Coagulation improvement after platelet transfusion in critically ill patients

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We propose an observational clinical trial in critically ill patients to investigate the effect and duration of platelet transfusion on coagulation, including platelet function and markers of endothelial activation in critically ill patients.

Ethical review Approved WMO **Status** Recruitment stopped **Health condition type** Platelet disorders

Study type Observational invasive

Summary

ID

NL-OMON44365

Source

ToetsingOnline

Brief title

Captain

Condition

Platelet disorders

Synonym

low platelet count, Thrombocytopenia

Research involving

Human

Sponsors and support

Primary sponsor: Academisch Medisch Centrum

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

Intervention

Keyword: Coagulation, ICU, Platelet transfusion, Thrombocytopenia

Outcome measures

Primary outcome

The increase in platelet count and the effect on coagulation before and after platelet concentrate transfusion.

Secondary outcome

Platelet increment at 2 and 4 hours

- Rotational tromboelastography (INTEM, EXTEM, FIBTEM)
- MCF, CT, CFT, α-Angle.
- Classical coagulation tests
- PT, INR, aPTT
- Fibrinogen
- D-Dimer
- Multiplate
- AUC, slope.
- Trombin-antitrombin complexes
- Trombin generation
- Endothelial activation
- Syndecan
- Fragmentocytes

Study description

Background summary

Platelet transfusion is frequently administered to critically ill patients. However, there is a paucity of data about its effects on coagulation. Of note, opposite to the research hypothesis, recent investigations show that platelet transfusion is not favourable in patients with cerebral haemorrhage on antiplatelet therapy. To address the effects and duration of platelet transfusion on coagulation, we want to perform a thromboelastometric study in critically ill patients, scheduled for a single platelet transfusion.

Study objective

We propose an observational clinical trial in critically ill patients to investigate the effect and duration of platelet transfusion on coagulation, including platelet function and markers of endothelial activation in critically ill patients.

Study design

Single centre observational clinical trial.

Study burden and risks

Critically ill patients differ from hematological patients in both causes of thrombocytopenia and the response to PLT transfusion. Detrimental effects of transfusion are thought to be more extensive in critically ill patients. Therefore, a study in this specific patient population is necessary.

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

- Patients need to be admitted to the Intensive Care Unit
- The indication for 1 unit of PLT concentrate, at physician*s discretion.
- Arterial line to enable blood sampling.

Exclusion criteria

- Contra-indication for PLT transfusion, e.g. TTP.
- The use of ticagrelor or clopidogrel.
- Severe active bleeding, e.g. bleeding that leads to multiple transfusions.
- No informed consent

Study design

Design

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Basic science

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 08-05-2018

Enrollment: 24

Type: Actual

Ethics review

Approved WMO

Date: 28-11-2017

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 NL63679.018.17