



Trial Description

Title

Chemical renal denervation for the treatment of resistant hypertension

Trial Acronym

CRASH

URL of the trial

[---]*

Brief Summary in Lay Language

Decrease of average systolic ambulatory blood pressure after CT-guided ethanol renal denervation compared to a control group with sham intervention. Both study groups receive a standardized antihypertensive medication 4 weeks prior to inclusion in the study. No change in the standardized anti-hypertensive medication is allowed during the study, medication optimization within the framework of standard treatment is allowed during the duration of the study. Planned study duration is 6 months.

Brief Summary in Scientific Language

Decrease of the mean systolic ABP after CT-guided ethanol RSD compared to a control group undergoing sham procedure 6 months after intervention. Both arms receive standardized antihypertensive medication for 4 weeks before randomization. No change of standard medication other than dose adjustment for 6 months.

Organizational Data

- DRKS-ID: **DRKS00008746**
- Date of Registration in DRKS: **2019/06/19**
- Date of Registration in Partner Registry or other Primary Registry: [---]*
- Investigator Sponsored/Initiated Trial (IST/IIT): **yes**
- Ethics Approval/Approval of the Ethics Committee: **Approved**
- (leading) Ethics Committee Nr.: **18-599 , Ethik-Kommission der Medizinischen Fakultät der Ludwig-Maximilians-Universität München**

Secondary IDs

- Other Secondary-ID: **LMU-RAD00009 (interne Studien-ID LMU Radiologie)**



Health condition or Problem studied

- ICD10: **I10.9 - [generalization I10: Essential (primary) hypertension]**

Interventions/Observational Groups

- **Arm 1: Therapy Arm:**
24-hour blood pressure measurements and automated office-blood-pressure (RR) measurements are taken before the intervention (baseline).
After patient approval, therapy is performed by image-guided instillation of a neurolytic near the renal arteries.

Follow-up with duplex sonography, MRI incl. MR angiography or detection of further complications are recorded in the high-pressure nephrology or Department of radiology
Immediately after the intervention and after 3, 6, 12, 18 and 24 months, the blood pressure is measured.

- **Arm 2: SHAM Arm:**
24-hour blood pressure measurements and automated office-blood-pressure (RR) measurements are taken before the intervention (baseline).
After patient consent, therapy is performed by Sham therapy near the renal arteries.

Follow-up with duplex sonography, MRI incl. MR angiography or detection of further complications are recorded in the high-pressure nephrology or Department of radiology
Immediately after the intervention and after 3, 6, 12, 18 and 24 months, the blood pressure is measured.

Characteristics

- Study Type: **Interventional**
- Study Type Non-Interventional: [---]*
- Allocation: **Randomized controlled trial**
- Blinding: [---]*
- Who is blinded: **patient/subject, investigator/therapist, caregiver, assessor, data analyst**
- Control: **Active control (effective treatment of control group)**
- Purpose: **Treatment**
- Assignment: **Parallel**
- Phase: **II**
- Off-label use (Zulassungsüberschreitende Anwendung eines Arzneimittels): **No**

Primary Outcome

The procedure leads to a permanent lowering of blood pressure compared to the

control group (state of the art antihypertensive medication plus sham treatment).

Secondary Outcome

- **Permanent reduction of antihypertensive medication in patients with refractory hypertension compared to sham control**
- **Compared to catheter-guided radiofrequency ablation, the procedure is simpler, faster, less expensive, and feasible for patients with a contraindication to RFA.**

Countries of recruitment

- **DE Germany**

Locations of Recruitment

- University Medical Center **Klinik und Poliklinik für Radiologie, München**

Recruitment

- Planned/Actual: **Planned**
- (Anticipated or Actual) Date of First Enrollment: **2019/06/28**
- Target Sample Size: **100**
- Monocenter/Multicenter trial: **Monocenter trial**
- National/International: **National**

Inclusion Criteria

- Gender: **Both, male and female**
- Minimum Age: **18 Years**
- Maximum Age: **75 Years**

Additional Inclusion Criteria

- **Patient with therapy-resistant type. Hypertonicity (syst. RR > 140 mmHg despite optimized therapy with ≥ 3 antihypertensive drugs of different classes - state of the art over 3 months),**
 - **Diagnosis of the therapy-resistant type. Hypertension by a specialist in nephrology / high-pressure ambulance takes place incl. Advice on all alternative therapy methods**
 - **GFR > 45 ml / min / 1.73 m²**
- Pat. With refractory hypertension at Z.n. ineffective catheter-directed RDN**

Exclusion criteria

- **patients with secondary hypertension (e.g., renoparenchymatous hypertension, NAST, primary hyperaldosteronism, pheochromocytoma, sleep apnea syndrome)**
- **Stenosing heart valve disease**
- **Z.n. Myocardial infarction, unstable angina pectoris, cerebrovascular event within the last 6 months prior to enrollment**

Addresses

■ Primary Sponsor

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Sources of Monetary or Material Support

■ **Institutional budget, no external funding (budget of sponsor/PI)**

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Status

■ Recruitment Status: **Recruiting planned**



DRKS-ID: **DRKS00008746**

Date of Registration in DRKS: **2019/06/19**

Date of Registration in Partner Registry or other Primary Registry: [---]*

Study Closing (LPLV): [---]*

Trial Publications, Results and other documents

* *This entry means the parameter is not applicable or has not been set.*

*** *This entry means that data is not displayed due to insufficient data privacy clearing.*