

Exhaled breath analysis to diagnose acute lung injury.

Gepubliceerd: 19-07-2018 Laatste bijgewerkt: 18-08-2022

Octane concentrations in exhaled breath facilitate early detection of ARDS in ICU patients.

Ethische beoordeling	Niet van toepassing
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Observationeel onderzoek, zonder invasieve metingen

Samenvatting

ID

NL-OMON27817

Bron

Nationaal Trial Register

Verkorte titel

DARTS study

Aandoening

ARDS, non-invasive diagnostic tests, early detection, octane

Dutch: ARDS, niet-invasieve diagnostische methoden, vroege detectie, octane

Ondersteuning

Primaire sponsor: Amsterdam UMC, locatie AMC.

Overige ondersteuning: Longfonds, Health Holland

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Exhaled breath concentration of octane, measure by compact gas-chromatography.

Toelichting onderzoek

Achtergrond van het onderzoek

The acute respiratory distress syndrome (ARDS) is a severe complication of critical illness characterized by acute onset, protein rich, pulmonary edema and is associated with mortality rates above 40%. Early diagnosis and monitoring are major challenges. The diagnosis is based on timing, chest-radiography, origin of edema and the oxygenation values. However, still in half of the cases the diagnosis was missed. (ref) Gas-chromatography mass-spectrometry (GC-MS) is used in exhaled breath analysis to obtain concentrations of volatile compounds (VOCs). A biomarker that was found to be associated with ARDS is octane. Since GC-MS is labour intensive, requires specialized personnel and is not available bedside, it is not suitable for use in the intensive care unit (ICU) setting. Therefore a smaller device was developed which can quantitatively measure octane in exhaled breath. This point of care prototype will be tested in clinical setting and will be compared with other non-invasive diagnostic tests. Goal of this study is (1) to evaluate the diagnostic accuracy of a point of care octane breath test for ARDS in intubated and mechanically ventilated ICU patients; (2) to evaluate the association between changes in exhaled octane concentrations and changes in the clinical characteristics of patients with ARDS; and (3) to compare the diagnostic and predictive (additive) accuracy of several non-invasive tests for ARDS.

Doel van het onderzoek

Octane concentrations in exhaled breath facilitate early detection of ARDS in ICU patients.

Onderzoeksopzet

Within 48 hours after intubation until a follow up of 90 days.
First measurement within 48 hours after intubation, second 24 hours later.

Onderzoeksproduct en/of interventie

NA

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Intubated and mechanically ventilated for less than 48 hours.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- Patient is expected to be deceased within 24 hours.
- Exhaled breath collection deemed inappropriate by the attending physicians.
- Active withdrawal from the study by the patient or his/her legal representative.
- Present admission to the ICU is a readmission.

Onderzoeksopzet

Opzet

Type:	Observationeel onderzoek, zonder invasieve metingen
Onderzoeksmodel:	Parallel
Toewijzing:	N.v.t. / één studie arm
Blinding:	Open / niet geblindeerd

Controle: N.v.t. / onbekend

Deelname

Nederland

Status: Werving nog niet gestart

(Verwachte) startdatum: 01-01-2019

Aantal proefpersonen: 500

Type: Verwachte startdatum

Ethische beoordeling

Niet van toepassing

Soort: Niet van toepassing

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL7170
NTR-old	NTR7393
Ander register	: NA

Resultaten