

The influence of rehydration and the antidiuretic hormone on blood coagulation in the dehydrated patient

Published: 10-07-2013

Last updated: 22-04-2024

Primary objective is: - To evaluate the effects of dehydration and subsequent rehydration on coagulation and fibrinolytic parameters
Secondary objectives are:- To evaluate whether the response of coagulation and fibrinolytic parameters to fluid...

| | |
|------------------------------|----------------------------|
| Ethical review | Approved WMO |
| Status | Will not start |
| Health condition type | Other condition |
| Study type | Observational non invasive |

Summary

ID

NL-OMON38865

Source

ToetsingOnline

Brief title

ADH study- part 1

Condition

- Other condition
- Endocrine and glandular disorders NEC

Synonym

dehydration, fluid deficiency

Health condition

vochthuishouding

Research involving

Human

Sponsors and support

Primary sponsor: Slotervaartziekenhuis

Source(s) of monetary or material Support: via de SKWOSZ (stichting klinisch wetenschappelijk onderzoek slotervaartziekenhuis)

Intervention

Keyword: antidiuretic hormone, coagulation, hemostasis, rehydration

Outcome measures

Primary outcome

Coagulation and fibrinolysis activation markers: F1+2 (fragment 1+2), ETP (endogenous thrombin potential), D-dimer, Plasminogen Activator Inhibitor-1 (PAI-1) activity.

Endothelial cell activation and platelet activation markers: von Willebrand factor activity (vWf:C), clotting factor VIII activity (fVIII:C).

Blood coagulation time: PT.

Secondary outcome

urine osmolarity, plasma osmolarity, antidiuretic hormone, hematocrit.

Study description

Background summary

The therapeutic use of ADH is still under investigation. Desmopressin, a synthetic analogue of the natural pituitary hormone ADH (DDAVP), has been widely used in several European countries as an alternative to the use of blood products in the treatment of von Willebrand disease and mild hemophilia A.³ It was discovered that this drug, when administered either intranasally or intravenously, results in a rapid two- to threefold increase in all components of the factor VIII system. Due to this fast action, it was always believed that DDAVP does not stimulate the production of coagulation factors, but rather a release of pre-made factors from storage granules in the endothelial cells.^{4;5}

Although the effects of administered DDAVP in von Willebrand disease, mild hemophilia A and even healthy subjects on haemostasis have been the subject of extensive investigation, the physiologic effects of fluid deprivation and subsequent, physiologic, rise of ADH on coagulation and fibrinolysis has not yet been investigated.

Study objective

Primary objective is:

- To evaluate the effects of dehydration and subsequent rehydration on coagulation and fibrinolytic parameters

Secondary objectives are:

- To evaluate whether the response of coagulation and fibrinolytic parameters to fluid restoration is mediated by ADH.
- To evaluate whether the response of coagulation and fibrinolytic parameters to dehydration is influenced by a coexisting infection.

Study design

Observational clinical study/pilot study.

Study burden and risks

As these patients are already admitted to the hospital with, amongst others, serious signs of dehydration there are no additional risks when participating in this study. The number of times that blood is taken remains the same, only the total amount is more. Participating in this study will not change the treatment or the duration of hospital stay for these patients.

Contacts

Public

Slotervaartziekenhuis

Louwesweg 6
Amsterdam 1066EC
NL

Scientific

Slotervaartziekenhuis

Louwesweg 6
Amsterdam 1066EC
NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

- a. Adults * 18 years old.
- b. Able to provide informed consent.
- c. Confirmed infection of any cause (for 6 patients)

Exclusion criteria

- a. Strong suspicion of an infection of any cause (for 6 patients) see definition of infection
- b. Primary polydipsia and diabetes insipidus.
- c. Untreated thyroid and adrenal hormone abnormalities.
- d. Pregnancy or puerperium.
- e. Common etiologies of the syndrome of inappropriate antidiuretic hormone (SIADH); Active malignancy, inflammatory diseases (multiple sclerosis, meningitis, systemic lupus erythematosus), acquired immuno- deficiency syndrome (AIDS), infections (tuberculosis, pneumonia, empyema) (only for those 6 patients without signs of infection), cystic fibrosis, drugs (Selective serotonin reuptake inhibitors, tricyclic antidepressants, carbamazepine, clofibrate, narcotics, antipsychotic drugs, cytotoxic drugs)
- f. Potentiation of AVP antidiuretic effects: desmopressin, vasopressin, oxytocin, prostaglandin synthesis inhibitors

Study design

Design

Study type: Observational non invasive

| | |
|------------------|-------------------------|
| Masking: | Open (masking not used) |
| Control: | Uncontrolled |
| Primary purpose: | Basic science |

Recruitment

| | |
|---------------------|----------------|
| NL | |
| Recruitment status: | Will not start |
| Enrollment: | 12 |
| Type: | Anticipated |

Ethics review

| | |
|--------------------|---|
| Approved WMO | |
| Date: | 10-07-2013 |
| Application type: | First submission |
| Review commission: | METC Slotervaartziekenhuis en Reade (Amsterdam) |

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 | NL44955.048.13 |