

# Evaluation of the clinical impact of ventricular dyssynchrony in patients with corrected tetralogy of fallot

No registrations found.

<b>Ethical review</b>	Positive opinion
<b>Status</b>	Recruiting
<b>Health condition type</b>	-
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON23806

### Source

NTR

### Brief title

N/A

### Health condition

Tetralogy of Fallot (tetralogie van Fallot), pulomnary valve replacement (pulmonaalklepverving) ventricular dyssynchrony (ventrikel dyssynchronie)

## Sponsors and support

**Primary sponsor:** none

**Source(s) of monetary or material Support:** "Willem Alexander Kinder en Jeugd fonds"

## Intervention

## Outcome measures

### Primary outcome

Primary outcome: Differences in time to peak systolic velocity between different segments of the right ventricle:

- Right ventricular outflow tract
- Right ventricular free wall
- Right ventricular septum.

The greatest difference in time to peak systolic velocity of the segments (latest peak systolic velocity minus earliest peak systolic velocity) will be used as a measure of dyssynchrony, and this value will be compared before and after PVR

### **Secondary outcome**

Effect of PVR on ventricular function

(eg. volume, diastolic function, E/A ratio, pulmonary regurgitation, Vo2 max, clinical condition)

## **Study description**

### **Background summary**

Prospective study to evaluate the effect of pulmonary valve replacement on mechanical ventricular dyssynchrony in young corrected tetralogy of Fallot patients

### **Study objective**

Improvement of the RV function by pulmonary valve replacement will result in improvement of RV dyssynchrony in corrected tetralogy of Fallot patients

### **Study design**

- approximately 3-6 months before PVR
- approximately 3-6 months after PVR

### **Intervention**

Group: patients with corrected Tetralogy of Fallot who undergo pulmonary valve replacement.

Intervention: pulmonary valve replacement (PVR), surgical or percutaneous

## Contacts

### Public

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### Scientific

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## Eligibility criteria

### Inclusion criteria

1. Corrected tetralogy of fallot
2. >8 year
3. Scheduled for pulmonary valve replacement

### Exclusion criteria

1. Claustrophobia
2. Renal disease

### 3. Cardiac arrhythmia

## Study design

### Design

Study type:	Interventional
Intervention model:	Other
Allocation:	Non controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

### Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	23-07-2008
Enrollment:	20
Type:	Anticipated

## Ethics review

Positive opinion	
Date:	23-07-2008
Application type:	First submission

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

## Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register	ID
NTR-new	NL1329
NTR-old	NTR1388
Other	METC LUMC : p08.023
ISRCTN	ISRCTN wordt niet meer aangevraagd

## Study results

### Summary results

N/A