# Procalcitonine Als marker van Liquor Drain INfecties

No registrations found.

**Ethical review** Not applicable

**Status** Pending

Health condition type -

**Study type** Observational non invasive

## **Summary**

#### ID

NL-OMON24022

**Source** 

NTR

**Brief title** 

**PALADIN** 

#### **Health condition**

drain related meningitis or ventriculitis drain gerelateerde meningitis of ventriculitis

### **Sponsors and support**

**Primary sponsor:** Medisch Centrum Haaglanden

Source(s) of monetary or material Support: Wetenschapsfonds Medisch Centrum

Haaglanden

#### Intervention

#### **Outcome measures**

#### **Primary outcome**

Presence of a bacterial drain infection

#### **Secondary outcome**

- -Duration of hostpitalization
- -Admission of antibiotica
- -Drain replacement
- -Mortality
- -Modified Rankin Scal 3 months after drain placement

## **Study description**

#### **Background summary**

This study aims to increase the accuracy of diagnosing a cerebrospinal fluid drain infection. One of the parameters of interest is procalcitonin in cerebrospinal fluid. We will collect some additional cerebrospinal fluid to preserve for testing of other parameters in the future.

#### Study objective

About 25% of patients who suffer from a subarachnoid hemorrhage or intraventricular hemorrhage have a vital indication for an external ventricular or lumbar drain to aleviate the intracranial pressure. About 5-10% of these patients develop a ventriculitis as a complication of this drain. Diagnosing an infection in this group of patients is difficult because the normal signs of infection (e.g. fever, neck stiffness) are already present due to the blood in the ventricles or for example a systemic infection. The difficulty in interprating the infection parameters leads to a delay in treatment or treatment without a proper indication. This results in increased morbidity as well as prolonged hospitalization, redundant drain replacement and needless antibiotic therapy.

The concentration of procalcitonin in plasma is proven to be an adequate diagnostic tool for diagnosing a systemic bacterial infection. Therefore we hypothesize that intraventricular procalcitonin production is a valuable biomarker for a bacterial drain infection. We will collect some additional cerebrospinal fluid to preserve for testing of other parameters in the future.

### Study design

- -Baseline
- -3 Months

#### Intervention

The PALADIN study is an observational study. In our hospital daily sampling of cerebrospinal fluid and serum is a routine procedure in patients with a ventricular or lumbar drain. There

will be no additional sampling for this study.

### **Contacts**

#### **Public**

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## **Eligibility criteria**

### **Inclusion criteria**

Patients >18 years old with an external lumbar or ventricular drain

#### **Exclusion criteria**

Expected death <24 hours

## Study design

### Design

Study type: Observational non invasive

Intervention model: Other

Masking: Open (masking not used)

Control: N/A, unknown

#### Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-07-2014

Enrollment: 250

Type: Anticipated

## **Ethics review**

Not applicable

Application type: Not applicable

## **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 NL4486 NTR-old NTR4619

CCMO NL47941.098.14

# **Study results**