

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

Submission date 02/04/2009	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 28/07/2009	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 28/07/2009	Condition category 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

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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

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