

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

26 May 2026

### Comparison of Preconditioning Effect of High Dose and Low Dose Atorvastatin Treatment in Patients Underwent CABG

#### Protocol summary

##### Summary

**Objective:** Comparison of the Preconditioning Effect of High Dose and Low Dose of Atorvastatin in CABG. Study design: Triple-blind, randomized, clinical trial.

**Method:** 100 Patients who were undergoing on-pump coronary artery bypass graft (CABG) divided into two groups of A and B. 50 patients assigned in the intervention group and 50 patients in the control group.

**Inclusion criteria:** Patients who had been taking (atorvastatin 20 mg daily) at least one year prior to the cardiac surgery. **Exclusion criteria:** Unstable angina; evidences of recent MI (within 6 months) ; history of cardiac surgery; congenital heart disease; history of cardiac arrhythmias (arterial fibrillation) before surgery; receiving anti- arrhythmic drugs (except Beta blockers) ; having pacemaker; left ventricle ejection fraction less than 30%, uncontrolled hypertension; arterial or ventricular arrhythmia; pregnancy; patient who are undergoing diabetes treatment; increased level of liver enzymes; renal failure with creatinine more than 2 mg/dl; active inflammation or immune deficiency; positive history of muscle disease or reaction to the stations.

**Intervention:** Patients in the study group received 80 mg atorvastatin daily, for 3 days before surgery and low dose of 20 mg atorvastatin daily during the ICU stay, after surgery, and after discharge, the treatment continued at home with a single dose of 20 mg atorvastatin daily. On the other side, patients in the control group received 20 mg atorvastatin up to surgery and during the one month follow up period, they continued their medication with 20 mg atorvastatin daily. While, single dose of atorvastatin was given to the patients every night, an hour after the meal. The primary outcomes: troponin I, creatinine kinase-MB (CK-MB) and high-sensitivity C-reactive protein (hs-CRP) levels, the incidence of postoperative arrhythmia and ventricular fibrillation, mechanical ventilation duration in the ICU. Secondary outcomes: DC shock frequency, ICU length of stay, ejection fraction level, ICU blood intake, need for

inotrope at the pump off time or in the ICU, blood glucose, liver status glomerular filtration rate (GFR) and urine output.

#### General information

##### Acronym

##### IRCT registration information

IRCT registration number: **IRCT2017080619470N61**

Registration date: **2017-09-07, 1396/06/16**

Registration timing: **retrospective**

Last update:

Update count: **0**

##### Registration date

2017-09-07, 1396/06/16

##### Registrant information

##### Name

Farzaneh Masihi

##### Name of organization / entity

##### Country

Iran (Islamic Republic of)

##### Phone

+98 71 3647 4270

##### Email address

masihif@sums.ac.ir

##### Recruitment status

**Recruitment complete**

##### Funding source

Vice Chancellor for Research ,Shiraz University of Medical Sciences

##### Expected recruitment start date

2013-04-21, 1392/02/01

##### Expected recruitment end date

2016-02-20, 1394/12/01

##### Actual recruitment start date

empty

**Actual recruitment end date**

empty

**Trial completion date**

empty

**Scientific title**

Comparison of Preconditioning Effect of High Dose and Low Dose Atorvastatin Treatment in Patients Underwent CABG

**Public title**

Comparison of Preconditioning Effect of High Dose and Low Dose Atorvastatin Treatment in Patients Underwent CABG

**Purpose**

Prevention

**Inclusion/Exclusion criteria**

Inclusion criteria: patients who had been taking (atorvastatin 20 mg daily) at least one year prior to the cardiac surgery. Exclusion criteria: unstable angina; evidences of recent MI (within 6 months) ; history of cardiac surgery; congenital heart disease; history of cardiac arrhythmia (arterial fibrillation) before surgery; receiving anti- arrhythmic drugs (except Beta blockers) ; having pacemaker; left ventricle ejection fraction less than 30%, uncontrolled hypertension; arterial or ventricular arrhythmia; pregnancy; patient who are undergoing diabetes treatment; increased level of liver enzymes; renal failure with creatinine more than 2 mg/dl; active inflammation or immune deficiency; positive history of muscle disease or reaction to the stations.

