

Non-invasive haemodynamics to probe physiology and echocardiographic dyssynchrony in chronic heart failure

Submission date 29/04/2010	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 29/04/2010	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
Last Edited 11/08/2014	Condition category Circulatory System	<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

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers
7356

Study information

Scientific Title

Acronym

DRN 374 (V3E)

Study objectives

Patients with heart failure and pre-existing cardiac resynchronisation therapy (biventricular pacemakers) will be recruited from the pacemaker and heart failure clinics of our institution. Patients will be positioned on the couch. Continuous blood pressure monitoring will be undertaken on a beat by beat basis using the Finapres® device, and electrocardiogram (ECG) recordings will be made simultaneously. Data analysis will occur off line after measurements have been taken.

Hypothesis 1:

The patient will have the pacemaker settings altered while undergoing simultaneous measurements of 3D echo and blood pressure monitoring. These will be taken for 10 consecutive beats before and after the change in the pacemaker setting. The AV delay will be kept constant throughout. Analysis of data will occur offline once measurements are acquired. We will identify whether stroke volume measured in this way provides a reliable method for measuring the best interventricular delay when compared to non-invasive blood pressure.

Hypothesis 2:

We will identify the VV delays (pacemaker settings) giving the smallest amount of intraventricular dyssynchrony, hence allowing the most coordinated contraction by: 2.1. 2-segment TDI echo

2.2. On 12-segment 3D model

2-segment dyssynchrony measurements will be taken using pulse wave Doppler from the septum and lateral wall. 12-segment dyssynchrony measurements will be taken from the septal, lateral, anteroseptal, posterior, anterior and inferior regions at two different levels. The average of 5 measurements for each setting will be used. After offline analysis, the patient will return on a subsequent visit for haemodynamic comparison of the two echocardiographically optimal VV delays, by performing multiple transitions between the two optima while recording non-invasive blood pressure.

Ethics approval required

Old ethics approval format

Ethics approval(s)

MREC approved, ref: 08/H0708/5

Study design

Non-randomised interventional process of care treatment trial

Primary study design

Interventional

Secondary study design

Non randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet**Health condition(s) or problem(s) studied**

Topic: Diabetes Research Network; Subtopic: Type 2; Disease: Cardiovascular disease

Interventions

Patients are recruited and pacemaker settings are changed. Echocardiographic measurements are taken multiple times at each setting and the optimal for each parameter identified.

Study entry: registration only

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

The optimal pacemaker setting from echo techniques is compared against our gold standard (BP).

Secondary outcome measures

Not provided at time of registration

Overall study start date

01/12/2008

Completion date

01/12/2011

Eligibility**Key inclusion criteria**

1. Aged 18 years or above, either sex
2. Ejection fraction less than 40%
3. Biventricular pacemaker in situ

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

Planned Sample Size: 60; UK Sample Size: 60

Key exclusion criteria

1. Poor lead position
2. Pure diastolic dysfunction in the absence of systolic dysfunction
3. Decompensated heart failure

Date of first enrolment

01/12/2008

Date of final enrolment

01/12/2011

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

59 North Wharf Road

London

United Kingdom

W2 1LA

Sponsor information

Organisation

Imperial College Healthcare NHS Trust (UK)

Sponsor details

International Centre for Circulatory Health

59 North Wharf Road

London

England

United Kingdom

W2 1LA

Sponsor type

Hospital/treatment centre

Website

<http://www.imperial.nhs.uk/>

ROR

<https://ror.org/056ffv270>

Funder(s)

Funder type

Charity

Funder Name

British Heart Foundation (BHF) (UK)

Alternative Name(s)

the_bhf, The British Heart Foundation, BHF

Funding Body Type

Private sector organisation

Funding Body Subtype

Trusts, charities, foundations (both public and private)

Location

United Kingdom

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