Fractional Flow Reserve in non- culprit Coronary Arteries during Acute Coronary Syndromes.

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The aim of the present study is to investigate if FFR measurement of a stenosis in a remote coronary artery are influenced by the presence of acute myocardial infarction.

Ethical reviewApproved WMOStatusRecruitment stoppedHealth condition typeCoronary artery disordersStudy typeObservational invasive

Summary

ID

NL-OMON32345

Source

ToetsingOnline

Brief title

Fractional flow reserve in acute coronary syndromes

Condition

Coronary artery disorders

Synonym

Acute coronary syndrome, acute myocardial infarction.

Research involving

Human

Sponsors and support

Primary sponsor: Catharina-ziekenhuis

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

Intervention

Keyword: Acute myocardial infarction, Fractional FLow Reserve (FFR)

Outcome measures

Primary outcome

Variability of Fractional Flow Reserve in the non-infarct related artery

between the 2 measurements (immediately

after PPClof the infarct-related artery vs 5 days- 4 weeks later.

Secondary outcome

Not applicable.

Study description

Background summary

It has been questioned if during acute myocardial infarction, flow disturbances occur in remote

coronary arteries. This means that functional investigations of the severity of a stenosis in a remote

coronary artery, needs to be postponed for several weeks when microcirculatory function has normalized.

For patients with an indication for such invasive functional investigations of that remote artery, it is

mandatory then to undergo a second cardiac catheterisation.

If, however, it would be certain that such measurements could be performed immediately following primary

PCI of myocardial infarction, this second catheterisation could be avoided.

Study objective

The aim of the present study is to investigate if FFR measurement of a stenosis in a remote coronary artery are influenced by the presence of acute myocardial infarction.

Study design

For that purpose, 50 patients presenting with an acute coronary syndrome and

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referred for primary coronary

intervention, are investigated. Immediately following successful stent placing in the infarct related artery,

FFR will be measured in the stenotic, non-infarct related artery. Five - 28 days later, a second measurement

will be performed as in the usual routine whether or not followed by stenting of that concomitant artery if

indicated by FFR. Comparing FFR values at both sessions, will answer the study question. All methodology used is standard methodology.

Study burden and risks

The only extra investigation is the FFR measurement in the non-infarct related artery immediately following

primary PCI. This extra investigation takes about 10 minutes and is performed by standard technniques.

Load for the patient and risks are minimal.

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

- 1) Patients admitted for primary percutaneous coronary intervention of acute coronary syndrome
- 2) Presence of a stenosis of at least 50% in a concomitant coronary artery
- 3) Stable hemodynamic condition

Exclusion criteria

- 1) Cardiogenous shock or mechanical complication following primaire PCI
- 2) Extremely tortous or calcified vessels
- 3) Severe obstructive pulmonary disease

Study design

Design

Study type: Observational invasive

Intervention model: Other

Allocation: Non-randomized controlled trial

Masking: Open (masking not used)

Control: Active

Primary purpose: Diagnostic

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 01-09-2008

Enrollment: 50

Type: Actual

Ethics review

Approved WMO

Date: 22-05-2008

Application type: First submission

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

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 NL22453.060.08