ISRCTN78348355 https://doi.org/10.1186/ISRCTN78348355

Remote ischaemic postconditioning in the clinical setting

Submission date	Recruitment status	[ ] Prospectively registered
18/06/2010	No longer recruiting	[ ] Protocol
Registration date	**Overall study status**	[ ] Statistical analysis plan
18/06/2010	Completed	[ ] Results
Last Edited	**Condition category**	[ ] Individual participant data
11/04/2017	Circulatory System	[ ] 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
5199

Study information

Scientific Title
A study investigating the cardioprotective benefits of remote ischaemic postconditioning in different clinical settings of myocardial ischaemia-reperfusion injury

Study objectives
The study proposes to examine the cardioprotective potential of 'remote ischaemic postconditioning' in the clinical setting of percutaneous coronary angioplasty using transient fore-arm ischaemia.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Joint UCL/UCLH Committees on Ethics of Human Research (Committee Alpha), 15/09/2005, ref: 05/Q502/102

Study design
Multicentre randomised interventional treatment trial

Primary study design
Interventional

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Topic: Cardiovascular, Neurological; Subtopic: Cardiovascular (all Subtopics), Neurological (all Subtopics); Disease: Cardiovascular, Nervous system disorders

Interventions
Control arm:
Uninflated blood pressure cuff will be placed on the patients's upper arm for the duration of 30 minutes.

Intervention arm:
Inflation of a blood pressure cuff placed around the upper arm. The cuff will be inflated to 200 mmHg for 5 minutes after which it will be deflated for 5 minutes. This procedure will be repeated up to three times in total based on randomisation protocol.

Intervention Type
Other

Phase
Not Applicable

Primary outcome(s)
Myocardial injury, measured by cTnT and CK-MB release over 24 hours after PCI.

Key secondary outcome(s))
1. All-cause mortality, recurrence of symptoms, heart failure and hospitalisation at 1 year after primary percutaneous coronary intervention (PCI)
2. Major adverse cardiovascular events (MACE) at 1 year
3. Myocardial infarct size, 3 months after primary PCI as measured by cardiac magnetic

resonance imaging (MRI)
4. Myocardial infarct size and myocardial salvage ratio (infarct size/area at risk) as measured by cardiac MRI

Completion date
06/11/2011

Eligibility

Key inclusion criteria
1. Patients undergoing percutanous coronary interventions in the elective and emergecy setting and patients undergoing thrombolysis for acute myocardial infarction
2. Aged greater than 18 years and less than 85 years
3. Male and female patients

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Adult

Lower age limit
18 years

Sex
All

Key exclusion criteria
1. Aged less than 18 years and greater than 85 years
2. Patients with severe renal impairment (estimated glomerular filtration rate [EGFR] less than 45 ml/min/1.73m2)
3. Patients with severe hepatic impairment
4. Patients with cardiac arrest in the previous 6 weeks

Date of first enrolment
01/06/2008

Date of final enrolment
06/11/2011

Locations

Countries of recruitment
United Kingdom

England

Study participating centre
University College London
London
United Kingdom
WC1E 6BT

Sponsor information

Organisation
University College London (UCL) (UK)

ROR
https://ror.org/02jx3x895

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

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?
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes