

# Clinical Evaluation of the AK-200 Ultra and on-line HemoDiaFiltration with Bicarbonate Substitution Fluid

<b>Submission date</b> 26/05/2005	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 15/09/2005	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 14/09/2009	<b>Condition category</b> 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

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

Dr Marc Dorval

### 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**

### **Acronym**

CLEAN-HDF study

### **Study objectives**

The CLEAN-HDF study is a randomized controlled trial comparing the performance of low-flux hemodialysis, high-flux hemodialysis and on-line hemodiafiltration with a cross over study design on a group of 48 ESRD patients using GAMBRO AK-200 Ultra generator. Research hypothesis are to demonstrate that mean % reduction of B2-microglobuline plasma concentration are superior in on-line hemodiafiltration compared to low- and high- flux hemodialysis and that the generator AK200 Ultra is capable of producing reliable sterile substitution fluid according to the European Pharmacopea

### **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)**

Not specified

### **Study type(s)**

Not Specified

### **Participant information sheet**

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

Renal replacement therapy

### **Interventions**

Randomised cross-over study of three hemodialysis modalities: low-flux haemodialysis, high-flux hemodialysis and on-line haemodiafiltration

### **Intervention Type**

Other

### **Phase**

Not Applicable

**Primary outcome measure**

1. Mean % reduction of B2-microglobuline plasma concentration during a mid-week session
2. Substitution fluid analysis (microbiology: culture and endotoxins and biochemical content)

**Secondary outcome measures**

A variety of exploratory outcomes: biochemical [for example Kt/V, total urea, creatinine of B2-microglobulin clearance, pre-post study change in b2-microglobulin concentrations, CRP, etc], dialysis tolerance, quality of life, nutritional parameters, etc).

**Overall study start date**

01/06/2005

**Completion date**

30/06/2006

**Eligibility****Key inclusion criteria**

Chronic end-staged renal diseased (ESRD) patients on haemodialysis

**Participant type(s)**

Patient

**Age group**

Not Specified

**Sex**

Both

**Target number of participants**

48

**Key exclusion criteria**

1. Hemodialysis for less than 3 months
2. Current or recent hospitalisation (less than 6 weeks) prior to screening period
3. Dysfunctional or infected vascular access
4. Intolerance to high-flux hemodialyser
5. Intolerance to multi-vitamin supplement
6. Severe co-morbidities limiting expected life expectancy to less than 6 months
7. History of severe congestive heart failure (New York Heart Association [NYHA] class III and IV)
8. Uncontrolled hypertension (HTN) (systolic blood pressure [BP] over 200 or diastolic over 110) during the two week screening period
9. Significant and instable hypotension (systolic BP less than 90 or greater than 2 hypotension episodes/dialysis session for more than 3 sessions) during the two week screening period
10. Use of midodrine
11. Hepatite B, C or human immunodeficiency virus (HIV) positive serologies
12. Presence of pure red cell aplasia (PRCA)
13. Pregnancy or lactating
14. Current participation (or for less than 3 months) in another intervention trial

15. Presence of psychiatric, dependance or any other health problems that may compromise the hability of the subject to signed the informed consent form and/or affect compliance to the study

**Date of first enrolment**

01/06/2005

**Date of final enrolment**

30/06/2006

## **Locations**

**Countries of recruitment**

Canada

**Study participating centre**

**330 Université**

Moncton

Canada

E1C 2Z3

## **Sponsor information**

**Organisation**

Beauséjour Medical Research Institute (L'Institut de Recherche Médicale Beauséjour) (IRMB)  
(Canada)

**Sponsor details**

37 Providence

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E1C 8X3

**Sponsor type**

Research organisation

**ROR**

<https://ror.org/029tnqt29>

## **Funder(s)**

**Funder type**

Industry

**Funder Name**

Gambro (Canada)

**Funder Name**

Nephrology Department of the Beauséjour Regional Health Authority (Canada)

## **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