

Comparison of the efficacy, tolerance and cost of Algostéril vs Negative Pressure Therapy in preparation for skin grafting following surgical excision

Submission date 16/02/2015	Recruitment status No longer recruiting	☐ Prospectively registered ☐ Protocol
Registration date 23/02/2015	Overall study status Completed	☐ Statistical analysis plan ☒ Results
Last Edited 08/03/2023	Condition category Surgery	☐ Individual participant data

Plain English summary of protocol

Background and study aims

Negative-pressure wound therapy (NPWT) is a technique which uses a vacuum dressing to promote healing in acute or chronic wounds. The aim of this study how to compare the Algosteril product to negative-pressure wound therapy in preparation for skin grafting following surgical excision.

Who can participate?

Adults scheduled for surgical removal with a granulation phase (a phase of the wound healing process) before a skin graft.

What does the study involve?

Participants will be randomly allocated to one of two groups: NPWT or Algosteril.

What are the possible benefits and risks of participating?

Not provided at time of registration

Where is the study run from?

A number of French hospitals. The lead centre is Hopital St Louis, Paris.

When is the study starting and how long is it expected to run for?

From July 2014 to December 2015

Who is funding the study?

Laboratoires Brothier (France)

Who is the main contact?

Sandra Kolb

kolb@brothier.com

Contact information

Type(s)

Scientific

Contact name

Dr Marc Revol

Contact details

Hôpital Saint-Louis

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France

75010

Additional identifiers

Protocol serial number

EXE-ALG/TPN-06.2013

Study information

Scientific Title

Comparison of the efficacy, tolerance and cost of Algostéril vs Negative Pressure Therapy in preparation for skin grafting following surgical excision: a multicentre prospective randomised parallel group trial

Acronym

ATEC

Study objectives

The granulation phase can be supported by medical devices including Algosteril and Negative Pressure Therapy which are most commonly used, with good results. The study will demonstrate the non-inferiority of both treatments to obtain an optimal granulation tissue to receive a thin skin graft.

Ethics approval required

Old ethics approval format

Ethics approval(s)

French Ethics Committee (CPP Ile de France IV) 15/07/2013, ref 2013/22SC

Study design

Multicentre prospective randomised parallel group trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Surgical removal with a granulation phase before a skin graft supported in restorative, reconstructive and plastic surgery service

Interventions

Surgical excision of the skin and underlying tissues are carried out in plastic surgery for tumor traumatic or infectious causes. If the resulting defect is well vascularized, it can be covered by a thin skin graft immediately or just after after a granulation phase.

Intervention Type

Procedure/Surgery

Primary outcome(s)

Time to optimal granulation. After excision, evaluation for grafting every 7 days and until the wound can receive skin graft.

Key secondary outcome(s))

1. Care costs: at each dressing change
2. Patient quality of life: every 7 days and until the wound can receive skin graft.
3. Tolerance: thought the trial

Completion date

10/09/2016

Eligibility**Key inclusion criteria**

1. Written informed consent
2. Patients aged 18 years or older
3. Scheduled for surgical removal with a granulation phase before a skin graft

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Total final enrolment

Key exclusion criteria

1. Uncontrolled hyperglycemia
2. Excision is secondary to burns
3. Treated within 30 days before enrollment with immunosuppressants, chemotherapy, radiotherapy on the site excised,

Date of first enrolment

02/07/2014

Date of final enrolment

30/06/2016

Locations**Countries of recruitment**

France

Study participating centre

Hôpital Croix Rousse

Lyon

France

69000

Study participating centre

Hôpital Civil

Strasbourg

France

67000

Study participating centre

Hôpital La Conception

Marseille

France

13000

Study participating centre

Hôpital Saint-Roch

Nice

France

06000

Study participating centre
CHU Angers
Angers
France
49000

Study participating centre
Hôpital Hôtel Dieu
Nantes
France
44000

Study participating centre
La Cavale Blanche
Brest
France
29000

Study participating centre
CHU Lille
Lille
France
59000

Study participating centre
CHU Bordeaux
Bordeaux
France
33000

Study participating centre
Hôpital Saint-Louis
Paris
France
75010

Study participating centre

Hôpital Saint-Antoine

Paris

France

75012

Study participating centre**CHU Nancy**

Nancy

France

54000

Study participating centre**CHU Amiens**

Amiens

France

80000

Study participating centre**Hôpital Jean Minjoz**

Besançon

France

25000

Study participating centre**CHU Rennes**

Rennes

France

35000

Sponsor information**Organisation**

Laboratoires Brothier

ROR

<https://ror.org/007jkh405>

Funder(s)

Funder type

Industry

Funder Name

Laboratoires Brothier

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from Dr Marc Revol (mrevol05@gmail.com).

Type of data : Individual participant data that underlie the results reported in the article after anonymisation and the study protocol

When the data will become available and for how long: Beginning 9 months and ending 36 months following article publication

By what access criteria data will be shared including with whom: To investigators whose proposed use of the data has been approved by the corresponding author and the sponsor

For what types of analyses: Meta-analysis

By what mechanism: Proposals should be directed to the corresponding author (mrevol05@gmail.com) up to 36 months following article publication. To gain access, data requestors will need to sign a data access agreement. An accessing data link will be created to recipients

Whether consent from participants was obtained: Consent from participants was obtained and restricts the data access to the French health authorities

Comments on data anonymization: Data were anonymized (Patient number from 1 to 113)

Ethical or legal restrictions: From 2018, the EU General Data Protection Regulation (GDPR) restricts transfers of personal data to countries outside the EEA.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		27/03/2020	08/03/2023	Yes	No
Basic results		31/07/2019	21/07/2021	No	No