

# Pilot study added value intermittent vacuum therapy (IVT)

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To determine the effect of IVT on walking distance after 6 and 12 weeks, 6 months and 1 year in patients with IC who are treated with a SET program. To determine the optimal timing for IVT within the SET program.

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruiting
<b>Health condition type</b>	Arteriosclerosis, stenosis, vascular insufficiency and necrosis
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON44065

### Source

ToetsingOnline

### Brief title

Pilot Vacumed

### Condition

- Arteriosclerosis, stenosis, vascular insufficiency and necrosis

### Synonym

intermittent claudication, peripheral arterial disease

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Catharina-ziekenhuis

**Source(s) of monetary or material Support:** subsidie

## Intervention

**Keyword:** intermittent claudication, intermittent vacuum therapy, peripheral arterial disease, supervised exercise therapy

## Outcome measures

### Primary outcome

Maximum walking distance after 6 and 12 weeks, 6 months and 1 year, measured by a standardized treadmill test .

### Secondary outcome

Functional walking distance after 6 and 12 weeks, 6 months and 1 year, measured by a standardized treadmill test .

Quality of life and walking disability after 6 and 12 weeks, 6 months and 1 year, measured by questionnaires.

## Study description

### Background summary

The preferred treatment for patients with intermittent claudication (IC) is supervised exercise therapy (SET) supported with secondary risk prevention. Today, patients with IC are also treated with intermittent vacuum therapy (IVT). There is no hard evidence supporting the proposed mechanisms of action. If we demonstrate that IVT influences the blood flow restricted by atherosclerosis, it could potentially be an additional treatment for patients with IC.

### Study objective

To determine the effect of IVT on walking distance after 6 and 12 weeks, 6 months and 1 year in patients with IC who are treated with a SET program. To determine the optimal timing for IVT within the SET program.

### Study design

Randomized, placebo-controlled clinical pilot study of one year in the

Catharina Hospital in Eindhoven, the Maxima Medical Center Veldhoven and the St. Anna Hospital in Geldrop.

## **Intervention**

80 patients divided into 2 groups of 40 patients. Group 1: patients receive a SET program during 1 year supplemented with IVT in weeks 1 till 12. Group 2: patients receive a SET program during 1 year supplemented with sham-IVT in weeks 1 till 12.

## **Study burden and risks**

Patients receive standard conservative management for IC (CVRM and SET) and are also referred to the 'Been-Kliniek' in Eindhoven for IVT or sham-IVT. There is a minimum of 8 and a maximum of 12 IVT or sham-IVT treatments per patient. An IVT or sham-IVT treatment takes 30 minutes. The total time investment per patient is about 6 hours spread over 6 weeks, excluding travel time. There are no risks associated with IVT or sham-IVT.

## **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

- Conservative treatment with supervised exercise therapy (SET)
- Sufficient additional insurance or sufficient financial resources for a SET program of 1 year
- Sufficiently motivated to participate in the study (particularly additional (travel) time investment for treatment with IVT in the 'Been-Kliniek' in Eindhoven)
- Informed consent

### Exclusion criteria

- Previous treatment for PAD in the past 2 years (conservative and/or invasive technique)
- Prior treatment with IVT (possibly for other indications than PAD)
- Cognitive disabilities
- Inadequate control of the Dutch language
- Contraindications for IVT (pregnancy, infection and/or inflammation of the lower limb(s), abdominal wall hernia)
- Recent (<6 weeks) trauma of the lower limb(s)
- Severe cox- or gonarthrosis and planned joint replacement therapy

## Study design

### Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Placebo
Primary purpose:	Treatment

## Recruitment

NL  
Recruitment status: Recruiting  
Start date (anticipated): 04-12-2015  
Enrollment: 80  
Type: Actual

## Ethics review

Approved WMO  
Date: 01-12-2015  
Application type: First submission  
Review commission: MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO  
Date: 19-05-2016  
Application type: Amendment  
Review commission: MEC-U: Medical Research Ethics Committees United (Nieuwegein)

Approved WMO  
Date: 18-08-2016  
Application type: Amendment  
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

ID: 26769  
Source: Nationaal Trial Register  
Title:

## In other registers

Register	ID
CCMO	NL54340.100.15
OMON	NL-OMON26769