# Inflammation, oxidative stress and wound healing after ablation of atrial fibrillation

Submission date	Recruitment status No longer recruiting	Prospectively registered		
27/11/2007		Protocol		
Registration date	Overall study status Completed	Statistical analysis plan		
11/12/2007		[X] Results		
Last Edited	Condition category	[] Individual participant data		
31/05/2019	Circulatory System			

#### Plain English summary of protocol

Not provided at time of registration

# Contact information

#### Type(s)

Scientific

#### Contact name

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#### Contact details

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# Additional identifiers

**EudraCT/CTIS** number

IRAS number

ClinicalTrials.gov number

# Secondary identifying numbers

07098 (ref. no. of The Medical-Scientific Fund of the Mayor of Vienna)

# Study information

#### Scientific Title

Time course of biochemical markers of inflammation, oxidative stress and wound healing after ablation of atrial fibrillation

#### **Study objectives**

- 1. Radiofrequency ablation of Atrial Fibrillation (AF) affects biochemical markers of inflammation, oxidative stress and wound healing
- 2. The ablation-induced changes of the assessed biochemical markers correlate with the ablation-induced structural changes, with the amount of energy applied during ablation and with the AF recurrence rate after ablation

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Ethics approval received from the Ethics Committee of the Medical University of Vienna on the 13th February 2007 (ref: 028/2007) - www.meduniwien.ac.at/ethik.

#### Study design

Observational, prospective, single centre, longitudinal study

#### Primary study design

Observational

#### Secondary study design

Cohort study

#### Study setting(s)

Hospital

#### Study type(s)

Diagnostic

#### Participant information sheet

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

Atrial fibrillation

#### **Interventions**

Observational trial:

The included patients will undergo a radiofrequency ablation procedure comprising:

- 1. A CARTO-quided left atrial circumferential ablation
- 2. A Lasso-guided segmental pulmonary vein isolation, and
- 3. Ablation of complex fractionated potentials

Venous blood sampling will be performed before and 6 hours, 24 hours, 48 hours, 7, 28, 90 and 180 days after ablation in order to determine biochemical markers of inflammation, wound healing and oxidative stress. Transthoracal echocardiography and cardiac MRI will be conducted before and 6 months after ablation in order to assess ablation-induced structural changes. Successful ablation will be defined as no recurrence of atrial fibrillation persisting or developing beyond a period of 3 months after ablation.

#### Intervention Type

Other

#### Phase

**Not Specified** 

#### Primary outcome measure

- 1. Biochemical markers of inflammation, oxidative stress and wound healing at the above specified timepoints
- 2. Ablation-induced structural atrial changes evaluated by MRI and echocardiography at the above specified timepoints

#### Secondary outcome measures

- 1. Correlation of the assessed biochemical markers with ablation-induced structural changes, energy application data and AF recurrence rate after ablation
- 2. Complications

#### Overall study start date

30/11/2007

#### Completion date

01/08/2008

# Eligibility

#### Key inclusion criteria

- 1. Genders eligible for study: both
- 2. Age older than 18 years
- 3. Symptomatic, drug-resistant paroxysmal atrial fibrillation (self-terminating episodes lasting less than 7 days)
- 4. Patients referred to our department for catheter ablation of atrial fibrillation
- 5. Adequate anticoagulation for at least 1 month prior to admission (oral anticoagulation (target International Normalised Ratio [INR] 2 to 3) or treatment with weight-adjusted low-molecular-weight heparin

#### Participant type(s)

Patient

#### Age group

Adult

# Lower age limit

18 Years

#### Sex

Both

#### Target number of participants

30

#### Total final enrolment

30

#### Key exclusion criteria

- 1. Pregnancy
- 2. Ongoing infections
- 3. Intracardiac thrombosis detected by trans-oesophageal echocardiography
- 4. Contraindications to anticoagulation
- 5. History of myocardial infarction or cardiac surgery within the last 3 months prior to admission
- 6. Pacemaker or other contraindications to Magnetic Resonance Imaging (MRI)
- 7. Denial or withdrawal of informed consent
- 8. Life expectancy less than 1 year

#### Date of first enrolment

30/11/2007

#### Date of final enrolment

01/08/2008

# Locations

#### Countries of recruitment

Austria

# Study participating centre Waehringer Guertel 18-20

Vienna Austria

1090

# Sponsor information

#### Organisation

Medical University of Vienna (Austria)

#### Sponsor details

Department of Internal Medicine II Division of Cardiology Währinger Gürtel 18-20 Vienna Austria 1090

#### Sponsor type

University/education

#### Website

http://www.meduniwien.ac.at/

#### **ROR**

https://ror.org/05n3x4p02

# Funder(s)

#### Funder type

Government

#### **Funder Name**

The Medical-Scientific Fund of the Mayor of Vienna (Medizinisch-Wissenschaftlicher Fonds des Burgermeisters der Bundeshauptstadt Wien) (Austria) (ref: 07098) - http://www.wien.gv.at/fonds/gesundheit/index.htm

# **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

#### **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	20/10/2011	31/05/2019	Yes	No
Results article	results	01/03/2012	31/05/2019	Yes	No