

# A trial of fructose-di-phosphate treatment in oleander poisoning

<b>Submission date</b> 15/01/2009	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered
<b>Registration date</b> 16/01/2009	<b>Overall study status</b> Completed	<input checked="" type="checkbox"/> Protocol
<b>Last Edited</b> 21/03/2013	<b>Condition category</b> Injury, Occupational Diseases, Poisoning	<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

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## Additional identifiers

**Protocol serial number**  
071669

## Study information

**Scientific Title**  
Fructose-1, 6-diphosphate (FDP) as a novel antidote for yellow oleander-induced cardiac toxicity: a randomised controlled double-blind study

**Study objectives**

That adding fructose-1, 6-diphosphate (FDP) to routine treatment will reverse serious arrhythmias in oleander poisoning.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

University of Peradeniya, Sri Lanka gave approval on the 24th September 2008 (ref: 2008/ec/48)

**Study design**

Double-blind randomised placebo controlled trial

**Primary study design**

Interventional

**Study type(s)**

Treatment

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

Cardiac toxicity from oleander self-poisoning

**Interventions**

Patients will be randomised to FDP (250 mg/kg loading dose over 20 minutes followed by 6 mg /kg/hr for 24 hours) or a placebo in a 1:1 ratio (i.e 120 patients will receive FDP and 120 patients will receive placebo). The random allocation is concealed and random sequences are generated by specially designed computer program.

All patients will continue to receive standard treatment. This standard treatment is determined by the attending physician who maintains clinical responsibility for all patients. While there may be some minor variation between hospitals current care consists of patient resuscitation, gastrointestinal decontamination when indicated, and atropinisation. All treatment is recorded by the research team. This intervention represents an added treatment to the existing standard of care.

**Intervention Type**

Drug

**Phase**

Not Specified

**Drug/device/biological/vaccine name(s)**

Fructose-1, 6-diphosphate (FDP)

**Primary outcome(s)**

Reversion to sustained sinus rhythm with a heart rate greater than 50/minute within 2 hours of completion of bolus.

**Key secondary outcome(s)**

1. Death
2. Reversal of hyperkalaemia on the 6, 12, 18 and 24 hour samples
3. Maintenance of sinus rhythm on the Holter monitor (reflecting the efficacy of the infusion)

**Completion date**

20/02/2011

## Eligibility

**Key inclusion criteria**

Patients (greater than 12 years of age, both sexes) with any of the following manifestations of oleander-induced cardiac toxicity:

1. Second degree heart block
2. Third degree heart block
3. Bradycardia with a heart rate of less than 40 beats/minute
4. Any rhythm with a systolic blood pressure below 80 mmHg

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Other

**Sex**

All

**Key exclusion criteria**

1. Patients with documented ischaemic heart disease or valvular heart disease. These patients may still be eligible for open label compassionate use of FDP.
2. Patients presenting with cardiac arrest on admission. These patients will be eligible for open label compassionate use of FDP.
3. Age less than 12 years

**Date of first enrolment**

01/02/2009

**Date of final enrolment**

20/02/2011

## Locations

**Countries of recruitment**

Sri Lanka

**Study participating centre****SACTRC**

Peradeniya

Sri Lanka

20400

**Sponsor information****Organisation**

South Asian Clinical Toxicology Research Collaboration (SACTRC) (Sri Lanka)

**ROR**<https://ror.org/04z435g27>**Funder(s)****Funder type**

Charity

**Funder Name**

International Collaborative Research Grant:

**Funder Name**

The Wellcome Trust (UK) (grant ref: 071669)

**Funder Name**

National Health and Medical Research Council (NHMRC) (Australia)

**Alternative Name(s)**

National Health and Medical Research Council, Australian Government, NHMRC National Health and Medical Research Council, NHMRC

**Funding Body Type**

Government organisation

**Funding Body Subtype**

National government

**Location**

Australia

# Results and Publications

## Individual participant data (IPD) sharing plan

### IPD sharing plan summary

#### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Protocol article</a>	protocol	29/06/2010		Yes	No