A prospective randomized study of right coronary artery catheter engagement: Williams versus Judkins

Published: 22-03-2011
Last updated: 03-05-2024

To investigate the difference between the Williams and Judkins catheter in engagement of the right coronary artery during diagnostic catheterization with respect to technical success and fluoroscopic times. Secondary end points will be dislocation...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Coronary artery disorders
Study type	Interventional

Summary

ID

NL-OMON36261

Source
ToetsingOnline

Brief title
Williams versus Judkins

Condition

- Coronary artery disorders

Synonym
atherosclerosis, coronary disease

Research involving
Human

Sponsors and support

Primary sponsor: Sint Lucas Andreas Ziekenhuis
Source(s) of monetary or material Support: De firma Cordis levert kosteloos beide katheters.

Intervention

Keyword: cardiac catheterization, coronary catheter

Outcome measures

Primary outcome

Time to engage the right coronary artery en the fluoroscopy time needed of the

Williams catheter compared to the Judkins catheter.

Secondary outcome

Secondary end points will be dislocation of the catheter, technical success and

image quality.

Study description

Background summary

Catheters for selective engagement of the right coronary artery have traditionally been based on rota-tional or torque manipulation. Anatomic restraints of the aortic arch and variations in the *typical* location of the right coronary artery in the right aortic sinus, have limited the development of catheters that engage this vessel directly without torque or rotation. Previous studies evaluated different catheters for engagement of the right coronary artery in comparison to the traditional approach using the Judkins right catheter, however, a definite benefit of these catheters has not been demonstrated so far. Decreased time to insert and engage the right coronary artery will shorten fluoroscopic times and limit the amount of contrast, which importantly will decrease the side effects of diagnostic catheterization. In clinical practise, the first approach to engage the right coronary artery is by using the Judkins catheter, and if this fails a different catheter is used, such as the Williams catheter.

Study objective

To investigate the difference between the Williams and Judkins catheter in engagement of the right coronary artery during diagnostic catheterization with respect to technical success and fluoroscopic times. Secondary end points will be dislocation of the catheter, technical success and image quality.

Study design

Single blinded (patient blinded), randomized study. The cardiac catheterization will be performed according to the standard procedure.

Intervention

Cardiac catheterization/coronary angiography.

Study burden and risks

There is no additional risk of this study for the patient.

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

Patients planned for coronary catheterization via the femoral artery for any reason.

Exclusion criteria

Patients planned for coronary cathetrization via the brachial artery.

Study design

Design

Study type: Interventional

Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Diagnostic

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	28-03-2011
Enrollment:	110
Type:	Actual

Ethics review

Approved WMO

Date:	22-03-2011
Application type:	First submission
Review commission:	METC Amsterdam UMC

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	NL34304.029.10