

Ultrasound-guided biopsy from hand joints in arthralgia or arthritis patients: a feasibility study

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To determine the feasibility of performing US-guided synovitis and tenosynovitis in wrist and MCP-joints, and investigate the quality and quantity of the obtained tissues.

| | |
|------------------------------|------------------------|
| Ethical review | Approved WMO |
| Status | Recruiting |
| Health condition type | Autoimmune disorders |
| Study type | Observational invasive |

Summary

ID

NL-OMON51914

Source

ToetsingOnline

Brief title

Biopsy from hand joints

Condition

- Autoimmune disorders

Synonym

arthralgia, arthritis

Research involving

Human

Sponsors and support

Primary sponsor: Leids Universitair Medisch Centrum

Source(s) of monetary or material Support: derde of vierde geldstroom

Intervention

Keyword: Arthralgia, Arthritis, Hand joint inflammation, Ultrasound-guided biopsy

Outcome measures

Primary outcome

Success rate of US-guided synovitis and tenosynovitis biopsy, which is based on the quality and quantity of the obtained tissues.

Secondary outcome

NA

Study description

Background summary

The mechanisms underlying arthritis becoming chronic are poorly understood. The development of rheumatoid arthritis (RA) is considered to be a multiple-hit process that is largely taking place before the disease presents with clinically swollen joints. The disease is characterised by inflammation of synovium, preferentially the joints of the hands. Research, from our own department using MRI, showed that RA is also characterized by inflammation of the tenosynovium, as tenosynovitis is present in >85% of RA-patients at the time of diagnosis. Furthermore tenosynovitis is one of the first features of developing RA. Tissue research has so far focussed on synovitis, using established molecular techniques on biopsies from patients with established disease. Ultrasound (US)-guided synovial biopsy techniques have been developed, also for hand joints, and proved reliable, minimally invasive, well-tolerated and safe when grade 2 inflammation is present. Whilst established molecular techniques require relatively large tissue samples, novel techniques have developed, such as single cell sequencing and imaging mass cytometry, which provide unprecedented possibilities to discover (novel) cells characterizing disease and require only small tissue fragments. This would allow to perform molecular studies of synovitis and tenosynovitis from hand joints in patients in early phases of RA. Other European groups performing US-guided biopsies, showed that sufficient material for analyses could be obtained in ~60-90% of patients biopsied, and that this material was representative of the joint status in small joints of RA-patients. We aim to determine if it is feasible in our center to perform US-guided synovitis and tenosynovitis biopsies in the metacarpophalangeal (MCP)- or wrist joints with grade 2 inflammation and

analysis the obtained tissues. If successful we aim to expand the study in patients with early stages of RA to enhance our understanding of RA-pathogenesis and promote subsequent development of targeted therapies

Study objective

To determine the feasibility of performing US-guided synovitis and tenosynovitis in wrist and MCP-joints, and investigate the quality and quantity of the obtained tissues.

Study design

This is a cross-sectional observational study.

Study burden and risks

Patients will have US-guided biopsy. Patients will have no benefits when participating in this study. Results, which are molecular analyses of (teno)synovium tissue, will not be communicated to rheumatologists or patients.

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 referred to rheumatology outpatient clinic (LUMC).
- Age ≥ 18 years.
- Grade ≥ 2 synovitis or tenosynovitis.
- Consent to comply with the requirements of the study protocol.

Exclusion criteria

- Contraindications to ultrasound-guided biopsy, such as active skin infection and anticoagulant/antiplatelet treatment.
- Known for lidocaine-allergy

Study design

Design

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

Recruitment

NL

Recruitment status: Recruiting

Start date (anticipated): 13-04-2021

Enrollment: 30

Type: Actual

Ethics review

Approved WMO

Date: 13-01-2021

Application type: First submission

Review commission: METC Leiden-Den Haag-Delft (Leiden)

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Approved WMO

Date: 27-10-2022

Application type: Amendment

Review commission: METC Leiden-Den Haag-Delft (Leiden)

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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 | NL75734.058.20 |