# Dabigatran trough levels in elderly patients: are these increased, and to what extent? A pilot study.

Published: 29-05-2017 Last updated: 12-04-2024

Objective of the study is to measure dabigatran trough levels, percentage of dabigatran glucuronidation, and diluted thrombin time, to test whether these levels are different in elderly patients.

**Ethical review** Approved WMO **Status** Recruitment stopped

**Health condition type** Coagulopathies and bleeding diatheses (excl thrombocytopenic)

**Study type** Observational invasive

## **Summary**

#### ID

NL-OMON50084

#### Source

ToetsingOnline

#### **Brief title**

Dabigatran trough levels in elderly.

#### **Condition**

- Coagulopathies and bleeding diatheses (excl thrombocytopenic)
- Cardiac arrhythmias
- Gastrointestinal haemorrhages NEC

#### Synonym

bleeding risk, prolonged clotting time

#### **Research involving**

Human

## **Sponsors and support**

**Primary sponsor:** Catharina-ziekenhuis

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**Source(s) of monetary or material Support:** Catharina ziekenhuis: geriatrie + algemeen klinisch laboratorium

#### Intervention

Keyword: Dabigatran, Elderly, Trough level

#### **Outcome measures**

#### **Primary outcome**

Primary parameter is the dabigatran trough level, which will be analyzed by multivariate linear regression, with age and renal function as covariates.

Besides this, also median values per age category (< 75, 75-85 and > 85 years) will be shown and compared. Because of correction for dose, all concentrations will be shown als ng/ml/mg.

#### **Secondary outcome**

Secondary outcomes are:

- 1) the percentage of each age group having dabigatran trough levels higher than 150 ng/ ml;
- 2.) the amount and percentage of glucuronidated dabigatran, and relation to the age of the patient;
- 3.) the clotting time as diluted thrombin time and it's relation to dabigatran level and to the amount of glucuronidated dabigatran.

# **Study description**

#### **Background summary**

Many elderly patients need to use anticoagulants. The new group of oral anticoagulant medicins has some important benefits for elderly patients when compared to the current treatment with acenocoumarol or fenprocoumon. But,

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since elderly patients have higher bleeding risk when using anticoagulants, many physicians hesitate to start the new direct oral anticoagulants in very old patients. Results of previous studies show that dabigatran trough levels vary a lot between patients, and on average levels are higher in elderly. It is also known that the risk of gastrointestinal bleedings is higher in elderly, and the age-related increase in the number of bleedings is even larger in elderly using dabigatran than in patients on warfarin. Because of this, extra precaution is needed in the elderly patients. The best plasma concentration for having best stroke prevention on the one hand and the lowest bleeding risk on the other hand, is not clear yet. But there is some evidence that when trough levels are higher than 150 ng /ml the risk of bleeding is increasing much, while not much extra reduction of stroke risk is gained.

#### Study objective

Objective of the study is to measure dabigatran trough levels, percentage of dabigatran glucuronidation, and diluted thrombin time, to test whether these levels are different in elderly patients.

#### Study design

The study has an observational design. One blood sample is taken from every patient for measuring a dabigatran trough level and the other tests as mentioned before.

#### Study burden and risks

Patients visit the hospital once for about one and a half hour. After giving informed consent, they will answer a few questions about medical history, medication use and weight, and the blood sample will be taken. The burden and risks are very small. There is no direct benefit for the patient himself. The benefit on population level is the increase of knowledge about pharmacokinetics of this quite new anticoagulant in elderly patients. But, in case the measured level would be elevated very much, the patient and prescribing doctor will be informed and the dose can be adjusted.

## **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**

Outpatients from cardiology or geriatric clinic. Dabigatran use since at least 1 week. Dabigatran dose 2 times daily, 110 or 150 mg. Indication for dabigatran: atrial fibrillation.

#### **Exclusion criteria**

Use of trombocyte aggregation inhibitors.

Use of PgP inhibitors.

Limitation in renal function, clearance (CKD-epi) < 30 ml/min.

Elevation of liver transaminases above 2 x upper limit of normal.

Malignancy.

Body weight below 50 kilograms or above 110 kilograms.

Incapacitated patients.

# Study design

### **Design**

Study phase: 4

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Treatment

#### Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 17-08-2017

Enrollment: 75

Type: Actual

## **Ethics review**

Approved WMO

Date: 29-05-2017

Application type: First submission

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 28-05-2018

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 25-09-2018

Application type: Amendment

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

Approved WMO

Date: 17-01-2019

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

No registrations found.

## In other registers

Register ID

CCMO NL59428.100.16