

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

11 Jun 2026

### Comparison of rivaroxaban and enoxaparin in the prevention of recurrent venous thromboembolism in patients with nonhematologic cancer

#### Protocol summary

##### Study aim

Comparison of rivaroxaban and enoxaparin in the prevention of recurrent venous thromboembolism in patients with nonhematologic cancer.

##### Design

The present study is a clinical trial of phase 3, randomized, double-blind, and parallel, which will be carried out on 50 patients with non-hematologic cancer with venous thromboembolism. Patients are randomly divided into two groups receiving enoxaparin or rivaroxaban.

##### Settings and conduct

The present study is a double-blind clinical trial with the aim of Determining and comparing the frequency of recurrent thromboembolism (pulmonary thromboembolism and deep vein thrombosis) in patients with nonhematologic cancer with venous thromboembolism in two groups based on patient characteristics (before and after treatment) at Imam Khomeini Hospital, Ahvaz. Physician, researcher, patient, and data analyst is not aware of the type of treatment.

##### Participants/Inclusion and exclusion criteria

Including criteria: Existence of active cancer with Venous thromboembolism; The age range is between 18-75 years; Tendency to participate in the study; Exclusion criteria: Smoking, alcohol, and drug abuse; Lack of sufficient and appropriate evidence for the occurrence of early Venous thromboembolism; Diagnosis of thrombophilic conditions; Prescribe any anticoagulant drug excepting Enoxaparin or Rivaroxaban (for example Heparin, Warfarin, Dabigatran, Apixaban, and Edoxaban)

##### Intervention groups

Treatment with Rivaroxaban: 15 mg every 12 hours for the first three weeks and then 20 mg daily. Treatment with Rivaroxaban: Dose 1 mg per kg body weight, by subcutaneous injection every 12 hours

##### Main outcome variables

frequency of recurrent thromboembolism (pulmonary thromboembolism and deep vein thrombosis)

#### General information

##### Reason for update

##### Acronym

##### IRCT registration information

IRCT registration number: **IRCT20201123049469N1**

Registration date: **2020-12-22, 1399/10/02**

Registration timing: **registered\_while\_recruiting**

Last update: **2020-12-22, 1399/10/02**

Update count: **0**

##### Registration date

2020-12-22, 1399/10/02

##### Registrant information

##### Name

Afroz Kargaran

##### Name of organization / entity

##### Country

Iran (Islamic Republic of)

##### Phone

+98 61 3321 4578

##### Email address

karegaran.a@ajums.ac.ir

##### Recruitment status

**Recruitment complete**

##### Funding source

##### Expected recruitment start date

2020-12-21, 1399/10/01

##### Expected recruitment end date

2021-09-21, 1400/06/30

##### Actual recruitment start date

empty

##### Actual recruitment end date

empty

##### Trial completion date

empty

##### Scientific title

Comparison of rivaroxaban and enoxaparin in the prevention of recurrent venous thromboembolism in patients with nonhematologic cancer

#### Public title

Comparison of rivaroxaban and enoxaparin in the prevention of recurrent venous thromboembolism

#### Purpose

Treatment

#### Inclusion/Exclusion criteria

##### Inclusion criteria:

Existence of active cancer with Venous thromboembolism The age range is between 18-75 years  
Tendency to participate in the study

##### Exclusion criteria:

Smoking, alcohol and drug abuse Lack of sufficient and appropriate evidence for the occurrence of early Venous thromboembolism Diagnosis of thrombophilic conditions  
Prescribe any anticoagulant drug excepting Enoxaparin or Rivaroxaban (for example Heparin, Warfarin, Dabigatran, Apixaban, and Edoxaban)

#### Age

From **18 years** old to **75 years** old

#### Gender

Both

#### Phase

3

#### Groups that have been masked

- Participant
- Care provider
- Investigator
- Outcome assessor

#### Sample size

Target sample size: **50**

#### Randomization (investigator's opinion)

Randomized

#### Randomization description

Randomization method: Permuted block randomization;  
Randomization unit: Person; Stratified randomization:  
Not done; Randomization instrument: Random allocation software (Excel); Random sequence generation: Used random blocks, each block containing 4 people and allocated a number from 1 to 6 to each block; Allocation concealment: The randomization process is performed by the study methodology consultant and, clinical researchers are not aware of the randomization process.

