

# Low molecular weight heparin (FRagmin®) in pregnant women with a history of Uteroplacental Insufficiency and Thrombophilia: a randomised trial

<b>Submission date</b> 20/12/2005	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 20/12/2005	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 30/11/2011	<b>Condition category</b> Pregnancy and Childbirth	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

**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**  
N/A

## Study information

## Scientific Title

### Acronym

FRUIT-study

### Study objectives

Low molecular weight heparin plus aspirin reduces the recurrence of preeclampsia and/or small for gestational age infants before 34 weeks gestational age in women with documented thrombophilia with a history of preeclampsia and/or small for gestational age infants with birth before 34 weeks.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Ethics approval received from the local medical ethics committee

### Study design

Multicentre, randomised, active controlled, parallel group trial

### Primary study design

Interventional

### Study type(s)

Treatment

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

Pre-eclampsia, Small for Gestational Age (SGA)

### Interventions

Two armed study:

A: daily dalteparin (starting between 6 - 12 weeks pregnancy) throughout gestation plus aspirin (starting before 12 weeks gestation to 36 weeks)

B: aspirin only (starting before 12 weeks to 36 weeks)

Both arms receive regular controls for women with a history of preeclampsia. In arm A: examination of Anti Factor Xa activity at 20 and 30 weeks.

### Intervention Type

Drug

### Phase

Not Specified

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

Dalteparin, aspirin

### Primary outcome(s)

Reduction of preeclampsia before 34 weeks gestational age.

**Key secondary outcome(s)**

1. Reduction in spontaneous abortion, maternal admission to hospital and neonatal intensive care admission
2. Increase in gestational age and weight at birth

**Completion date**

31/12/2009

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

1. Patients with a history of preeclampsia and/or small for gestational age infants before 34 weeks gestation and documented thrombophilia restricted to protein C and protein S deficiency, Activated Protein C (APC) resistance, Factor V Leiden mutation, Factor II mutation, anticardiolipin antibodies, lupus anticoagulant
2. Aged greater than 18 years
3. Informed consent

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Sex**

All

**Key exclusion criteria**

1. Antithrombin deficiency
2. Diabetes mellitus
3. Known malignancy
4. Gastro-duodenic ulcer
5. Severe renal or hepatic insufficiency
6. Thrombo-embolism in history
7. Hemorrhagic diathesis
8. Idiopathic thrombocytopenia

**Date of first enrolment**

20/01/2000

**Date of final enrolment**

31/12/2009

**Locations**

## Countries of recruitment

Netherlands

## Study participating centre

VU Medical Center

Amsterdam

Netherlands

1007 MB

## Sponsor information

### Organisation

VU University Medical Center (The Netherlands)

### ROR

<https://ror.org/00q6h8f30>

## Funder(s)

### Funder type

Industry

### Funder Name

Pharmacia & Upjohn Company (The Netherlands)

## 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?
<a href="#">Results article</a>	results	01/01/2012		Yes	No
<a href="#">Study website</a>	Study website	11/11/2025	11/11/2025	No	Yes