# Predictive Value of the Angiotensin-II type 1 and Endothelin Receptor Autoantibodies on disease course in COVID-19

Published: 14-01-2021 Last updated: 08-04-2024

To assess the potential of AT1R and ETAR antibodies to serve as a biomarkers for clinical deterioration in COVID-19.

Ethical reviewApproved WMOStatusPendingHealth condition typeRespiratory tract infectionsStudy typeObservational invasive

# Summary

### ID

NL-OMON49663

**Source** ToetsingOnline

Brief title AERA-COVID

## Condition

• Respiratory tract infections

**Synonym** coronavirus, COVID-19, pneumonia

**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

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#### Intervention

Keyword: Antibodies, COVID-19, Hypoxemia, Intensive Care, Prediction, Respiratory distress

#### **Outcome measures**

#### **Primary outcome**

The proportion of patients with an unfavourable outcome in COVID-19.

#### Secondary outcome

To assess the presence of ANA antibodies in the study patients, and correlate

their presence with ETAR and AT1R antibodies.

To assess the presence and titre of AT1R and ETAR antibodies at admission and

on the seventh day of admission for COVID-19

To assess cFN-EDA levels in COVID-19 patients at admission and on the seventh

day of admission for COVID-19.

# **Study description**

#### **Background summary**

A significant proportion of COVID-19 patients admitted to hospital experience clinical deterioration and require ICU admission. In a recently performed cross-sectional study, it was observed that presence of AT1R and/or ETAR antibodies are associated with an unfavourable outcome (defined as requirement of high-flow nasal cannula, ICU admission or death during admission) in COVID-19.

#### **Study objective**

To assess the potential of AT1R and ETAR antibodies to serve as a biomarkers for clinical deterioration in COVID-19.

#### Study design

Prospective single centre, observational cohort study.

#### Study burden and risks

Peripheral blood will be withdrawn once, after informed consent, by means of vena puncture during admission for COVID-19. Vena puncture can cause mild discomfort; the puncture could be experienced as being painful, and a hematoma could result from this procedure. There are no further risks associated with participation. The subject will not have direct benefit from the findings in this study, but it could be of great value for optimizing risk assessment in the current COVID-19 pandemic.

# Contacts

**Public** Erasmus MC, Universitair Medisch Centrum Rotterdam

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# **Trial sites**

### **Listed location countries**

Netherlands

# **Eligibility criteria**

#### Age

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

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### **Inclusion criteria**

All patients presenting at the Emergency department with respiratory symptoms and/or fever are evaluated for participation.

In order to be eligible to participate in this study, a subject must meet all of the following criteria:

- Age >= 18 years
- Hospitalized with PCR confirmed COVID-19
- Able to sign informed-consent form

### **Exclusion criteria**

A potential subject who meets any of the following criteria will be excluded from participation in this study:

- the patients gives no informed consent
- Already hospitalized for >72 hours

# Study design

### Design

Study type: Observational invasive	
Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Basic science

#### Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	18-11-2020
Enrollment:	320
Туре:	Anticipated

# **Ethics review**

#### Approved WMO

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Date:	14-01-2021
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** CCMO **ID** NL75731.078.20