#### Blinding (investigator's opinion)

Double blinded

#### Blinding description

The type of blindness in our study will be double-blind. Prior to the onset of the study, the box containing the relevant tablets are coded A and B by someone except the researcher, in order to blind the researcher about which drug each group received. When delivering drugs to patients, someone except the researcher should locate the patient in either A or B group by random number table. In this study, the patient, physician, and researcher (who collecting data and assessing the outcome) should be kept blind.

#### Placebo

Not used

#### Assignment

Parallel

#### Other design features

#### Secondary Ids

empty

#### Ethics committees

##### 1

#### Ethics committee

##### Name of ethics committee

Ethics committee of Ahvaz University of Medical Sciences

##### Street address

Vice Chancellor for Research and Technology, Ahvaz Jundishapur University of Medical Sciences, Golestan Blvd, Ahvaz

##### City

Ahvaz

##### Province

Khuzestan

##### Postal code

6135715794

#### Approval date

2019-12-28, 1398/10/07

#### Ethics committee reference number

IR.AJUMS.REC.1398.699

#### Health conditions studied

##### 1

#### Description of health condition studied

Nonhematologic Cancers

#### ICD-10 code

I74.9

#### ICD-10 code description

Embolism and thrombosis of unspecified artery

#### Primary outcomes

##### 1

#### Description

Recurrence of VTE (Venous thromboembolism) is deep vein thromboembolism (DVT) or pulmonary embolism (PE) according to the report of CT scan of the pulmonary arteries and color Doppler ultrasound of the lower extremity to be reported by the radiologist.

#### Timepoint

At the beginning of the study (before the intervention) and 6 months later

#### Method of measurement

according to the report of CT scan of the pulmonary arteries and color Doppler ultrasound of the lower extremity to be reported by the radiologist.

## Secondary outcomes

empty

## Intervention groups

### 1

#### Description

Intervention group: Oral rivaroxaban treatment group, 15 mg every 12 hours for the first three weeks and then 20 mg daily / Axabin; Abidi Company, Tehran

#### Category

Treatment - Drugs

### 2

#### Description

Intervention group: The dose of enoxaparin (Lovenox; Osweh Pharmacy, Tehran) was 1 mg per kg body weight, but because 60 or 80 mg ampoules were used, depending on the patient's weight, 60 or 80 mg of the drug every 12 hours as the following injection It was prescribed cutaneously.

#### Category

Treatment - Drugs

## Recruitment centers

### 1

#### Recruitment center

##### Name of recruitment center

Imam Khomeini Hospital

##### Full name of responsible person

Afroz Kargaran Dehkordi

##### Street address

Imam Khomeini Hospital, Azadegan Ave, Ahvaz

##### City

Ahvaz

##### Province

Khouzestan

##### Postal code

6135815751

##### Phone

+98 61 3321 4578

##### Email

karegaran.a@ajums.ac.ir

## Sponsors / Funding sources

### 1

#### Sponsor

##### Name of organization / entity

Ahvaz University of Medical Sciences

##### Full name of responsible person

Mohammad Badavi

##### Street address

Vice Chancellor for Research and Technology, Ahvaz Jundishapur University of Medical Sciences, Golestan Blvd, Ahvaz

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badavi-m@ajums.ac.ir

#### Grant name

#### Grant code / Reference number

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

Yes

#### Title of funding source

Ahvaz University of Medical Sciences

#### Proportion provided by this source

100

#### Public or private sector

Public

#### Domestic or foreign origin

Domestic

#### Category of foreign source of funding

empty

#### Country of origin

#### Type of organization providing the funding

Academic

## Person responsible for general inquiries

#### Contact

##### Name of organization / entity

Ahvaz University of Medical Sciences

##### Full name of responsible person

Afroz Kargaran Dehkordi

##### Position

Resident of Internal Medicine

##### Latest degree

Specialist

##### Other areas of specialty/work

Internal Medicine

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## Person responsible for scientific inquiries

#### Contact

##### Name of organization / entity

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## Person responsible for updating data

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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

Undecided - It is not yet known if there will be 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

If the decision is to publicate the data, after the unidentified individuals all data will be publicated.

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

The access period will be 8 months after the publication of the results.

### To whom data/document is available

Researchers working in academic and industrial institutions can apply to get data.

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

To cite. Referring to reference or researcher's permission

### From where data/document is obtainable

Afrooz Kargaran Dehkordi, Resident of Internal Medicine, Imam Khomeini Hospital, Azadegan Ave, Ahvaz./ +98 61 3321 4578/ karegaran.a@ajums.ac.ir

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

Access to articles related to this research Send email to the responsible author

### Comments