

# Dynamics of the innate, cellular and humoral immune response in healthy persistent, intermittent and noncarriers of *Staphylococcus aureus*

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This study aims to identify qualitative and quantitative differences in innate, cellular and humoral immune response between persistent, intermittent and noncarriers of *S. aureus*.

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruiting
<b>Health condition type</b>	Bacterial infectious disorders
<b>Study type</b>	Observational invasive

## Summary

### ID

NL-OMON30541

### Source

ToetsingOnline

### Brief title

STAIR study

### Condition

- Bacterial infectious disorders

### Synonym

Nasal colonisation *Staphylococcus aureus*

### 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

## Intervention

**Keyword:** Antistaphylococcal Antibodies, Leukocytes, Nasal colonisation, Staphylococcus aureus

## Outcome measures

### Primary outcome

1. The amount of persistent, intermittent and noncarriers
2. The qualitative or quantitative difference in the presence of antistaphylococcal IgG, IgM and IgA between healthy persistent, intermittent and noncarriers of *S. aureus* in blood or nasal secretion
3. The qualitative or quantitative difference in the presence of CD4+ and CD8+ T cells between healthy persistent, intermittent and noncarriers of *S. aureus* in blood
4. The difference in protein composition of nasal secretion between healthy persistent, intermittent and noncarriers of *S. aureus*
5. The qualitative or quantitative difference in the presence of antistaphylococcal antibodies and cellular immune response between healthy individuals compared to patients with a bacteremia caused by *S. aureus*

### Secondary outcome

Not applicable

## Study description

### Background summary

*Staphylococcus aureus* (*S. aureus*) is an important pathogen causing a variety of infections ranging from mild to life threatening in the community as well as in hospitals. The rise of MRSA has further increased the impact of *S. aureus*.

Carriers of *S. aureus*, about 20% of the healthy population, have an increased risk of developing *S. aureus* infection. Carriers even have a three fold higher risk for acquiring *S. aureus* bacteremia, but a significant lower risk of death due to bacteremia compared to noncarriers. An explanation for this observation has not been found yet, although a role for the immune response has been proposed. Due to long time exposure, carriers may have developed a certain level of immunity and possess protective antibodies and leukocytes. Noncarriers may possess other antibodies and leukocytes, which protects them from becoming a carrier. Infected patients are expected to display a high level of immune response. Still, little is known about if, and if so, which immune mechanisms are involved in *S. aureus* carriage and *S. aureus* infection however.

## **Study objective**

This study aims to identify qualitative and quantitative differences in innate, cellular and humoral immune response between persistent, intermittent and noncarriers of *S. aureus*.

## **Study design**

Cross sectional study. 400 healthy individuals are included.

On t0 a short questionnaire is filled in, a nasal swab and two bloodsamples are taken. On t1 (one week later) a nasal swab is taken and nasal secretion is collected.

## **Study burden and risks**

The burden associated with participation is two short visits to the Erasmus MC. The first time (t0) a short questionnaire is filled in, a nasal swab and two bloodsamples are taken. Duration: 20 minutes.

One week later (t1) a nasal swab is taken and nasal secretion is collected.

Duration: 15 minutes. Total duration of study: 35 minutes.

There are no risks associated with filling in the questionnaire, taking a nasal swab and collection of nasal secretion. The risk associated with the collection of blood is a hematoma and pain near the ejection site. An experienced person (not a student) will collect the sample.

## **Contacts**

### **Public**

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## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

Elderly (65 years and older)

### Inclusion criteria

Healthy individuals older than 18 years

The volunteer has given informed consent

### Exclusion criteria

Individuals with age below 18 years

Volunteers with diabetes mellitus, renal insufficiency, COPD, heart diseases, immunocompromised status (HIV, AIDS) or use of immunosuppressants, skin diseases like eczema and psoriasis.

## Study design

## Design

**Study type:** Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Basic science

## Recruitment

NL

Recruitment status: Recruiting

Start date (anticipated): 03-09-2007

Enrollment: 400

Type: Actual

## Ethics review

Approved WMO

Date: 05-06-2007

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**

NL16312.078.07