

# Exercise induced circulatory improvement in formerly preeclamptic women

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To test the hypothesis that in formerly preeclamptic women with a low plasma volume a month physical exercise improves vascular and hemodynamic functions.

|                              |                                     |
|------------------------------|-------------------------------------|
| <b>Ethical review</b>        | Approved WMO                        |
| <b>Status</b>                | Pending                             |
| <b>Health condition type</b> | Maternal complications of pregnancy |
| <b>Study type</b>            | Interventional                      |

## Summary

### ID

NL-OMON29785

### Source

ToetsingOnline

### Brief title

exercise induced circulatory improvement

### Condition

- Maternal complications of pregnancy
- Vascular hypertensive disorders

### Synonym

latent hypertension

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Academisch Medisch Centrum

**Source(s) of monetary or material Support:** Ministerie van OC&W

## Intervention

**Keyword:** circulation, exercise, plasma volume, preeclampsia

## Outcome measures

### Primary outcome

improvement of plasma volume > 10%

### Secondary outcome

improvement of vascular and endothelial function in response to exercise

## Study description

### Background summary

In the Netherlands, about 15% of all first pregnant women develop hypertensive complications, of which preeclampsia and general seizures may be considered to be the most severe endpoints. In the western world, these complications account for a substantial maternal and fetal/neonatal morbidity and mortality. Evidence is accumulating that these disorders are superimposed upon a preexisting hemodynamic or hemostatic risk condition. These factors negatively affect placental and vascular functioning. Considering these premorbid risk factors, it is not surprising that remotely these women are more involved in hypertension, cardiovascular disease and stroke. A central position in the circulatory problems may arise from a relatively small venous compartment (plasma volume compartment), affecting cardiovascular reserve capacity and associated with sympathetic overactivity, reduced arterial compliance and elevated resting cardiac output. Clinically, a reduced plasma volume compartment is associated with an increased risk to develop gestational hypertensive problems such as preeclampsia and fetal growth restriction. By positively affecting this amount of plasma volume, this may contribute to a reduction in these hypertensive complications.

### Study objective

To test the hypothesis that in formerly preeclamptic women with a low plasma volume a month physical exercise improves vascular and hemodynamic functions.

### Study design

in this pilot study we intend to include 10 women. Considering a power 90% and

a type I error 5% we will be able to detect a difference 10-12% in plasma volume. We intend to alter the plasma volume compartment by use of a standardised physical exercise program in which the training will be to a maximum of 70% of that maximal reached intensity in these women. The response to this training program will be evaluated as a function of change in

- plasma volume
- resting and exercise induced cardiac output
- oxygen consumption during exercise
- venous capacity and compliance
- arterial compliance
- flow mediated vasodilation
- biochemical changes in VWF ag and fibronectin, hs CRP and micro-albuminuria
- hemoglobin count
- blood pressure and heart rate (exercise induced)
- weight and lean body weight

## **Intervention**

physical exercise; first two weeks twice a week 1 hour at max 70% of the VO2max  
the last two weeks three times a week at 70% of the VO2max

## **Study burden and risks**

The training program is in a way a life style change. The insertion of the two venous catheters uposes a minimal discomfort, the protocol takes time but may also be considered as moderate discomfort. We consider the total protocol as moderate strain, in which the life style adjustments may be considered to be the most meaningful.

## **Contacts**

### **Public**

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### **Scientific**

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## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

Elderly (65 years and older)

### Inclusion criteria

prior history of preeclampsia

### Exclusion criteria

incapability to cope with physical activity

## Study design

### Design

**Study type:** Interventional

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Prevention

### Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-05-2006

Enrollment: 10

Type: Anticipated

## Ethics review

Approved WMO

Application type:

First submission

Review commission:

CMO regio Arnhem-Nijmegen (Nijmegen)

## 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             |
|----------|----------------|
| CCMO     | NL12203.091.06 |