

# Microparticle orientated risk evaluation and prediction of pre-eclampsia among risk pregnancies

<b>Submission date</b> 02/04/2009	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 28/07/2009	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 28/07/2009	<b>Condition category</b> Pregnancy and Childbirth	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<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

**Contact name**  
Dr Justine Sayuri Fitzgerald

**Contact details**  
Abteilung für Geburtshilfe der Universitätsfrauenklinik Jena  
Bachstr. 18  
Jena  
Germany  
07743  
+49 (0)3641 514 320  
fitzgerald@med.uni-jena.de

## Additional identifiers

**Protocol serial number**  
FI 1635/1-1

## Study information

**Scientific Title**

# Microparticle Orientated Risk Evaluation and Prediction of Pre-eclampsia Among Risk gravidas: a multicentre prospective phase I prognostic marker study

## Acronym

MORE PrePARd

## Study objectives

The objective is to elucidate whether serum microparticle concentrations of pregnant women with abnormal uterine perfusion (a high risk group), both measured at 20th week of gestation, can discriminate between women who will develop preeclampsia (case group) and those who will not (control group).

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Local ethics committee (Ethik-Kommission der Universitätsklinikum Jena) approved on the 26th August 2008 (ref: 2370-08/08)

## Study design

Multicentre prospective blinded phase I prognostic marker pilot study

## Primary study design

Interventional

## Study type(s)

Treatment

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

Pre-eclampsia/pregnancy

## Interventions

Total of 80 - 100 pregnant women with abnormal uterine perfusion, including 20 women who develop pre-eclampsia during pregnancy (cases) and 60 - 80 woman who do not develop pre-eclampsia (controls). Patients with risk pregnancies for preeclampsia will be recruited for marker measurement between 19th and 21st week of gestation.

## Experimental test:

Measurement of syncytiotrophoblast microparticle (STBM) concentration in maternal serum at time of study inclusion.

## Reference test:

Assessment of objective clinical symptoms of preeclampsia according to the German Society of Obstetrics and Gynecology (DGGG)-diagnostic criteria at 8-week intervals:

1. Hypertension defined as blood pressure (RR) systolic greater than or equal to 140 mmHg and /or diastolic greater than or equal to 90 mmHg, and
2. Proteinuria: Dipstick-Test greater than or equal to 1+ or greater than or equal to 300 mg total protein in 24-hour urine collection

There are two optional visits between the 19th and 21st week of gestation and birth: first visit at 27th to 29th week of gestation and second visit at 35th to 37th week of gestation to monitor these risk pregnancies. Final outcome will be assessed at 6 weeks post-partum.

### **Intervention Type**

Other

### **Phase**

Phase I

### **Primary outcome(s)**

Development of pre-eclampsia during current pregnancy. Final outcome will be assessed 6 weeks post-partum either by study doctor or attending doctor.

### **Key secondary outcome(s)**

Pre-eclampsia associated complications:

1. Differentiation early onset/severe and late onset/mild pre-eclampsia
2. Intra-uterine growth restriction (IUGR) or small for gestational age (SGA)
3. Induction of preterm labour/delivery
4. Intra-uterine foetal demise (IUFD)
5. Placental abruption

Final outcome will be assessed 6 weeks post-partum either by study doctor or attending doctor.

### **Completion date**

20/05/2009

## **Eligibility**

### **Key inclusion criteria**

1. Abnormal uterine artery Doppler ultrasound
2. Singleton pregnancy
3. Appropriate-for-gestational-age foetus
4. 19th - 21st week of gestation
5. Healthy, normotensive gravidas
6. Women, all ages considered normal-risk pregnancy: 18 - 40 years

### **Participant type(s)**

Patient

### **Healthy volunteers allowed**

No

### **Age group**

Adult

### **Lower age limit**

18 years

**Sex**

Female

**Key exclusion criteria**

1. Concurrent participation in interventional clinical studies
2. Multiple pregnancy
3. Premature rupture of membrane (PROM)
4. Suspected/diagnosed infected amnion syndrome (IAS)
5. Pre-term labour/cervical incompetence
6. Foetal genopathia
7. Suspected foetal defects
8. Pre-existing maternal disease, e.g. diabetes mellitus, cardiovascular or renal disease

**Date of first enrolment**

20/04/2009

**Date of final enrolment**

20/05/2009

**Locations****Countries of recruitment**

Germany

**Study participating centre**

Abteilung für Geburtshilfe der Universitätsfrauenklinik Jena

Jena

Germany

07743

**Sponsor information****Organisation**

University Hospital of Jena (Universitätsklinikum Jena) (Germany)

**ROR**

<https://ror.org/035rzcx15>

**Funder(s)****Funder type**

Research council

**Funder Name**

German Research Council (Deutsche Forschungsgemeinschaft [DFG]) (Germany) (ref: FI 1635/1-1)

**Results and Publications**

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**

Not provided at time of registration