recruitment status Stopped	☐ Prospectively registered		
30/07/2010		Protocol		
Registration date	Overall study status	Statistical analysis plan		
30/07/2010	Stopped Condition category	Results		
Last Edited		☐ Individual participant data		
30/11/2011	Circulatory System	Record updated in last yea		

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

6930; RC-PG-0308-10210

Study information

Scientific Title

Acronym

NO BLEeding during CABG (NOBLE 2)

Study objectives

Objective:

To evaluate whether activation of thrombosis by cardiac surgery is modified by means of serotonin 5HT2A receptor antagonism.

Study population:

60 patients with a history of coronary artery disease scheduled for coronary artery bypass grafting (CABG). Patients have clinical and investigative findings of critical coronary artery stenoses requiring revascularisation.

Study design:

Randomised controlled double blind study: patients randomised to placebo or thromboserin 10 mg stat followed by 5 mg twice daily (bd). Study duration is 12 months. The drug supply has MHRA approval.

Please note that as of 25/01/2011 this trial has never started and is currently on hold pending review of the protocol with the sponsor.

Ethics approval required

Old ethics approval format

Ethics approval(s)

MREC approved (ref: 08/H0806/91)

Study design

Single centre randomised interventional treatment trial.

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

As approved by REC

Health condition(s) or problem(s) studied

Topic: Cardiovascular; Subtopic: Cardiovascular (all Subtopics); Disease: Cardiovascular

Interventions

Placebo or thromboserin 10 mg stat followed by 5 mg bd. Total duration of 12 months.

Please note, this trial never started as the objectives were no longer viable.

Intervention Type

Drug

Phase

Phase II

Drug/device/biological/vaccine name(s)

Thromboserin

Primary outcome measure

Platelet aggregate and thrombus growth

Secondary outcome measures

Not provided at time of registration

Overall study start date

01/01/2009

Completion date

28/02/2011

Reason abandoned (if study stopped)

Objectives no longer viable

Eligibility

Key inclusion criteria

The original protocol, which received ethical and MHRA approval states. All patients requiring cardiac surgery.

Participant type(s)

Patient

Age group

Not Specified

Sex

Not Specified

Target number of participants

Planned sample size: 120

Key exclusion criteria

The original protocol, which received ethical and MHRA approval states.

Patients with bradycardia or bradyarrhythmia, unless drug induced and the drug stopped (e.g. ß-adrenoreceptor antagonists).

Patients treated with serotonin re-uptake inhibitors.

Date of first enrolment

01/01/2009

Date of final enrolment

28/02/2011

Locations

Countries of recruitment

Scotland

United Kingdom

Study participating centre
Department of Medicine and Therapeutics,
Aberdeen
United Kingdom
AB25 2ZH

Sponsor information

Organisation

Imperial College London (UK)

Sponsor details

Claybrook Centre 37 Claybrook Road London England United Kingdom W6 8LN

Sponsor type

University/education

Website

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

ROR

Funder(s)

Funder type

Government

Funder Name

National Institute for Health Research (NIHR) (UK) - Research for Innovation, Speculation and Creativity (RISC) programme

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?
HRA research summary			28/06/2023	No	No