# AntiPhosphoLipid antibodies and pointof-care INR measurement with CoaguChek - VervOlg Studie

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The primary goal of this study is to compare serial paired POC and venous INR measurements and to distill an individual conversion factor per patient, enabling the ungoing use of POC-INR measurement also in this patient group.

**Ethical review** Approved WMO **Status** Recruiting

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

**Study type** Observational invasive

# **Summary**

#### ID

NL-OMON56632

#### Source

ToetsingOnline

**Brief title**APLIVOS

### **Condition**

- Coagulopathies and bleeding diatheses (excl thrombocytopenic)
- Autoimmune disorders
- Embolism and thrombosis

#### Synonym

Antiphospholipid syndrome

### **Research involving**

Human

# **Sponsors and support**

**Primary sponsor:** Universitair Medisch Centrum Utrecht

1 - AntiPhosphoLipid antibodies and point-of-care INR measurement with CoaguChek - V ... 8-05-2025

#### Source(s) of monetary or material Support: onderzoeksbeurs FNT

#### Intervention

**Keyword:** Ahtiphospholipid syndrome, anticoagulation, International normalized ratio, thrombosis, Vitamin K antagonists

#### **Outcome measures**

#### **Primary outcome**

The main study parameter is the difference in INR values measured with the Coaguchek and Coagulometer.

### **Secondary outcome**

Secondary parameter includes the determination of antiphospholipid antibodies:  $IgG \ / \ IgM \ directed \ against \ cardiolipin, \ \beta 2-Glycoprotein \ I \ and \ prothrombin, \ and$  antiphospholipid antibodies that prolong the clotting time in vitro, known as  $Iupus \ anticoagulant.$ 

# **Study description**

#### **Background summary**

Patients with the antiphospholipid syndrome (APS) on anticoagulant therapy can be monitored with the international normalized ratio (INR) using Point Of Care (POC) devices. However, INR values can be falsely elevated due to antiphospholipid antibodies using POC devices. Previous research from our group confirmed that POC-INR values in patients with high titers of anti-B2-glycoprotein IgG and strong lupus anticoagulant specifically give an overestimation of the true INR. At this moment, these patients are advised not to use POC-measurements any longer.

In the current study, we will compare serial INR values in APS patients measured with the most commonly used POC device (CoaguChek) in the Netherlands with whole blood INR values measured with the Owren method using a rabbit brain derived thromboplastin in our laboratory in the UMC Utrecht. We aim to distill an individual conversion factor per patient, enabling the ungoing use of POC-INR measurement also in this patient group.

### Study objective

The primary goal of this study is to compare serial paired POC and venous INR measurements and to distill an individual conversion factor per patient, enabling the ungoing use of POC-INR measurement also in this patient group.

### Study design

Prospective, single center, observational study.

### Study burden and risks

For this study, patients will endure 1 finger stick procedure and 1 venapuncture (6 mL blood) at ten monthly timepoints, which both induces a very low risk and burden to humans. The main risk associated with these procedures is little local bruising and slight local discomfort. No alterations to medication or life style are introduced.

### **Contacts**

#### **Public**

Universitair Medisch Centrum Utrecht

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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

- Age 18 years and older
- Previously confirmed APS, diagnosed in accordance with the Sydney criteria
- High titers of anti-B2-glycoprotein-I IgG at screening (titer > 99th percentile)
- Lupus anticoagulant positive at screening
- Receiving VKA during at least 3 months
- At least one thromboembolic event in the past
- Willing and be able to understand the study information and sign the informed consent form

### **Exclusion criteria**

Patients with only obstetric complications of antiphospholipid syndrome without thrombotic events

# 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): 06-05-2024

Enrollment: 44

T۱	ype:	Actua	١l

### Medical products/devices used

Registration: No

# **Ethics review**

Approved WMO

Date: 20-03-2024

Application type: First submission

Review commission: METC NedMec

Approved WMO

Date: 05-08-2024

Application type: Amendment

Review commission: METC NedMec

# **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 NL85268.041.23