

# Measuring the Activated Clotting Time in patients receiving unfractionated heparin prior to coronary angiography and intervention. A single-centre validation study comparing different blood sampling sites

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This study aims at establishing the influence of sampling site on the variability of ACT measurement at the end of coronary angiography or PCI.

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Pending
<b>Health condition type</b>	Coronary artery disorders
<b>Study type</b>	Observational invasive

## Summary

### ID

NL-OMON44549

### Source

ToetsingOnline

### Brief title

Validation of ACT measurements

### Condition

- Coronary artery disorders

### Synonym

coronary artery disease

### Research involving

Human

## Sponsors and support

**Primary sponsor:** Noordwest Ziekenhuisgroep

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

## Intervention

**Keyword:** activated clotting time, coronary angiography, heparin

## Outcome measures

### Primary outcome

Variability in ACT measurements at different blood sampling sites at the end of coronary angiography or intervention in patients receiving pre-procedural UFH.

### Secondary outcome

N.A.

## Study description

### Background summary

The current era of coronary angiography and intervention in a progressively aging and frail population- bids for a feasible and clear protocol regarding the administration of UFH and measuring its level of anticoagulation. The activated clotting time (ACT) reflects UFH activity and has been used for decades to monitor or adjust heparin dosage.<sup>1</sup> However, no definite guidelines regarding ACT measurements exist. The ACT measurements could be obtained from venous as well as arterial blood samples. Theoretically, sampling blood from heparin-coated access sites (i.e. arterial sheath, diagnostic or guiding catheter) might influence ACT measurement and result in an incorrect representation of coagulation level. It goes without saying that underestimation or overestimation of coagulation level might jeopardize adequate coronary treatment and patient well-being.

### Study objective

This study aims at establishing the influence of sampling site on the variability of ACT measurement at the end of

coronary angiography or PCI.

## Study design

Prospective, single-center observational study

## Study burden and risks

The burden of participation solely consists of obtaining extra blood from the three sample sites (i.e. approximately 10cc of blood). Therefore, there are no risks in participation, but benefit is also small since the treatment does not differ from routine practice.

## 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

Consecutive patients scheduled for diagnostic coronary angiography or elective percutaneous coronary intervention (PCI) are screened for entry into this study. Patient are eligible for this study when it is expected that the scheduled procedure will be accomplished with a single bolus of heparin, i.e. patient undergoing a procedure with expected duration of > 1 hour will not be included in this study.

## Exclusion criteria

- Use of novel oral anticoagulants or vitamin K antagonists
- Chronic use of non-steroid anti-inflammatory drugs with the exception of aspirin
- Known renal insufficiency (e.g. serum creatinine level of more than 265  $\mu\text{mol/L}$  (i.e. more than 3.5 mg/L))
- Liver function disorders with coagulopathies (PT >1.5N, INR >2.0 and/or thrombocyte count < 100 x 10<sup>9</sup>/L)
- Suspicion of unstable coronary artery disease with chest pain in rest, ECG changes, elevated cardiac markers, or hemodynamic instability at the time of the procedure
- Unability to read and understand the Dutch language
- Previous participation in this study

## Study design

### Design

**Study type:** Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

### Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-01-2018

Enrollment: 100

Type: Anticipated

## Ethics review

Approved WMO

Date: 23-11-2017

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	NL63160.094.17