**Age**

No age limit

**Gender**

Both

**Phase**

4

**Groups that have been masked**

*No information*

**Sample size**

Target sample size: **100**

**Randomization (investigator's opinion)**

Not randomized

**Randomization description****Blinding (investigator's opinion)**

Triple blinded

**Blinding description****Placebo**

Used

**Assignment**

Parallel

**Other design features**

Randomization with Random Number Table

**Secondary Ids**

empty

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

Ethics committee of Shiraz University of Medical Sciences

**Street address**

Vice Chancellor of research, Shiraz University of Medical Sciences, 7th floor, central building of Shiraz University of Medical Sciences, Zand street

**City**

Shiraz

**Postal code****Approval date**

2010-09-23, 1389/07/01

**Ethics committee reference number**

CT-P-91-3628

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

Coronary Artery Bypass Surgery

**ICD-10 code**

I25.1

**ICD-10 code description**

Atherosclerotic heart disease

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

the serum level of CPK-MB enzymes, troponin I

**Timepoint**

before induction of anesthesia and 24 ,48 hours after surgery

**Method of measurement**

Arterial blood sample

**2****Description**

high-sensitivity C-reactive protein (hs-CRP) levels,

**Timepoint**

before induction of anesthesia and 24 ,48 hours after surgery

**Method of measurement**

Arterial blood sample

**3****Description**

mechanical ventilation duration in the ICU

**Timepoint**

After arrival to the ICU

**Method of measurement**

Observation

## Secondary outcomes

1

### Description

glomerular filtration rate (GFR) and urine output

### Timepoint

After surgery in the intensive care unit.

### Method of measurement

observasion

2

### Description

blood glucose

### Timepoint

After surgery in the intensive care unit.

### Method of measurement

blood sample

## Intervention groups

1

### Description

Patients in the study group received 80 mg atorvastatin daily, for 3 days before surgery and low dose of 20 mg atorvastatin daily during the ICU stay, after surgery, and after discharge, the treatment continued at home with a single dose of 20 mg atorvastatin daily.

### Category

Treatment - Drugs

2

### Description

patients in the control group received 20 mg atorvastatin up to surgery and during the one month follow up period they continued their medication with 20 mg atorvastatin daily.

### Category

Treatment - Drugs

## Recruitment centers

1

### Recruitment center

#### Name of recruitment center

Namazi Hosptioal

#### Full name of responsible person

Misagh Bastani

#### Street address

Namazi Hoptioal, Namazi Square

#### City

Shiraz

## Sponsors / Funding sources

1

### Sponsor

#### Name of organization / entity

Vice Chancellor for Research, Shiraz University of Medical Sciences

#### Full name of responsible person

Dr Seed Basir Hashemi

#### Street address

Vice chancellor of research,7th floor of central building of Shiraz University of Medical Sciences, Zand street

#### City

Shiraz

### Grant name

### Grant code / Reference number

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

Yes

### Title of funding source

Vice Chancellor for Research, Shiraz University of Medical Sciences

### Proportion provided by this source

100

### Public or private sector

*empty*

### Domestic or foreign origin

*empty*

### Category of foreign source of funding

*empty*

### Country of origin

### Type of organization providing the funding

*empty*

## Person responsible for general inquiries

### Contact

#### Name of organization / entity

Shiraz University of Medical Sciences

#### Full name of responsible person

Misagh Bastani

#### Position

anesthesiology resident/physician

#### Other areas of specialty/work

#### Street address

Anesthesiology Department, Faghihi Hospital, Zand Street

#### City

Shiraz

#### Postal code

#### Phone

+98 71 3647 4270

#### Fax

#### Email

bastanim@sums.ac.ir

#### Web page address

## Person responsible for scientific inquiries

### Contact

#### Name of organization / entity

Shiraz University of Medical Sciences

**Full name of responsible person**

Mohammad Bagher Khosravi

**Position**

Cardio-anesthesiologist

**Other areas of specialty/work**

**Street address**

Anesthesiology Department, Faghihi Hospital, Zand Street

**City**

Shiraz

**Postal code**

**Phone**

+98 71 3647 4270

**Fax**

**Email**

khosravimb@sums.ac.ir

**Web page address**

**Person responsible for updating data**

**Contact**

**Name of organization / entity**

Shiraz University of Medical Sciences

**Full name of responsible person**

Farzaneh Masihi

**Position**

MS in english teaching ,BS in anesthesia/English Consultant

**Other areas of specialty/work**

**Street address**

5th floor, Mohammad Rasul Allah Research Tower, Khalili Street

**City**

Shiraz

**Postal code**

**Phone**

+98 71 3647 4270

**Fax**

**Email**

masihifarzaneh@yahoo.com

**Web page address**

**Sharing plan**

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

*empty*

**Study Protocol**

*empty*

**Statistical Analysis Plan**

*empty*

**Informed Consent Form**

*empty*

**Clinical Study Report**

*empty*

**Analytic Code**

*empty*

**Data Dictionary**

*empty*