

# Duplex ultrasound method to assess patency in the proximal part of the LIMA of Y-bypass grafts in late follow up related to multislice ct-scan after CABG.

Published: 12-03-2007

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To assess whether the non-invasive duplex method can reliably determine diameters and flow characteristics in the LIMA origin of LIMA-LAD versus Y-bypass grafts late after CABG in relation to-the number of distal anastomosis-the adaptation to...

|                              |                            |
|------------------------------|----------------------------|
| <b>Ethical review</b>        | Approved WMO               |
| <b>Status</b>                | Recruitment stopped        |
| <b>Health condition type</b> | Coronary artery disorders  |
| <b>Study type</b>            | Observational non invasive |

## Summary

### ID

NL-OMON30675

### Source

ToetsingOnline

### Brief title

Duplex

### Condition

- Coronary artery disorders
- Vascular therapeutic procedures
- Arteriosclerosis, stenosis, vascular insufficiency and necrosis

### Synonym

patency: functionality

### Research involving

Human

## Sponsors and support

**Primary sponsor:** Erasmus MC, Universitair Medisch Centrum Rotterdam

**Source(s) of monetary or material Support:** Additionele kosten verrekening via Thoraxcentrum Research BV

## Intervention

**Keyword:** ct-scan, Duplex, LIMA, Y graft

## Outcome measures

### Primary outcome

Diastolic peak velocity of the LIMA graft

Systolic peak velocity of the LIMA graft

Diastolic velocity integral of the diastolic phase in the cardiac cycle.

Systolic velocity integral of the systolic phase in the cardiac cycle.

Diastolic/systolic peak velocity ratio

Diastolic/total (systolic + diastolic) velocity integral ratio

### Secondary outcome

Not applicable

## Study description

### Background summary

The use of the left internal mammary artery (LIMA) as a bypass graft to revascularize the left anterior descending artery (LAD) has improved the durability of coronary artery bypass grafting.

To evaluate the long-term performance of the LIMA graft an accurate non-invasive functional test without contrast of the LIMA graft is important. Several methods have been described since the 1980\*s to assess LIMA graft patency. At present invasive angiography is the gold standard. However, invasive angiography also has disadvantages i.e. the inability to quantify severe vulnerable plaques, inadequate contrast filling especially into the distal coronary artery parts and small side branches, catheter-induced spasm of

the LIMA, underestimation of eccentric plaques and overprojection of coronary arteries. There are no validated non-invasive methods without contrast available to control LIMA graft patency directly.

### **Study objective**

To assess whether the non-invasive duplex method can reliably determine diameters and flow characteristics in the LIMA origin of LIMA-LAD versus Y-bypass grafts late after CABG in relation to

- the number of distal anastomosis
- the adaptation to hyperaemic response

### **Study design**

It is an observational, diagnostic and comparing investigation between non-invasive duplex echocardiography and ct-scans.

### **Study burden and risks**

- 1-Electrographic control -- 15 minutes
- 2-Read and sign the \*informed consent\* letter -- 10 minutes
- 3-Duplex at rest -- 20 minutes
- 4-Duplex in modified hyperemic response -- 10 minutes
- 5-Complete a short questionnaire --10 minutes
- 6-64-slice CT-scan control -- 30 minutes

Risk profile; very low

## **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

Patients who underwent CABG 10 years ago will be included in the study to undergo both a duplex and CT-scan.

### Exclusion criteria

Redo surgery, serious co-morbidity (malignancy, previous chest irradiation), infarction of the bypassed region, combined cardiac surgery, subclavian artery stenosis, renal failure (creatinine  $\geq 120 \mu\text{mol/l}$ ), irregular cardiac rhythm, allergic to iodine and pregnancy.

## Study design

### Design

**Study type:** Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

## Recruitment

|                           |                     |
|---------------------------|---------------------|
| NL                        |                     |
| Recruitment status:       | Recruitment stopped |
| Start date (anticipated): | 20-09-2007          |
| Enrollment:               | 30                  |
| Type:                     | Actual              |

## Ethics review

|                    |   |
|--------------------|---|
| Approved WMO       |   |
| Date:              | 12-03-2007  |
| Application type:  | First submission  |
| Review commission: | 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 | ID             |
|----------|----------------|
| CCMO     | NL13011.078.06 |