Influence of hyperglycaemia and sustained hypoxia on the hypoxic ventilatory response and the hypoxic pulmonary vasoconstriction.

Published: 04-07-2011 Last updated: 10-08-2024

In this study we want to investigate the effects of sustained hyperglycaemia and hypoxia on the hypoxic pulmonary vasoconstriction and hypoxic ventilatory response

Ethical reviewApproved WMOStatusRecruitment stoppedHealth condition typeDiabetic complications

Study type Interventional

Summary

ID

NL-OMON35915

Source

ToetsingOnline

Brief title

Glucose II

Condition

- Diabetic complications
- Pulmonary vascular disorders

Synonym

diabetes

Research involving

Human

Sponsors and support

Primary sponsor: Leids Universitair Medisch Centrum

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

Intervention

Keyword: hyperglycaemia, hypoxia, pulmonary pressure, ventilation

Outcome measures

Primary outcome

systolic PAP

HVR

HVD

Secondary outcome

nvt

Study description

Background summary

Hypoxia and hyperglycaemia are important factors in the development of pulmonary diseases. The exact mechanism of the huamn reaction to hypoxia is unclear. It is clear however that metabolic factors are of great importance.

Study objective

In this study we want to investigate the effects of sustained hyperglycaemia and hypoxia on the hypoxic pulmonary vasoconstriction and hypoxic ventilatory response

Study design

Double blinded randomized trial, the subjects will subjected to the protocol twice (normoglycaemia and hyperglycaemia)

Intervention

hypoxia hyperglycaemia

Study burden and risks

headache during hypoxia somethimes occurs, which is treated with paracetamol a bruise may occur on the spot of the iv hyperglycaemia is tolerated well and has no side effects after such a short period

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

The major inclusion criteria are that the subject is healthy and has echo evidence of tricuspid regurgitation during systole, which is not clinically relevant but in fact can be demonstrated in most normal individuals.

Exclusion criteria

Obesity (BMI > 30), Presence of medical disease: heart-, lung-, liver-, kidneydisease; diabetes, Presence of psychiatric disease, History of chronic alcohol or drug use, Possibility of pregnancy, Lactation

Study design

Design

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Double blinded (masking used)

Control: Placebo

Primary purpose: Other

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 20-01-2012

Enrollment: 13

Type: Actual

Ethics review

Approved WMO

Date: 04-07-2011

Application type: First submission

Review commission: 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 ID

CCMO NL36320.058.11