

Clinical Trial Protocol

Iranian Registry of Clinical Trials

21 Jul 2026

Comparing intramuscular and intradermal injection of trivalent influenza vaccine, and topical imiquimod use before intradermal vaccination, on the post-vaccination immunogenicity, in patients on maintenance hemodialysis: A randomized clinical trial

Protocol summary

Summary

The goal of this multicenter study is to compare the immunogenicity of trivalent influenza vaccine, when it is administered via intradermal and intramuscular injections and also evaluating the effect of Imiquimod cream on response improvement, when it is used before intradermal injection. In this randomized controlled trial, 120 adult individuals above 18 years old, known to have end stage renal disease and need maintenance hemodialysis (i.e. at least 2 times a week for more than one month) without history of influenza or other viral diseases and live viral vaccination in recent 4 weeks entered the study. They had not received influenza vaccine in the last 6 months. The patients who had history of hypersensitivity reaction to egg and components of influenza vaccine were excluded. They were randomly assigned into three groups, by means of random table of digits, with equal 40 persons in each group. For the first group (INT-I), 250mg Imiquimod 5% cream was rubbed on deltoid region of right arm, and after 15 minutes, 0.25cc of trivalent influenza vaccine was injected intradermal. The ones in the second group (INT-A) received 0.25cc trivalent influenza vaccine via intradermal route after rubbing 250 mg aqueous cream in the same region with the same prior interval. For the third group (IM-A), 0.5 cc trivalent influenza vaccine was injected intramuscular after using 250 mg aqueous topical cream on the same area. The applied inactivated trivalent influenza vaccines in this study, complied with the WHO recommendations for northern hemisphere and European Union decision for the 2015/2016 season, and contained seasonal split-virus of these strains: - A/California/07/2009 (H1N1)pdm09-like strain, -Influenza A/Switzerland/9715293/2013 (H3N2)-like strain and - Influenza B/Phuket/3073/2013. They contained 15 µg hemagglutinin of each strain per 0.5 cc of the vaccine.

For comparing the increase in antibody titers, two blood samples obtained: the first immediately before and the second 14-21 days after vaccination. Serum antibody titers against two influenza strains: A (H1N1) and B, will be measured by hemagglutination-inhibition (HI) assay testing. The comparison between INT-A and IM-A groups (primary outcome measure) and also between INT-A and INT-I groups (secondary outcome measure) will be done.

General information

Acronym

IRCT registration information

IRCT registration number: **IRCT2015101724575N1**

Registration date: **2017-06-04, 1396/03/14**

Registration timing: **retrospective**

Last update:

Update count: **0**

Registration date

2017-06-04, 1396/03/14

Registrant information

Name

Zahra Doosti

Name of organization / entity

Infectious Diseases Research Center, Shahid Beheshti
University of Medical Sciences

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Iran (Islamic Republic of)

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Recruitment status

Recruitment complete

Funding source

Investigator

Expected recruitment start date
2016-02-04, 1394/11/15

Expected recruitment end date
2016-03-05, 1394/12/15

Actual recruitment start date
empty

Actual recruitment end date
empty

Trial completion date
empty

Scientific title
Comparing intramuscular and intradermal injection of trivalent influenza vaccine, and topical imiquimod use before intradermal vaccination, on the post-vaccination immunogenicity, in patients on maintenance hemodialysis: A randomized clinical trial

Public title
Comparing different methods of trivalent influenza vaccination on the post-vaccination immunogenicity in patients on maintenance hemodialysis

Purpose
Prevention

Inclusion/Exclusion criteria
Inclusion criteria: Individuals more than 18 years old who are known to have end stage renal disease and need routine dialysis (i.e. at least 2 times a week for more than one month). Exclusion criteria: History of influenza or other viral diseases and also live viral vaccination in recent 4 weeks; History of influenza vaccination in prior 6 months; Prior history of hypersensitivity to egg, components of influenza vaccine; Documented primary or secondary immunosuppression especially impaired cellular and humoral immunity.

Age
From **18 years** old to **100 years** old

Gender
Both

Phase
3

Groups that have been masked
No information

Sample size
Target sample size: **120**

Randomization (investigator's opinion)
Randomized

Randomization description

Blinding (investigator's opinion)
Not blinded

Blinding description

Placebo
Used

Assignment
Parallel

Other design features
Randomization was done by means of random table of digits; Patients were informed about the goals of study, to the extent that further assignment and randomization would not be interfered, and they were aware that

participation was completely facultative. The volunteers then asked to sign the written consent before initiation of study.

