

Risk of bacteremia in banding versus sclerotherapy of esophageal varices

Submission date 05/09/2014	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 22/09/2014	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 16/10/2019	Condition category Infections and Infestations	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Esophageal varices (EV) is a condition where the blood vessels in the esophagus are extremely dilated (widened). Banding is a treatment that uses elastic bands to tie the blood vessels in order to stop bleeding. The other treatment available for this condition is sclerotherapy, where a medicine is injected which will cause the blood vessels to shrink. Esophageal variceal banding may be less likely to cause bacteremia (occurrence of bacteria in the blood) than sclerotherapy. We do not know how frequently bacteremia occurs after banding or sclerotherapy. We conducted this study to compare the frequency of bacteremia after banding and sclerotherapy.

Who can participate?

Patients with liver disease admitted for upper gastrointestinal bleeding or those who came for variceal therapy who have had previous treatment for EV.

What does the study involve?

Those who came as an outpatient for elective sclerotherapy or banding were given their preferred treatment. New patients with upper GI bleeding were checked by endoscopy before any treatment. Those who required treatment were randomly allocated to either undergo either banding or sclerotherapy. Those who did not need treatment were considered as the control group. Blood samples of all patients were analysed at 5 and 30 minutes to check for bacteremia.

What are the possible benefits and risks of participating?

There were no financial benefits of participating in this study. Patients received treatment for esophageal varices. There were no obvious risks.

Where is the study run from?

Thomason General Hospital in El Paso, Texas, USA.

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

July 1995 to April 1997.

Who is funding the study?

Investigator initiated and funded (USA).

Who is the main contact?
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Contact information

Type(s)
Scientific

Contact name
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El Paso
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79905

Additional identifiers

Study information

Scientific Title
A prospective randomized study on the risk of bacteremia in banding versus sclerotherapy of esophageal varices

Study objectives
After endoscopic variceal ligation (EVL) was introduced, we designed this prospective randomized study to compare the rate of bacteremia after endoscopic esophageal variceal ligation with that of sclerotherapy.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Texas Tech University Health Sciences Center Institutional Review Board, 03/16/1993

Study design
Prospective randomized study in single center done before to register retrospective clinical study

Primary study design
Interventional

Study type(s)
Treatment

Health condition(s) or problem(s) studied

Bacteremia in patients with liver disease admitted for UGI bleeding

Interventions

All patients were screened using endoscopy.

Outpatients for vacricela therapy to undergo: banding or sclerotherapy.

Patients with upper GI bleeding were randomised to:

1. Banding
2. Sclerotherapy

Blood cultures were obtained before, 5 and 30 minutes after endoscopy to check for bacteremia.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

Blood cultures were drawn via separate venous punctures of the forearm before endoscopy (BCX1), at 5 minutes (BCX2), and 30 minutes (BCX3) after the endoscopy.

Key secondary outcome(s)

Continuous data were described using mean and standard deviation (SD) while categorical data were described frequency and proportion. Baseline characteristics were compared among groups. Continuous data were compared using one-way analysis of variance (ANOVA), while categorical data were compared using Fishers exact test.

Completion date

01/04/1997

Eligibility

Key inclusion criteria

Patients with liver disease admitted for UGI bleeding or for outpatient elective variceal therapy with previous EVS and EVL at Thomason General Hospital in El Paso, Texas, from July 1995 to April 1997

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Total final enrolment

94

Key exclusion criteria

Patients were excluded if they had received any antibiotics in the last 2 weeks before inclusion in the study

Date of first enrolment

01/07/1995

Date of final enrolment

01/04/1997

Locations**Countries of recruitment**

United States of America

Study participating centre**Division of Gastroenterology**

El Paso

United States of America

79905

Sponsor information**Organisation**

Texas Tech University Health Sciences Center (USA)

ROR

<https://ror.org/033ztpr93>

Funder(s)**Funder type**

Other

Funder Name

Investigator initiated and funded (USA)

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	02/05/2016	16/10/2019	Yes	No