Heart failure on ward

No registrations found.

Ethical review	Positive opinion
Status	Pending
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON27799

Source
NTR

Brief title
HF on Ward

Health condition

Heart failure

Sponsors and support

Primary sponsor: Eigen geïnitieerd onderzoek
Source(s) of monetary or material Support: nvt

Intervention

Outcome measures

Primary outcome

All cause mortality and a composite of all-cause mortality and/or first readmission for cardiovascular reasons within 6 months after discharge.

Secondary outcome

Cause specific mortality

Quality of life score

Study description

Background summary

Patients admitted with acute decompensated HF (ADHF) have poor short- and long-term prognosis, after discharge ≈ 20% of patients are

readmitted within 30 days and up to 50% by 6 months. A reduction in HF readmissions simultaneously improves the

quality of care and reduces costs. To reduce HF readmission rates a comprehensive characterization of predictors of

readmission in patients with HF is imperative. Multivariable risk scores can predict risk for adverse events such as

readmission or mortality in patients admitted with ADHF. Next to natriuretic peptide levels, other biomarkers have emerged that allow prognostication of patients admitted with

ADHF. Recent studies have shown that combining multiple biomarkers in a multimarker panel, substantially improves

prediction of adverse events beyond current metrics. The primary objective of this study is to

perform an external validation of the ELAN-HF score in a cohort of patients admitted with ADHF at the Catharina

Hospital. A second primary objective is to serially measure a multimarker panel in this cohort and combine these

measurements with clinical data from multiple sources (e.g. prescribed medication, medical history, physiological

measurements etc.) to capture the heterogeneous nature of HF in a novel discharge risk score.

Study objective

External validation of discharge risk score for patients admitted with acute decompensated heart failure (ADHF).

Determine added value of biomarkers in multimarker panel for discharge risk stratification of ADHF patients.

Determine added value of wrist-based PPG measurements after discharge in predicting readmission and/or mortality of ADHF patients.
Determine association between biomarkers and quality of life in patients with ADHF.

External validation of a Bayesian hemodynamics model in patients with ADHF.

Study design

Shortly after discharge (one to two weeks)

6 months after discharge

Intervention

None

Contacts

Public

Scientific

Eligibility criteria

Inclusion criteria

- Undergo treatment for acute decompensated heart failure

- Aged 18 or above and mentally competent.

- Capable of understanding the Dutch language.

- Must sign informed consent.

Exclusion criteria

- Patients where follow-up is not possible (e.g. in-hospital mortality or follow-up not

taking place at the study center).

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):	01-11-2018
Enrollment:	278
Type:	Anticipated

Ethics review

Positive opinion

Date:	19-10-2018
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

ID: 46619
Bron: ToetsingOnline
Titel:

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

No registrations found.

In other registers

Register	ID
NTR-new	NL6774
NTR-old	NTR7643
CCMO	NL65323.100.18
OMON	NL-OMON46619

Study results