

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

10 Jun 2026

### KDIGO guidelines effects in Cardiac surgery patients, prone to Acute Kidney Injury

#### Protocol summary

##### Study aim

To find the KDIGO guidelines effects in Cardiac surgery patients, prone to Acute Kidney Injury.

##### Design

Randomised, superiority, parallel group trial with blinded outcome assessment. Randomisation was centralised and computerised with concealed randomisation sequence carried out at an external site

##### Settings and conduct

Study was conducted at Afridi medical complex, Peshawar. The outcome assessor was blinded in the study.

##### Participants/Inclusion and exclusion criteria

Inclusion: Age 50-80 years with both gender. Participants who maintain central venous pressure (CVP) between 8 and 10 mmHg and mean arterial pressure (MAP) >65 mmHg. Exclusion: Patients with end-stage renal disease on dialysis, recent kidney transplantation and contraindications for participation (e.g., pregnancy, severe comorbidities).

##### Intervention groups

Experimental group: Patients in the intervention group underwent a rigorously controlled administration of the KDIGO recommendations (the "KDIGO CT surgery bundle"), which included the consequent actions: avoiding nephrotoxic substances, stopping angiotensin II receptor blockers (ARBs) and angiotensin converting enzyme inhibitors (ACEi) for the first forty eight hours following operation. Control Group: The standard of treatment for persons in the control group included instructions to maintain central venous pressure (CVP) between 8 and 10 mmHg and mean arterial pressure (MAP) >65 mmHg. As soon as the hemodynamic status stabilized and hypertension appeared, patients were given angiotensin converting enzyme inhibitors (ACEi) or angiotensin II receptor blockers (ARBs).

##### Main outcome variables

The incidence of AKI within the first 72 hours following heart surgery served as the main variable.

#### General information

##### Reason for update

##### Acronym

##### IRCT registration information

IRCT registration number: **IRCT20230907059376N6**

Registration date: **2024-10-02, 1403/07/11**

Registration timing: **retrospective**

Last update: **2024-10-02, 1403/07/11**

Update count: **0**

##### Registration date

2024-10-02, 1403/07/11

##### Registrant information

##### Name

Sarmad Khattak

##### Name of organization / entity

Rehman Medical Institute, Peshawar

##### Country

Pakistan

##### Phone

+92 91 5838666

##### Email address

sarmadkhattak007@gmail.com

##### Recruitment status

**Recruitment complete**

##### Funding source

##### Expected recruitment start date

2022-02-27, 1400/12/08

##### Expected recruitment end date

2023-02-21, 1401/12/02

##### Actual recruitment start date

2022-02-24, 1400/12/05

##### Actual recruitment end date

2023-03-23, 1402/01/03

##### Trial completion date

2023-03-27, 1402/01/07

**Scientific title**

KDIGO guidelines effects in Cardiac surgery patients, prone to Acute Kidney Injury

**Public title**

KDIGO guidelines effects in Cardiac surgery patients, prone to Acute Kidney Injury. A Randomized Control Trial

**Purpose**

Treatment

**Inclusion/Exclusion criteria****Inclusion criteria:**

Maintain central venous pressure (CVP) between 8 and 10 mmHg Mean arterial pressure (MAP) >65 mmHg

**Exclusion criteria:**

Hyperglycemia Urinary [TIMP-2].[IGFBP7] ≥ 0.3

**Age**

From **50 years** old to **80 years** old

**Gender**

Both

**Phase**

N/A

**Groups that have been masked**

- Outcome assessor

**Sample size**

Target sample size: **86**

Actual sample size reached: **86**

**Randomization (investigator's opinion)**

Randomized

**Randomization description**

The randomization process for the study will utilize simple randomization through a computer-generated random number sequence, ensuring that each participant has an equal chance of being assigned to either the intervention group (KDIGO guidelines) or the control group (standard care). The unit of randomization will be the individual participant, allowing for direct comparisons of outcomes between the two groups. While stratified randomization is not planned, if it were implemented, it would involve defining strata based on key variables such as age or baseline renal function to ensure balanced representation. The randomization will be facilitated by secure computer software that generates the random sequence, which will be prepared before participant recruitment begins to eliminate any potential biases. To maintain allocation concealment, sealed opaque envelopes containing the group assignments will be used; these will only be opened after a participant has been enrolled and consented. This rigorous approach to randomization aims to enhance the integrity of the study, ultimately providing reliable results on the effects of KDIGO guidelines on Acute Kidney Injury in cardiac surgery patients.

**Blinding (investigator's opinion)**

Single blinded

**Blinding description**

In this study, assessors will be blinded to participants' group allocations to minimize bias in outcome evaluation. A separate third-party team will collect and analyze data, ensuring that assessors remain unaware of whether participants are in the intervention or control group. All outcome measurements will be coded,

preventing any influence on their evaluations. This double-blind approach aims to enhance the validity of the findings regarding the impact of KDIGO guidelines on Acute Kidney Injury in cardiac surgery patients.

