Near-death Experiences in Patients treated with Hypothermia after Cardiopulmonary Resuscitation

Published: 12-03-2012 Last updated: 26-04-2024

The aim of this study is to evaluate the prevalence and character of NDE in patients treated

with hypothermia after CPR.

Ethical review Approved WMO **Status** Recruitment stopped

Health condition typeNeurological disorders NEC **Study type**Observational non invasive

Summary

ID

NL-OMON37849

Source

ToetsingOnline

Brief title

NEAR

Condition

Neurological disorders NEC

Synonym

out-of-body experience, tunnel experience

Research involving

Human

Sponsors and support

Primary sponsor: Academisch Medisch Centrum

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

Intervention

Keyword: Hypothermia, Near-death experience, Resuscitation

Outcome measures

Primary outcome

The prevalence of near-death experiences in patients treated with hypothermia after cardiopumonary resuscitation.

Secondary outcome

Characteristics of the near-death experience in patients treated with

hypothermia after cardiopumonary resuscitation.

Study description

Background summary

Near-death experiences are a well-known phenomenon in medical literature with an incidence of 6-23% in patients after cardiopulmonary resuscitation. Treatment with hypothermia has been shown to decrease mortality and morbidity in patients after cardiopulmonary resuscitation. During this treatment, sedative drugs are administered and could possibly have influence on the prevalence of near-death experiences.

Study objective

The aim of this study is to evaluate the prevalence and character of NDE in patients treated with hypothermia after CPR.

Study design

Observational cohort study

Study burden and risks

Patients will receive an information letter with reply coupon. The duration of the short standardized interview by telephone contact is about 10 minutes. If the patient does not have memories of the period of unconsciousness, an informed consent for study participation will be sent, after explanation by telephone, to the patient. Patients who have memories of the period of unconsciousness will be asked to participate in a more extensive interview. This interview will take approximately 60-90 minutes and will be done by the executive investigator. There are no risks associated with participation and the burden is minimal.

Contacts

Public

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Scientific

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

Admission at the ICU between 1 October 2009 and 1 October 2011 Admitted after cardiopulmonary resuscitation and treated with hypothermia Alive (verification by contact general practitioner)

Exclusion criteria

Age < 18 years

Language disorders which interfere with questionnaires Drug overdose as cause of cardiopulmonary resuscitation Patients with known schizophrenia No informed consent

Study design

Design

Study type: Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 15-03-2012

Enrollment: 68

Type: Actual

Ethics review

Approved WMO

Date: 12-03-2012

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 NL39408.018.12