Long-term medical and (neuro)psychological outcome after cardiopulmonary resuscitation in childhood

Published: 19-03-2013
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To investigate long-term outcome, both medical and psychological, of CPR in children.

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Therapeutic procedures and supportive care NEC
Study type	Observational invasive

Summary

ID

NL-OMON39054

Source
ToetsingOnline

Brief title
CPR IN CHILDREN

Condition

- Therapeutic procedures and supportive care NEC

Synonym
cardiac arrest, Resuscitation

Research involving
Human

Sponsors and support

Primary sponsor: Erasmus MC, Universitair Medisch Centrum Rotterdam
Source(s) of monetary or material Support: Ministerie van OC&W

Intervention

Keyword: Cardiac Arrest, Children, Outcome, Resuscitation

Outcome measures

Primary outcome

The primary objective is to investigate the long-term:

1) Medical outcome (endpoint: morbidity, mortality)

2) Psychological outcome

3) Health-related quality of life (HR-QoL)

Secondary outcome

inapplicable

Study description

Background summary

Cardiopulmonary resuscitation (CPR) in children is rare. However, it is associated with a high mortality, varying from 50 to 90% depending on the location of CPR (in-hospital or out-of-hospital), and high neurologic morbidity. This is due to the etiology of circulatory arrest in children. In contrast with adults, the cause of a circulatory arrest is rarely primary cardiac (e.g. arrhythmia). The main reason for an arrest is hypoxemia caused by respiratory failure (e.g. status asthmaticus) and/or circulatory failure (e.g. hypovolemic shock).

Study objective

To investigate long-term outcome, both medical and psychological, of CPR in children.

Study design

Single centre, cohort study.

Study burden and risks

The burden will be kept as low as possible. There will be only a minimal intervention using a finger stick for laboratory blood testing. In addition, only one visit to our hospital (one daypart) will be needed for a medical and psychological examination. Questionnaires can be completed at home. There are no risks associated with this study.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adolescents (12-15 years)
Adolescents (16-17 years)
Adults (18-64 years)
Children (2-11 years)
Elderly (65 years and older)

Inclusion criteria

- children resuscitated in the Erasmus MC-Sophia (e.g. emergency department (ED), operation department (OD) ward, PICU),

- children resuscitated in a regional hospital or other university hospital, consecutively admitted at the Erasmus MC-Sophia
- children resuscitated out-of-hospital, consecutively admitted at the Erasmus MC-Sophia

Exclusion criteria

- Neonates resuscitated at the neonatal intensive care unit.
- No informed consent.
- No Dutch speaking.

Study design

Design

Study type: Observational invasive

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

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	22-05-2013
Enrollment:	100
Type:	Actual

Ethics review

Approved WMO

Date:	19-03-2013
Application type:	First submission
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

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	NL39084.078.12