**Placebo**

Not used

**Assignment**

Parallel

**Other design features****Secondary Ids**

empty

**Ethics committees****1****Ethics committee****Name of ethics committee**

Afridi Medical Complex ethical committee

**Street address**

Afridi medical complex tehkal payan, University Rd, Tehkal, Peshawar, Khyber Pakhtunkhwa

**City**

Peshawar

**Postal code**

25150

**Approval date**

2022-02-01, 1400/11/12

**Ethics committee reference number**

AMC/REC/2022/12

**Health conditions studied****1****Description of health condition studied**

Acute kidney disease

**ICD-10 code**

N17

**ICD-10 code description**

Acute kidney failure

**Primary outcomes****1****Description**

The incidence of Acute kidney injury within the first 72 hours following heart surgery served as the main objective.

**Timepoint**

The degree of acute kidney injury within seventy two hours, the thirty, sixty, and ninety days.

**Method of measurement**

KDIGO standards

**Secondary outcomes**

empty

## Intervention groups

### 1

#### Description

Intervention group: Patients in the intervention group underwent a rigorously controlled administration of the KDIGO recommendations (the "KDIGO CT surgery bundle"), which included the consequent actions: avoiding nephrotoxic substances, stopping angiotensin II receptor blockers (ARBs) and angiotensin converting enzyme inhibitors (ACEi) for the first forty eight hours following operation, closely recording urine output and serum creatinine, avoiding hyperglycemia for the first seventy two hours postoperatively, considering substitutes to radiocontrast substances, and closely observing hemodynamics.

#### Category

Treatment - Drugs

### 2

#### Description

Control group: The standard of treatment for persons in the control group included instructions to maintain central venous pressure (CVP) between 8 and 10 mmHg and mean arterial pressure (MAP) >65 mmHg. As soon as the hemodynamic status stabilized and hypertension appeared, patients were given angiotensin converting enzyme inhibitors (ACEi) or angiotensin II receptor blockers (ARBs).

#### Category

Treatment - Drugs

## Recruitment centers

### 1

#### Recruitment center

##### Name of recruitment center

Afridi Medical Complex, Peshawar

##### Full name of responsible person

Mehboob Khan

##### Street address

Afridi medical complex tehkal payan, University Rd, Tehkal, Peshawar, Khyber Pakhtunkhwa

##### City

Peshawar

##### Postal code

25150

##### Phone

+92 91 5711751

##### Email

mehbob509@gmail.com

## Sponsors / Funding sources

### 1

#### Sponsor

##### Name of organization / entity

Afridi Medical Complex, Peshawar

#### Full name of responsible person

Mahboob Khan

#### Street address

Afridi medical complex tehkal payan, University Rd, Tehkal, Peshawar, Khyber Pakhtunkhwa

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#### Grant name

#### Grant code / Reference number

#### Is the source of funding the same sponsor organization/entity?

Yes

#### Title of funding source

Afridi Medical Complex, Peshawar

#### Proportion provided by this source

50

#### Public or private sector

Private

#### Domestic or foreign origin

Domestic

#### Category of foreign source of funding

*empty*

#### Country of origin

#### Type of organization providing the funding

Persons

## Person responsible for general inquiries

#### Contact

##### Name of organization / entity

Afridi Medical Complex, Peshawar

##### Full name of responsible person

Mahboob Khan

##### Position

Consultant Neurosurgeon

##### Latest degree

Specialist

##### Other areas of specialty/work

Neurosurgery

##### Street address

Afridi medical complex tehkal payan, University Rd, Tehkal, Peshawar, Khyber Pakhtunkhwa

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## Person responsible for scientific

## **inquiries**

### **Contact**

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## **Person responsible for updating data**

### **Contact**

**Name of organization / entity**

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## **Sharing plan**

**Deidentified Individual Participant Data Set (IPD)**

Yes - There is a plan to make this available

**Study Protocol**

Yes - There is a plan to make this available

**Statistical Analysis Plan**

Yes - There is a plan to make this available

**Informed Consent Form**

Yes - There is a plan to make this available

**Clinical Study Report**

Yes - There is a plan to make this available

**Analytic Code**

Yes - There is a plan to make this available

**Data Dictionary**

Yes - There is a plan to make this available

**Title and more details about the data/document**

KDIGO guidelines effects in Cardiac surgery patients,  
prone to Acute Kidney Injury. A Randomized Control Trial

**When the data will become available and for how long**

Data will be available after 6 months of publication for 1 year.

**To whom data/document is available**

The data will be available to all the doctors.

**Under which criteria data/document could be used**

Data will be used just for education.

**From where data/document is obtainable**

Data will be obtained from corresponding author mentioned in journal after publication.

**What processes are involved for a request to access data/document**

Person should email the corresponding author and wait for response in one week.

**Comments**