

MAVERIC: Midlands trial of amiodarone vs electrophysiology-guided interventions and cardio-defibrillator in ventricular arrhythmias.

Submission date 23/01/2004	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 23/01/2004	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 21/12/2009	Condition category Circulatory System	<input type="checkbox"/> 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

Protocol serial number
ID6

Study information

Scientific Title

Acronym
MAVERIC

Study objectives

The optimal way to manage patients who present with sustained ventricular tachycardia (VT), ventricular fibrillation (VF) or sudden cardiac death (SCD), especially in the context of comparing the traditional approach of empirical amiodarone against electrophysiology-guided interventions, which include myocardial revascularisation, programmed ventricular stimulation and the implantable cardioverter-defibrillator (ICD).

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Primary study design

Interventional

Study design

Randomised controlled trial

Study type(s)

Not Specified

Health condition(s) or problem(s) studied

Cardiovascular diseases: Heart disease

Interventions

Electrophysiology + implantable cardioverter defibrillators (ICDs) versus Amiodarone empirically

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

1. Death
2. Arrhythmia recurrence
3. Hospitalisation
4. Drug use
5. Quality of life
6. Cost of managing patients

Key secondary outcome(s)

Not provided at time of registration

Completion date

30/11/1999

Eligibility

Key inclusion criteria

1. Patients who presented with sustained ventricular tachycardia (VT), ventricular fibrillation (VF) or sudden cardiac death (SCD) and survived to reach hospital within the Midlands from Feb 1997 to Jan 1999 were actively identified and entered into the study.
2. Patients who were not of child-bearing age or had a life-expectancy of <6 months from a non-arrhythmic cause were approached for entry into the trial.

Patients who were ineligible for or refused to join the trial were entered into the study's registry.

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

Does not match inclusion criteria

Date of first enrolment

01/11/1996

Date of final enrolment

30/11/1999

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

Department of Cardiology

Birmingham

United Kingdom

B15 2TH

Sponsor information

Organisation

Record Provided by the NHS R&D 'Time-Limited' National Programme Register - Department of Health (UK)

Funder(s)

Funder type

Government

Funder Name

NHS Cardiovascular Disease and Stroke National Research and Development Programme (UK)

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?
Results article	results	01/07/2004		Yes	No
Protocol article	protocol	01/07/1998		Yes	No