

# Effect of furosemide versus placebo on quality of life in hypertensive patients with pulmonary edema

<b>Submission date</b> 28/03/2006	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 03/08/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 08/01/2021	<b>Condition category</b> Respiratory	<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

**Contact name**  
Prof Wolfgang Schreiber

**Contact details**  
Waehringer Guertel 18-20/6D  
Vienna  
Austria  
1090

## Additional identifiers

**Protocol serial number**  
N/A

## Study information

**Scientific Title**  
Effect of furosemide versus placebo on quality of life in hypertensive patients with pulmonary edema

**Study objectives**

In patients with hypertensive pulmonary edema there is no difference in the Borg rating of perceived exertion (BORG scale) one hour after hospital admission between furosemid and placebo.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Approval from ethics commission of Stadt Wien on 28/03/2006.

**Study design**

Randomised, double-blind, placebo-controlled study

**Primary study design**

Interventional

**Study type(s)**

Treatment

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

Hypertensive pulmonary edema

**Interventions**

Intravenous furosemide versus intravenous placebo on top of standard medication.

**Intervention Type**

Drug

**Phase**

Not Specified

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

Furosemide

**Primary outcome(s)**

Changes in dyspnoea severity one hour after hospital admission (BORG scale).

**Key secondary outcome(s)**

1. BORG scale at hours two, three and six
2. Visual analogue scale score at one, two, three and six hours
3. Blood pressure
4. Partial pressure of oxygen in arterial blood (paO<sub>2</sub>), partial pressure of carbon dioxide in arterial blood (paCO<sub>2</sub>), spot oxygen saturation (SpO<sub>2</sub>)
5. pH, BE, lactate
6. Safety: acute myocardial infarction, hypotension, intubation, catecholamines, cardiac arrest, death

**Completion date**

30/11/2007

# Eligibility

## Key inclusion criteria

1. Hypertensive pulmonary edema (Relative Risk [RR] more than 180 mmHg, crackles in auscultation)
2. Over 18 years of age

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Adult

## Lower age limit

18 years

## Sex

All

## Total final enrolment

59

## Key exclusion criteria

1. Women of childbearing potential
2. Chronic renal failure with renal replacement therapy
3. Acute ST-Elevation Myocardial Infarction (STEMI)
4. Need for intubation on arrival at scene
5. Need for catecholamines on arrival
6. Known incompatibilities to furosemide, urapidil or morphine hydrochloride

## Date of first enrolment

01/05/2006

## Date of final enrolment

30/11/2007

# Locations

## Countries of recruitment

Austria

## Study participating centre

**Waehringer Guertel 18-20/6D**  
Vienna  
Austria  
1090

## Sponsor information

### Organisation

Medical University of Vienna (Austria)

### ROR

<https://ror.org/05n3x4p02>

## Funder(s)

### Funder type

University/education

### Funder Name

Medical University of Vienna, Department of Emergency Medicine

## 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	01/06/2011	08/01/2021	Yes	No