Impact of iloprost on early graft viability after liver transplantation

Submission date	Recruitment status	Prospectively registered		
31/07/2008	No longer recruiting	[] Protocol		
Registration date	Overall study status Completed	Statistical analysis plan		
09/10/2008		[X] Results		
Last Edited 27/09/2017	Condition category Injury, Occupational Diseases, Poisoning	[_] Individual participant data		

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s) Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers N/A

Study information

Scientific Title

Impact of iloprost on early graft viability after liver transplantation: a randomised controlled trial

Study objectives

Improved graft viability under treatment with systemically administered prostacyclin analogue iloprost.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics Committee of Medical Faculty, Friedrich Schiller University of Jena (Ethik-Kommission der Friedrich-Schiller-Universität Jena an der Medizinischen Fakultät). Date of approval: 20/06/2006 (ref: 1765-04/06)

Study design Prospective randomised controlled trial

Primary study design Interventional

Secondary study design Randomised controlled trial

Study setting(s) Hospital

Study type(s) Treatment

Participant information sheet

Health condition(s) or problem(s) studied Liver transplantation

Interventions

A prospective, randomised, single-center study. Patients of the treatment group received 1 ng /kg body weight /min iloprost (BayerVital AG Berlin, Germany), systemically administered for 7 days post-liver transplantation, in contrast to the control (no treatment) population. Peak levels of transaminases (aspartate aminotransferase [ASAT]/alanine aminotransferase [ALAT]), factor V, quick's value, bile production and the indocyanine green plasma disappearance rate (ICG-PDR), were determined continuously. Furthermore, the arterial resistance index (RI) as parameter of liver perfusion as well as patient and graft survival were evaluated.

Intervention Type Drug

Phase Not Applicable

Drug/device/biological/vaccine name(s)

lloprost

Primary outcome measure

Incidence of primary graft dysfunction within 48 hours postoperatively.

Secondary outcome measures

Rate of re-transplantation caused by initial graft non-function within 48 hours postoperatively
Time of hospitalisation (duration of follow-up depends on the circumstances of each patient)
Length of stay in intensive care unit (duration of follow-up depends on the circumstances of each patient)

4. Rate of complications due to biliary tract lesions within 1-year follow-up

Overall study start date 01/09/2006

Completion date 01/09/2008

Eligibility

Key inclusion criteria

1. Aged over 18 years, either gender 2. Full size orthotop liver transplantation

Participant type(s) Patient

Age group

Adult

Lower age limit 18 Years

Sex Both

Target number of participants 80

Key exclusion criteria

- 1. Circulatory instability
- 2. Noradrenaline doses >0.5 µg/kg body weight/min
- 3. Pregnancy
- 4. Known intolerance of iloprost

Date of first enrolment

01/09/2006

Date of final enrolment 01/09/2008

Locations

Countries of recruitment Germany

Study participating centre Department of General Visceral and Vascular Surgery Jena Germany 07740

Sponsor information

Organisation University Hospital of Jena (Universitätsklinikum Jena) (Germany)

Sponsor details Department of General Visceral and Vascular Surgery Erlanger Allee 101 Jena Germany 07740

Sponsor type Hospital/treatment centre

Website http://www.uniklinikum-jena.de

ROR https://ror.org/035rzkx15

Funder(s)

Funder type Hospital/treatment centre

Funder Name University Hospital of Jena (Germany)

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 of pilot study	01/01/2012		Yes	No