

Intraventricular infusion of rt-PA in severe intraventricular haemorrhage after aneurysmal subarachnoid haemorrhage. A randomised clinical trial.

No registrations found.

Ethical review	Positive opinion
Status	Recruiting
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON28831

Source

NTR

Brief title

RESOLVE

Health condition

Aneurysmal subarachnoid haemorrhage, hydrocephalus, intraventricular haemorrhage.

Sponsors and support

Primary sponsor: University Medical Center Utrecht

Source(s) of monetary or material Support: University Medical Center Utrecht

Intervention

Outcome measures

Primary outcome

Death or dependency 6 months after subarachnoid haemorrhage.

Secondary outcome

1. Recurrent haemorrhage;
2. Secondary ischaemia;
3. Hydrocephalus;
4. Bleeding complications from fibrinolysis;
5. Death within 6 months;
6. Rankin 0 versus Rankin 1-5 and death.

Study description

Background summary

The Resolve study is a prospective randomized, placebo-controlled, monocenter trial to determine whether intraventricular infusion of rt-PA reduces the frequency of poor outcome (death or dependence) in patients with a severe intraventricular haemorrhage after aneurysmal subarachnoid hemorrhage.

Study objective

Intraventricular infusion of rt-PA reduces the frequency of poor outcome (death or dependency) in patients with a severe intraventricular haemorrhage after aneurysmal subarachnoid hemorrhage.

Intervention

1. Placement of external ventricular drain (standard procedure);
2. Clipping / Coiling of ruptured aneurysm (standard procedure);
3. Infusion of rt-PA or placebo through external ventricular drain.

Contacts

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Eligibility criteria

Inclusion criteria

1. First or recurrent aneurysmal subarachnoid haemorrhage with intraventricular extension of the haemorrhage;
2. The ventricles must be enlarged and the intraventricular haemorrhage must be severe (Graeb-score more than 6);
3. Patients must be in a poor neurological condition, WFNS < 7 or WFNS < 6 in intubated patients.

Exclusion criteria

1. Other cause for intraventricular haemorrhage than a subarachnoid haemorrhage from a ruptured intracranial aneurysm;
2. Absence of both pupillary light reflexes;
3. Use of oral anticoagulants;
4. Treating physicians propose a palliative instead of curative treatment strategy;
5. Absence of informed consent.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Masking:	Double blinded (masking used)
Control:	Placebo

Recruitment

NL
Recruitment status: Recruiting
Start date (anticipated): 01-09-2005
Enrollment: 16
Type: Anticipated

Ethics review

Positive opinion
Date: 13-10-2005
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	NL415
NTR-old	NTR455
Other	: N/A
ISRCTN	ISRCTN36786212

Study results

Summary results

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N/A