

A comparison of the effects of adrenaline and noradrenaline in critically ill patients

Submission date 12/11/2004	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 07/03/2005	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 30/10/2008	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

Study information

Scientific Title

Acronym
The Cat study

Study objectives

The aim of the Cat study is to compare the clinical effects of adrenaline and noradrenaline in critically ill patients with circulatory dysfunction or failure. It is a prospective, double blind, randomised trial. Patients will be designated a priori into two groups: circulatory failure due to sepsis syndrome/septic shock and circulatory failure due to non-septic causes (cardiogenic shock, normovolaemic hypotension, augmentation of mean arterial pressure). The null hypothesis assumes no difference in resolution of circulatory failure or all-cause mortality in patients with circulatory failure receiving infusions of either adrenaline or noradrenaline.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised controlled trial

Primary study design

Interventional

Study type(s)

Not Specified

Health condition(s) or problem(s) studied

Circulatory failure in critically ill patients

Interventions

Patients randomised to receive either adrenaline or noradrenaline

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

adrenaline or noradrenaline

Primary outcome(s)

Time to resolution of circulatory failure to pre-morbid state from commencement of catecholamine.

Key secondary outcome(s)

ICU length of stay and mortality, hospital mortality and 90-day mortality: degree of organ dysfunction during 28-day period (as determined by SOFA scores): cardiovascular, respiratory, renal, neurological, hepatic; and metabolic function.

Completion date

31/10/2005

Eligibility

Key inclusion criteria

Critically ill patients requiring a catacholamine infusion for cardiovascular support

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Not Specified

Sex

Not Specified

Key exclusion criteria

Not provided at time of registration

Date of first enrolment

01/10/2003

Date of final enrolment

31/10/2005

Locations

Countries of recruitment

Australia

Study participating centre

Intensive Care Unit

Kogarah, Sydney

Australia

2217

Sponsor information

Organisation

The St George Hospital - Dept of Intensive Care (Australia)

ROR

<https://ror.org/02pk13h45>

Funder(s)

Funder type

Not defined

Funder Name

Not provided at time of registration

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	01/12/2008		Yes	No