A randomised blinded comparison of surgical intervention with the X STOPPK® interspinous process decompression versus surgical decompression for patients with intermittent neurogenic claudication caused by lumbar stenosis

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Primary objective is to demonstrate that the effectiveness of the surgical intervention with X STOPPK is equivalent to surgical decompression without fusion after 1 year after surgery. Secundary objectives are to demonstrate that surgical intervention...

Ethical reviewApproved WMOStatusWill not startHealth condition typeBone disorders (excl congenital and fractures)Study typeInterventional

Summary

ID

NL-OMON29809

Source ToetsingOnline

Brief title Comparison of X STOPPK versus surgical decompression

Condition

- Bone disorders (excl congenital and fractures)
- Therapeutic procedures and supportive care NEC

Synonym

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Spinal stenosis & Pressure on the nerves causing leg pain

Research involving Human

Sponsors and support

Primary sponsor: SFMT Europe BV Source(s) of monetary or material Support: SFMT Europe BV

Intervention

Keyword: Controlled, Randomized, Trial

Outcome measures

Primary outcome

Symptoms and patient satisfaction will be measured with the Zurich Claudication

Questionnaire.

Secondary outcome

The cost effectiveness as measured by the EuroQol questionnaire and costs

obtained from the patient's diary.

Study description

Background summary

Intermittent neurogenic claudication is a disorder resulting from lumbar vertebral stenosis or a narrowing of the lumbar vertebral canal. In the first instance lumbar vertebral stenosis is treated by non-invasive methods, such as medication and physiotherapy. If symptoms continue to progress or become more painful, surgery to widen the spinal canal can be considered (surgical decompression).

This operation may require an admission period up to 4 days followed by an 8-week recovery period.

In recent years a safe and effective treatment has been developed as an alternative for surgical decompression. An implant will be inserted between the spinal crests which will lead to distraction. The spinal canal and the neural foramina will enlarge and symptoms will decrease. This intervention may require a shorter recovery period. Previous studies compared the treatment with the X STOPPK with the non-invasive treatment resulting in significant better results for the X STOPPK compared to non-invasive treatment.

This study will compare the results obtained with surgical decompression to results obtained with the X STOPPK.

Study objective

Primary objective is to demonstrate that the effectiveness of the surgical intervention with X STOPPK is equivalent to surgical decompression without fusion after 1 year after surgery.

Secundary objectives are to demonstrate that surgical intervention with the X STOPPK is more cost effective than surgical decompression and to demonstrate that surgical intervention with the X STOP is more effective on short-term (8 weeks to 6 months).

Study design

A prospective, randomised, blinded study comparison of two treatments.

Intervention

Surgical intervention with the X STOPPK device.

Study burden and risks

Patient will be asked to visit the hospital pre-operatively and at 8 weeks, 6, 12, 24, and 60 months postoperatively for a follow-up visit. During this visit a neurological examination will be performed and the patient will be requested to complete several questionnaires.

The risks for the patient are the risks associated with surgery under general anaesthesia. When the patient will receive surgical decompression the patient will be subject to similar risks.

Specific risks of treatment with the X STOP are: migration or dislodgement of the implant, no correct positioning of the implant, fracture of the spinous process, lack of efficiviness which may lead to reoperation and removal of the implant.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

- signed informed consent
- is 18 80 years old at time of surgery
- has intermittent neurogenic claudication
- has received at least three months of conservative care therapy

Exclusion criteria

- has cauda equina syndrome
- has Paget's disease, severe osteoporosis or metastasis to the vertebrae
- has had any surgery of the lumbar spine
- has severe comorbid conditions

- has any systemic disease that will interfere with the patient's welfare or outcome during the investigation

Study design

Design

Study phase:	4
Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Active
Primary purpose:	Treatment

Recruitment

NL	
Recruitment status:	Will not start
Start date (anticipated):	01-09-2006
Enrollment:	386
Туре:	Anticipated

Medical products/devices used

Generic name:	X STOP PK
Registration:	Yes - CE intended use

Ethics review

Approved WMO
Date:
Application type:
Review commission:

07-11-2006 First submission METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

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 CCMO ID NL13669.098.06