# Chronic Cerebrospinal Venous Insufficiency and Multiple Sclerosis: An age and sex-matched controlled Study.

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| Ethical review        | Approved WMO            |
|-----------------------|-------------------------|
| Status                | Will not start          |
| Health condition type | Demyelinating disorders |
| Study type            | Observational invasive  |

# Summary

### ID

NL-OMON36366

**Source** ToetsingOnline

Brief title CCSVI and MS

### Condition

- Demyelinating disorders
- Vascular disorders NEC

#### Synonym

cerebrospinal venous insufficiency

**Research involving** Human

## **Sponsors and support**

Primary sponsor: Sint Antonius Ziekenhuis Source(s) of monetary or material Support: Stchting MS Research uit Voorschoten

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### Intervention

Keyword: CCSVI, Echo Doppler, MS, Trascranial Doppler

#### **Outcome measures**

#### **Primary outcome**

Can we find a significant difference between MS patients and healthy controles

focussed on the 5 ED parameters.

#### Secondary outcome

Not applicable.

# **Study description**

#### **Background summary**

The relationship between Chronic cerebrospinal venous insufficiency (CCSVI) and multiple sclerosis (MS) is at the moment an important issue all over the world. Zamboni et al (2009) proposed a causal relationship between raised venous pressure and the inflammatory process of MS. He treated in an open-label study 65 MS patients with percutaneous transluminal angioplasty (PTA). He concluded PTA of the strictures and stenoses of the venous drainage of MS patients influence positively the clinical course and outcome compared with the preoperative assessment inclusive QOL parameters. We want to study 50 MS patients, age and sex-matched with 50 healthy controls with extracranial Echo Doppler (ED) and Transcranial Doppler (TCD). Only clinical definitive MS patients (according to the revised MCDonald criteria) will be selected. Patient demographics are age, sex, the Expanded Disability Status Score (EDSS), Multiple Sclerosis Functional Composite score (MSFC), disease course, disease duration and relapse rate Conform Zamboni et al (2009), we focus on 5 parameters indicative of CCSVI: 1-reflux in the internal jugular vein (IJV) or in the vertebral vein (VV), or both with the head in any position, 2- reflux in the deep cerebral veins, 3- high-resolution B-mode evidence of IJV stenoses, 4flow not detected by Doppler in the IJVs or VVs, or both, and 5- reverted postural control of the main cerebral venous outflow pathways. The main point of this study is to detect in a controlled fashion if there is a relationship between CCSVI and MS.

#### **Study objective**

The main point of this study is to detect in a controlled fashion if there is a relationship between CCSVI and MS. We focus on 5 parameters indicative of CCSVI: 1-reflux in the internal jugular vein (IJV) or in the vertebral vein (VV), or both with the head in any position, 2- reflux in the deep cerebral veins, 3- high-resolution B-mode evidence of IJV stenoses, 4- flow not detected by Doppler in the IJVs or VVs, or both, and 5- reverted postural control of the main cerebral venous outflow pathways. Can we find a significant difference between MS patients and healthy controles focussed on the 5 ED parameters.

#### Study design

The study is an observational study. We want to study 50 MS patients, age and sex-matched with 50 healthy controls with extracranial Echo Doppler (ED) and Transcranial Doppler (TCD). Only clinical definitive MS patients (according to the revised MCDonald criteria) will be selected. Patient demographics are age, sex, the Expanded Disability Status Score (EDSS), Multiple Sclerosis Functional Composite score (MSFC), disease course, disease duration and relapse rate Conform Zamboni et al (2009), we focus on 5 parameters indicative of CCSVI: 1-reflux in the internal jugular vein (IJV) or in the vertebral vein (VV), or both with the head in any position, 2- reflux in the deep cerebral veins, 3-high-resolution B-mode evidence of IJV stenoses, 4- flow not detected by Doppler in the IJVs or VVs, or both, and 5- reverted postural control of the main cerebral venous outflow pathways.

#### Study burden and risks

Minimal. We do Echo Doppler; duration 60 minutes.

# 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**

-Definite MS according the revised McDonald-criteria for MS.

# **Exclusion criteria**

None

# 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:

Will not start

Enrollment:

Type:

100 Anticipated

# **Ethics review**

| Approved WMO       |   |
|--------------------|---|
| Date:              | 27-05-2011  |
| 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 CCMO ID NL35381.100.11