

# Childhood study on respiratory pathogens from induced sputum

Published: 25-09-2009

Last updated: 06-05-2024

To determine the effectiveness of sputum induction in retrieving good quality sputum, identifying bacterial and viral pathogens in lower respiratory tract infections and determine the practical applicability of sputum induction in general pediatric...

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruiting
<b>Health condition type</b>	Respiratory tract infections
<b>Study type</b>	Observational invasive

## Summary

### ID

NL-OMON35654

### Source

ToetsingOnline

### Brief title

Induced sputum

### Condition

- Respiratory tract infections

### Synonym

'lower respiratory tract infections', 'lung infection'

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Jeroen Bosch Ziekenhuis

**Source(s) of monetary or material Support:** Het betreft hier een niet-gesponsord onderzoek. Financiering zal geschieden uit het eigen budget van de deelnemende afdelingen en van de beschikbare onderzoeksgelden voor arts-assistenten werkzaam in het JBZ.

## Intervention

**Keyword:** Children, Induced sputum, Microbiology, Respiratory tract infections

## Outcome measures

### Primary outcome

The quality of induced sputum, defined as <25 squamous cells and >25 leukocytes per visual field under light microscopy.

### Secondary outcome

To identify bacterial and viral pathogens of lower respiratory tract infections.

To determine the practical applicability of sputum induction in general pediatric practice.

To determine the prevalence of *Coxiella burnetii* infections (Q fever) in children with lower respiratory tract infections.

To determine the prevalence of Influenza A type H1N1-infections in children with lower respiratory tract infections.

## Study description

### Background summary

Lower respiratory tract infections are a major disease burden in children and give an annual death rate of 2 million world wide. In most cases, the pathogens are not identified, current dia

(Current diagnostic tests provide little differentiation between bacterial and viral pathogens, and in most cases the pathogens are not identified. )

Adults can produce sputum that can be analysed for pathogens, but in children this is often not possible because they cannot produce sputum. By inhaling hypertonic saline solution, sputum production increases and a coughing reflex is prompted. This study investigates the effectiveness of sputum induction in retrieving good quality sputum in children with suspected lower respiratory tract infections.

### **Study objective**

To determine the effectiveness of sputum induction in retrieving good quality sputum, identifying bacterial and viral pathogens in lower respiratory tract infections and determine the practical applicability of sputum induction in general pediatric practice.

### **Study design**

A prospective cohort study.

### **Study burden and risks**

Sputum induction is a non-painful procedure but can be experienced as discomforting. Complications are rare and consist of epistaxis, vomiting, transient wheezing and mild, reversible hypoxia (oxygen saturation 88-92%). During the routinely performed venipuncture, extra blood is collected. If no blood was collected during routine investigations, a venipuncture will be performed. Urine is also collected, if necessary by collection bag. After 4 weeks, another venipuncture is performed for convalescent serology testing. If the above mentioned procedures can identify the pathogens, current overtreatment with antibiotics can be decreased and hospital admissions can be shortened or even prevented. If bacterial pathogens are determined during the intervention, the current antibiotic treatment of the study subject can be altered, which is of direct benefit to the study subject.

## **Contacts**

### **Public**

Jeroen Bosch Ziekenhuis

Tolbrugstraat 11

5211 RW

NL

### **Scientific**

Jeroen Bosch Ziekenhuis

Tolbrugstraat 11  
5211 RW  
NL

## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adolescents (12-15 years)

Adolescents (16-17 years)

Children (2-11 years)

### Inclusion criteria

Tachypnea combined with at least one of: elevated body temperature, cough, dyspnea or abdominal pain

### Exclusion criteria

- Acute exacerbation of asthma in the last 4 weeks. This is defined as requiring systemic corticosteroids, hospital admission and/or use of  $\beta$ -sympathomimetics  $>400 \mu\text{g}$  per day
- Oxygen saturation  $< 92\%$  without oxygen therapy or severely ill impression
- Anatomical abnormalities of the respiratory tract presenting with inspiratory stridor
- Use of  $\beta$ -blockers, diuretics or theophylline

## Study design

### Design

**Study type:** Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Basic science

## Recruitment

NL

Recruitment status: Recruiting

Start date (anticipated): 12-10-2009

Enrollment: 100

Type: Actual

## Ethics review

Approved WMO

Date: 25-09-2009

Application type: First submission

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 09-06-2010

Application type: Amendment

Review commission: METC Brabant (Tilburg)

Approved WMO

Date: 22-12-2010

Application type: Amendment

Review commission: METC Brabant (Tilburg)

## 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	NL28965.028.09