The role and modulation of the adaptive immune response in human limb ischaemia reperfusion injury by ischaemic preconditioning

Submission date	Recruitment status	Prospectively registered
09/08/2008	No longer recruiting	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
28/08/2008	Completed	Results
Last Edited	Condition category	Individual participant data
28/08/2008	Surgery	[] Record updated in last year

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

N/A

Study information

Scientific Title

Study objectives

That local ischaemic preconditioning will alter bedside physiological parameters and systemic T cell activation, cytokine production and release in otherwise healthy patients undergoing lower limb surgery under tourniquet control.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Clinical Research Ethical Committee at University College Hospital Galway. Date of approval: 15 /12/2005 (ref: 48/05)

Study design

Prospective, single-centre, randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Prevention

Participant information sheet

Health condition(s) or problem(s) studied

Reperfusion injury

Interventions

Consecutive patients undergoing anterior cruciate ligament repair were randomised to surgery alone or surgery preceded by three 5 minute cycles of local ischaemic preconditioning to the operative limb within 1 hour of surgery. Surgery to include 1 hour of limb ischaemia. An operative tourniquet was placed on the upper thigh and the limb was exsanguinated using a Rhys Davies air sleeve. Tourniquet pressure was set at 100 mmHg above systolic brachial blood pressure. Ischaemia was verified by arterial doppler distal to the tourniquet. Systemic venous blood was collected on admission, at 4 and 24 hours post reperfusion (post-operatively).

Intervention Type

Procedure/Surgery

Phase

Primary outcome measure

- 1. Change in perioperative systemic mean arterial pressure and heart rate
- 2. Alterations in systemic T cell subsets as evaluated by flow cytometry, assessed on the systemic venous blood collected on admission, at 4 and 24 hours post reperfusion (post-operatively)
- 3. Alterations in systemic cytokine levels (Interleukin-2 [IL2] and interferon, gamma [IFNg]), assessed on the systemic venous blood collected on admission, at 4 and 24 hours post reperfusion (post-operatively)
- 4. Co-culture production of IL-2, IL-4, IL-10 and IFNg, assessed using the samples taken from patients 4 hours post reperfusion. Controls were taken from healthy volunteers.
- 5. Co-culture alteration in T cell subsets, assessed using the samples taken from patients 4 hours post reperfusion. Controls were taken from healthy volunteers.

Secondary outcome measures

No secondary outcome measures

Overall study start date

01/07/2006

Completion date

30/06/2007

Eligibility

Key inclusion criteria

Patients (both males and females) diagnosed with anterior cruciate ligament rupture by magnetic resonance imaging (MRI) or arthroscopy and undergoing patellar tendon graft reconstruction under tourniquet control.

Participant type(s)

Patient

Age group

Adult

Sex

Both

Target number of participants

25

Key exclusion criteria

- 1. Age under 18 or over 45
- 2. Having smoked in the preceding 3 months
- 3. Diagnosis of systemic auto-immune condition (e.g., thyroxicosis, inflammatory bowel/ coeliac disease, rheumatoid arthritis, systemic lupus erythematosus [SLE])
- 4. Diabetes
- 5. Concurrent medical condition

- 6. Pregnancy
- 7. Medications other than simple analgesics and non-steroidal anti-inflammatory drugs (NSAID)

Date of first enrolment

01/07/2006

Date of final enrolment

30/06/2007

Locations

Countries of recruitment

Ireland

Study participating centre Department of Surgery

Galway Ireland

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Sponsor information

Organisation

National University of Ireland Galway (Ireland)

Sponsor details

c/o Prof Michael Kerin University College Hospital Department of Surgery Clinical Science Institute Galway Ireland

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Sponsor type

University/education

Website

http://www.nuigalway.ie/surgery

ROR

https://ror.org/03bea9k73

Funder(s)

Funder type

University/education

Funder Name

National University of Ireland Galway, Department of Surgery (Ireland)

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