Pharmacogenetics of pain and sedation in critically ill children .

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Relevancy of pharmacogenetic testing for optimizing sedative and analgesic drug therapy in critically ill children will be determined. Pharmacogenetic-based, individualized dosing strategies will be developed to optimize drug therapy.

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	Observational invasive

Summary

ID

NL-OMON30003

Source ToetsingOnline

Brief title Pharmacogenetics in children

Condition

• Other condition

Synonym pain and stress

Health condition

pijn en onrust

Research involving Human

Sponsors and support

Primary sponsor: Erasmus MC, Universitair Medisch Centrum Rotterdam **Source(s) of monetary or material Support:** Ministerie van OC&W

Intervention

Keyword: Analgesia, Pediatric, Pharmacogenetics, Sedatives

Outcome measures

Primary outcome

Main study parameter is the difference in dosage requirements of sedatives and

analgesics of patients with different genetic profiles for pain- and sedation

related genes.

Secondary outcome

Population pharmacokinetic-pharmacodynamic (PK-PD) will be used for modeling to

determine the impact of the polymorphisms on the relationship between dose,

blood drug concentration (PK) and sedation scores (PD: COMFORT scale, VAS

scale, BIS monitoring)

Study description

Background summary

Presentation of the problem: pharmacogenetic variation is associated with increased risk of drug therapy failure or drug toxicity. need for knowledge: Sedatives and analgesics are often prescribed to critically ill children, who show wide variation in their response to these drugs. Individual cases of drug therapy failure or toxicity in this population are currently *brushed under the carpet*, while they could be explained by genetic variation in drug handling and response.

proposed solution to the problem: an evaluation will be carried out in critically ill children to determine how pharmacogenetic variation affects drug response and explains part of observed adverse events and drug failure in critically ill children receiving sedative and analgesic drugs.

Study objective

Relevancy of pharmacogenetic testing for optimizing sedative and analgesic drug therapy in critically ill children will be determined. Pharmacogenetic-based, individualized dosing strategies will be developed to optimize drug therapy.

Study design

observational study with minimal invasive procedures:

- 1. population pharmacokinetic-pharmacodynamic study
- 2. allelic frequency determination

Study burden and risks

Minimal blood sampling i.e. one sample per patient in all patients. In a subgroup of patients repeated blood samples will be taken from an indwelling arterial catheter for pharmacokinetic analysis. The study can only be carried out in this population as results from adults or healthy children can not be extrapolated to this group of patients (critically ill children)

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adolescents (12-15 years) Adolescents (16-17 years) Children (2-11 years)

Inclusion criteria

Children with a need for sedation and/or analgesia.

Exclusion criteria

Life expectancy less then 24 hours ECMO

Study design

Design

Study type: Observational invasive		
Masking:	Open (masking not used)	
Control:	Uncontrolled	
Primary purpose:	Other	

Recruitment

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NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	01-10-2006
Enrollment:	800
Туре:	Actual

Ethics review

Approved WMO Date: Application type: Review commission:

26-07-2006 First submission METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

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 NL12395.078.06