Follow up ALIFE study

Published: 27-03-2012
Last updated: 01-05-2024

The objective of this study is to collect blood samples of women who participated in the ALIFE trial, to test for several DNA-variations as well as anti β2 glycoprotein antibodies, but also to perform overall coagulation assays, such as...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Coagulopathies and bleeding diatheses (excl thrombocytopenic)
Study type	Observational invasive

Summary

ID

NL-OMON39500

Source
ToetsingOnline

Brief title
Follow up ALIFE

Condition

- Coagulopathies and bleeding diatheses (excl thrombocytopenic)
- Chromosomal abnormalities, gene alterations and gene variants
- Abortions and stillbirth

Synonym
recurrent miscarriage

Research involving
Human

Sponsors and support

Primary sponsor: Academisch Medisch Centrum
Source(s) of monetary or material Support: VIDI grant prof. dr. S. Middeldorp

Intervention

Keyword: Annexin A5, anticoagulants, HCG gene mutation, recurrent miscarriage

Outcome measures

Primary outcome

Primairy study parameters are:

- Annexin A5 M2 haplotype and live birth in these women in different treatment arms in the ALIFE trial

- Anti β2 glycoprotein antibodies and live birth in these women in different treatment arms in the ALIFE trial

- HCGβ and LHβ gene variants and live birth in these women

Secondary outcome

Secundary study parameters are:

- Annexin A5 M1 haplotype

Biobank containing DNA, RNA, citrated blood, heparin blood, EDTA blood, serum and plasma of women with recurrent miscarriage

Study description

Background summary

In over 50% of cases of miscarriage the cause remains unexplained and for women with unexplained recurrent miscarriage, no treatment to improve the chance of live birth in a future pregnancy is known. In the recently performed *ALIFE study* (Kaandorp, NEJM 2010) women with 2 or more miscarriages were randomised to anticoagulant therapy or no treatment. The results showed that treatment with anticoagulant therapy in women with unexplained recurrent miscarriage does not increase live birth in a subsequent pregnancy. Several studies have suggested an association between recurrent miscarriage and a common haplotype

of the Annexin A5 gene. Knowledge of the frequency of this haplotype and possible other DNA-variations in the ALIFE cohort could provide insight in the causes of recurrent miscarriage and the potential effect of anticoagulants.
Mutations in the human chorionic gonadotrophin (HCG) beta/luteinizing hormone (LH) beta gene complex might be associated with recurrent miscarriage as well. Only few data are available on this topic and the results are conflicting. More information is necessary about the role of HCGβ gene variants or LHβ gene variants in recurrent miscarriage. This information may facilitate the improvement of early and preventive treatment of recurrent miscarriage.
Moreover, several coagulation disorders are associated with recurrent miscarriage, but the mechanisms behind these associations are unclear.

Study objective

The objective of this study is to collect blood samples of women who participated in the ALIFE trial, to test for several DNA-variations as well as anti β2 glycoprotein antibodies, but also to perform overall coagulation assays, such as clot lysis assay and endogenous thrombin potential, to further investigate possible causes of recurrent miscarriage.
DNA, RNA, citrated blood, heparin blood, EDTA blood, serum and plasma will be stored in a biobank to enable future analyses of (coagulation) parameters and DNA variations that play a role in the pathophysiology of pregnancy complications and cardiovascular disease, and predict the response on anticoagulant therapy of pregnancy complications.

Study design

This study is designed as a cohort study in women with recurrent miscarriage and post hoc analysis of the effect of intervention in the ALIFE trial on women with Annexin A5 haplotypes, or anti β2 glycoprotein antibodies.
Furthermore, a bio bank will be established to enable future research as described in the objectives.

Study burden and risks

Participation in this study should involve no risk.
Participating women will undergo blood withdrawal once. We anticipate that the results of the DNA tests and coagulation assays will have no direct consequences for health and well being of the participating women. If the results do turn out te be relevant, participating women will be informed if they have indicated that they wish to be informed of this.

Contacts

Public
Academisch Medisch Centrum

Meibergdreef 9
Amsterdam 1105 AZ
NL
Scientific
Academisch Medisch Centrum

Meibergdreef 9
Amsterdam 1105 AZ
NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

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

Inclusion criteria

participation in the previously performed ALIFE study (Kaandorp, NEJM, 2010)

Exclusion criteria

none

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):	22-04-2013
Enrollment:	364
Type:	Actual

Ethics review

Approved WMO

Date:	27-03-2012
Application type:	First submission
Review commission:	METC Amsterdam UMC

Approved WMO

Date:	25-02-2013
Application type:	Amendment
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	NL38201.018.11