

# Incidence of postoperative complications in diabetes or hyperglycaemia

<b>Submission date</b> 22/05/2013	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 14/06/2013	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 14/06/2013	<b>Condition category</b> Nutritional, Metabolic, Endocrine	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

Hyperglycaemia (high blood sugar) may interfere with many biological processes in a recovering surgical patient. In particular in the perioperative phase (at or around the time of operation), some research points towards a strong link on inflammation, renal failure and even cardiac problems in those patients with severely increased glycaemia levels. The aim of the study is to assess in patients undergoing intermediate or high risk surgery the occurrence rate of disturbed glycaemia and to study the effects on outcome variables such as mortality, length of stay in the hospital, infection rate and occurrence of acute kidney injury. These findings will help set up a quality improvement program in our hospital settings.

### Who can participate?

All surgical patients who underwent moderate to high-risk surgery in 2011, will be included.

### What does the study involve?

Glycaemia preoperatively and on day of surgery, as well as up to 7 days postoperatively will be assessed. Other variables like haemoglobin and creatinine will also be noted in the same way. Also, presence of infection based on clinical symptoms and C-reactive protein (CRP) increase postoperatively (an inflammatory indicator which is also related to occurrence of infection), development of acute renal failure, 30-day mortality, total mortality and finally length of stay in the hospital will be assessed.

### What are the possible benefits and risks of participating?

As this is an observational study there is no risk involved.

### Where is the study run from?

The study is run from the University Hospital, department of Anesthesiology and Perioperative Medicine in Brussels.

### When is the study starting and how long is it expected to run for?

The study started in April 2013 and is expected to last till September 2013.

Who is funding the study?  
University Hospital Brussels (Belgium) - Department of Anaesthesiology and Perioperative Medicine

Who is the main contact?  
Jan Poelaert, MD, PhD  
University Hospital Brussels

## Contact information

**Type(s)**  
Scientific

**Contact name**  
Prof Jan Poelaert

**Contact details**  
UZ Brussel  
Laarbeeklaan 101  
Brussels  
Belgium  
1090

## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
N/A

## Study information

**Scientific Title**  
Incidence of postoperative complications in diabetes or hyperglycaemia: a retrospective observational study

**Study objectives**  
Assessment of postoperative complications in diabetes or hyperglycaemic patients such as prolonged length of stay in the hospital, infections, renal failure and 30-day mortality.

**Ethics approval required**  
Old ethics approval format

**Ethics approval(s)**  
Ethics Committee UZ Brussel, Approval date: 26/03/2013, ref: 2013/068

**Study design**

Retrospective observational study

**Primary study design**

Observational

**Secondary study design**

Cohort study

**Study setting(s)**

Hospital

**Study type(s)**

Other

**Participant information sheet**

No patient information sheet, as this study is retrospective and observational. The ethics committee waived the use of a patient information sheet.

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

Diabetes Mellitus, Hyperglycaemia, postoperative

**Interventions**

Variables to be included are glycaemia preoperatively and on day of surgery, postoperative day (POD) 2 and 3, as well as up to 7 days postoperatively (POD 7).

Other variables will also be noted in the same way: haemoglobin, creatinine, and C-reactive protein (CRP). Also, presence of infection, based on clinical symptoms and CRP increase postoperatively, 30-day mortality and total mortality and finally length of stay in the hospital will be assessed.

**Intervention Type**

Other

**Phase**

Not Applicable

**Primary outcome measure**

30-day mortality

**Secondary outcome measures**

1. Infections
2. Renal failure
3. Length of stay in the hospital

**Overall study start date**

01/04/2013

**Completion date**

01/09/2013

# Eligibility

## Key inclusion criteria

All patients (18-85 years) undergoing non-cardiac surgery in 2012  
Diabetes patients, hyperglycaemic patients, with normalization of glycaemia after the stress period of the surgery and normoglycaemic patients.

## Participant type(s)

Patient

## Age group

Adult

## Lower age limit

18 Years

## Upper age limit

85 Years

## Sex

Both

## Target number of participants

The number is not fixed and depends completely on the surgical activity in that particular investigation year 2011.

## Key exclusion criteria

1. Local regional anesthesia
2. Cardiac surgery

## Date of first enrolment

01/04/2013

## Date of final enrolment

01/09/2013

# Locations

## Countries of recruitment

Belgium

## Study participating centre

UZ Brussel

Brussels

Belgium

1090

# Sponsor information

## Organisation

University Hospital Brussels (Universitair Ziekenhuis Brussel [UZ Brussel]) (Belgium)

## Sponsor details

Department of Anaesthesiology and Perioperative Medicine  
Laarbeeklaan 101  
Brussels  
Belgium  
1090

## Sponsor type

Hospital/treatment centre

## Website

<http://www.uzbrussel.be>

## ROR

<https://ror.org/038f7y939>

# Funder(s)

## Funder type

Hospital/treatment centre

## Funder Name

University Hospital Brussels (Belgium) - Department of Anaesthesiology and Perioperative Medicine

# 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