Secondary Ids

empty

Ethics committees

1

Ethics committee

Name of ethics committee

Ethics committee of Shahid Beheshti University of Medical Sciences

Street address

Shahid Beheshti University of Medical Sciences, Shahid A'arabi street, Yaman street, Chamran highway, Tehran, Iran

City

Tehran

Postal code

Approval date

2016-02-02, 1394/11/13

Ethics committee reference number

IR.SBMU.SM.REC.1394.173

Health conditions studied

1

Description of health condition studied

Need for immunization against influenza

ICD-10 code

Z25.1

ICD-10 code description

Need for immunization against influenza

Primary outcomes

1

Description

Comparing the immunogenicity against influenza vaccine via intradermal and intramuscular routes.

Timepoint

Obtaining blood samples for antibody titration, before and 14 to 21 days after vaccination

Method of measurement

Antibody titration within the sera obtained before and after vaccination, by hemagglutination inhibition assay test.

Secondary outcomes

1

Description

The effect of imiquimod pretreatment before intradermal influenza vaccination on immunogenicity of vaccine

Timepoint

Antibody titration within blood samples obtained before and 14 to 21 days after vaccination

Method of measurement

Antibody titration within the sera obtained before and after vaccination, by hemagglutination inhibition assay test.

Intervention groups**1****Description**

The first group (Intervention): 250mg Imiquimod 5% cream (Aldara) was rubbed on deltoid region of right arm, and after 15 minutes, 0.25cc of trivalent influenza vaccine was injected intradermal. The applied inactivated trivalent influenza vaccines in this study, complied with the WHO recommendations for northern hemisphere and European Union decision for the 2015/2016 season, and contained seasonal split-virus of these strains: -A/California/07/2009 (H1N1)pdm09-like strain, -Influenza A/Switzerland/9715293/2013 (H3N2)-like strain and -Influenza B/Phuket/3073/2013. They contained 15 µg hemagglutinin of each strain per 0.5 cc of the vaccine.

Category

Treatment - Drugs

2**Description**

The second group (Intervention/Control): received 0.25cc trivalent influenza vaccine via intradermal route after rubbing 250 mg aqueous cream in the same region with the same prior interval. The applied inactivated trivalent influenza vaccines in this study, complied with the WHO recommendations for northern hemisphere and European Union decision for the 2015/2016 season, and contained seasonal split-virus of these strains: -A/California/07/2009 (H1N1)pdm09-like strain, -Influenza A/Switzerland/9715293/2013 (H3N2)-like strain and -Influenza B/Phuket/3073/2013. They contained 15 µg hemagglutinin of each strain per 0.5 cc of the vaccine.

Category

Placebo

3**Description**

The third group (control): 0.5 cc trivalent influenza vaccine was injected intramuscular after using 250 mg aqueous topical cream on the same area. The applied inactivated trivalent influenza vaccines in this study, complied with the WHO recommendations for northern hemisphere and European Union decision for the 2015/2016 season, and contained seasonal split-virus of these strains: -A/California/07/2009 (H1N1)pdm09-like strain, -Influenza A/Switzerland/9715293/2013 (H3N2)-like strain and -Influenza B/Phuket/3073/2013. They contained 15 µg hemagglutinin of each strain per 0.5 cc of the vaccine.

Category

Prevention

Recruitment centers**1****Recruitment center****Name of recruitment center**

Dialysis ward of Shargh Medical Center

Full name of responsible person

Mrs.Danyali

Street address

Mesgar Abad, Jaddeh-ye-Mesgar Abad, Tehran, Iran

City

Tehran

2**Recruitment center****Name of recruitment center**

Dialysis ward of Loghman-Hakim Teaching Hospital

Full name of responsible person

Mrs.Shakeri

Street address

Kamali street, Karegar-e-jonoubi street, Tehran, Iran

City

Tehran

3**Recruitment center****Name of recruitment center**

Dialysis ward of Imam-Hossein Teaching Hospital

Full name of responsible person

Mrs.Komijani

Street address

Shahid Madani street, Tehran, Iran

City

Tehran

Sponsors / Funding sources**1****Sponsor****Name of organization / entity**

Vice chancellor for research, Shahid Beheshti University of Medical Sciences

Full name of responsible person

Ms.Saraabi

Street address

Vice chancellor for research, Shahid Beheshti University of Medical Sciences, Shahid A'arabi street, Yaman street, Chamran highway, Tehran, Iran

City

Tehran

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, Shahid Beheshti 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

Infectious Diseases and Tropical Medicine Research Center, Faculty of Medicine, Shahid Beheshti University of Medical Sciences, Shahid A'arabi street, Yaman street, Chamran highway, Tehran, Iran

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Full name of responsible person

Zahra Doosti

Position

Infectious Diseases Resident

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Full name of responsible person

Zahra Doosti

Position

Infectious Diseases Resident

Other areas of specialty/work**Street 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