

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

12 Jun 2026

### **Efficacy and safety of the Defibrillator / Monitor model Re-pulse6 AVECINNA Co. among patients with atrial fibrillation and flutter who are candidates of elective cardioversion: a stratified non-inferiority randomized controlled trial at Tehran Heart Center**

#### **Protocol summary**

##### **Study aim**

Efficacy and safety of the Defibrillator / Monitor model Re-pulse 6 AVECINNA Co. among patients with atrial fibrillation and flutter who are candidates of elective cardioversion

##### **Design**

The study will be a non-inferiority randomized clinical trial with a parallel, single center, stratified, and without blinding design. 70 patients will be in the intervention group and 35 in the control group.

##### **Settings and conduct**

There will be no blinding. Study will be performed in Tehran heart center.

##### **Participants/Inclusion and exclusion criteria**

Inclusion criteria: age >18 years old; atrial fibrillation or flutter; indication for cardioversion; atrial fibrillation or flutter will be confirmed by an electrophysiologist using 12 lead standard ECG. Cardioversion will be conducted at the discretion of the electrophysiologist. All patients are required to receive at least 4 weeks of anticoagulation or left atrial thrombus is ruled out by trans esophageal echocardiography. Exclusion criteria: requiring emergency cardioversion; hemodynamic instability; chest pain or suspicion of acute coronary syndrome; hypokalemia; digoxin toxicity; pregnancy or breastfeeding; no informed consent

##### **Intervention groups**

Repulse 6 (experimental) and standard LIFE PACK20

##### **Main outcome variables**

Success in producing sinus rhythm

#### **General information**

##### **Reason for update**

##### **Acronym**

##### **IRCT registration information**

IRCT registration number: **IRCT20230809059099N2**

Registration date: **2024-03-01, 1402/12/11**

Registration timing: **prospective**

Last update: **2024-03-01, 1402/12/11**

Update count: **0**

##### **Registration date**

2024-03-01, 1402/12/11

##### **Registrant information**

###### **Name**

Farzad Masoudkabar

###### **Name of organization / entity**

###### **Country**

Iran (Islamic Republic of)

###### **Phone**

+98 21 8802 9600

###### **Email address**

farzad.masoudkabar@gmail.com

##### **Recruitment status**

**Recruitment complete**

##### **Funding source**

##### **Expected recruitment start date**

2024-03-05, 1402/12/15

##### **Expected recruitment end date**

2025-12-21, 1404/09/30

##### **Actual recruitment start date**

empty

##### **Actual recruitment end date**

empty

##### **Trial completion date**

empty

##### **Scientific title**

Efficacy and safety of the Defibrillator / Monitor model Re-pulse6 AVECINNA Co. among patients with atrial

fibrillation and flutter who are candidates of elective cardioversion: a stratified non-inferiority randomized controlled trial at Tehran Heart Center

#### Public title

Efficacy and safety of Iranian AVECINNA Co. defibrillator

#### Purpose

Treatment

#### Inclusion/Exclusion criteria

##### Inclusion criteria:

Age >18 years old Atrial fibrillation or flutter indication for cardioversion Atrial fibrillation or flutter will be confirmed by an electrophysiologist using 12 lead standard ECG. Cardioversion will be conducted at the discretion of the electrophysiologist. All patients are required to receive at least 4 weeks of anticoagulation or left atrial thrombus is ruled out by trans esophageal echocardiography

##### Exclusion criteria:

Requiring emergency cardioversion Hemodynamic instability Chest pain or suspicion of acute coronary syndrome Hypokalemia Digoxin toxicity Pregnancy or breastfeeding No informed consent

#### Age

From **18 years** old to **90 years** old

#### Gender

Both

#### Phase

N/A

#### Groups that have been masked

No information

#### Sample size

Target sample size: **105**

#### Randomization (investigator's opinion)

Randomized

#### Randomization description

Patients will be randomized using stratified method to resuscitate and standard defibrillator (Life Pack 20) groups. randomization code will be assigned after the patient is officially enrolled in the study and there will be no blinding.

#### Blinding (investigator's opinion)

Not blinded

#### Blinding description

#### Placebo

Not used

#### Assignment

Parallel

#### Other design features

## Secondary IDs

empty

## Ethics committees

### 1

#### Ethics committee

##### Name of ethics committee

Tehran University of Medical Sciences, Ethics Committee

#### Street address

Department of Cardiovascular Research, Tehran Heart Center, North Kargar Ave, Tehran,

#### City

tehran

#### Province

Tehran

#### Postal code

1411713138

#### Approval date

2023-08-06, 1402/05/15

#### Ethics committee reference number

IR.TUMS.THC.REC.1402.043

## Health conditions studied

### 1

#### Description of health condition studied

Atrial fibrillation, atrial flutter

#### ICD-10 code

I48

#### ICD-10 code description

Atrial fibrillation and flutter

## Primary outcomes

### 1

#### Description

Rate of sinus rhythm conversion

#### Timepoint

After cardioversion

#### Method of measurement

ECG

## Secondary outcomes

### 1

#### Description

Number of times shock is required in experimental and standard device

#### Timepoint

After start of the cardioversion process

#### Method of measurement

Number

### 2

#### Description

Safety: any inflammation, burn, pain, or electrocution in experimental device compared to standard device. comparison of ventricular arrhythmias, bradycardia, or asystole. comparison of any other adverse effects

#### Timepoint

Immediately after shock

#### Method of measurement

Observation by the cardiologist

## Intervention groups

### 1

#### Description

Intervention group: AVECINNA defibrillator. In both groups patients will be sedated. antiarrhythmic drug use will be recorded in CRF forms. antiarrhythmic drugs will not be used as pretreatment in cardioversion. Continuous ECG monitoring will be performed for all patients. In all patients biphasic waves and anteriorleft lateral sticking patches will be used. electrodes will be placed in the anterior in the middle of the sternum and in the posterior in the medial and inferior to the left scapula. in atrial fibrillation patients three biphasic shock waves will be used until the sinus rhythm is achieved. the order of the shocks will be as follows: 100, 200, and 300 joules. In atrial flutter patients three biphasic shock waves will be used until the sinus rhythm is achieved. the order of the shocks will be as follows: 50, 100, and 200 joules. If sinus rhythm is not achieved after three shockwaves treatment failure will be announced. Patients with treatment failure will be removed from the study and their treatment will be based on the cardiologist's discretion. all adverse events and outcomes will be recorded before and after cardioversion.

#### Category

Treatment - Devices

### 2

#### Description

Control group: standard defibrillator (LIFE PACK 20). In both groups patients will be sedated. antiarrhythmic drug use will be recorded in CRF forms. antiarrhythmic drugs will not be used as pretreatment in cardioversion. Continuous ECG monitoring will be performed for all patients. In all patients biphasic waves and anteriorleft lateral sticking patches will be used. electrodes will be placed in the anterior in the middle of the sternum and in the posterior in the medial and inferior to the left scapula. in atrial fibrillation patients three biphasic shock waves will be used until the sinus rhythm is achieved. the order of the shocks will be as follows: 100, 200, and 300 joules. In atrial flutter patients three biphasic shock waves will be used until the sinus rhythm is achieved. the order of the shocks will be as follows: 50, 100, and 200 joules. If sinus rhythm is not achieved after three shockwaves treatment failure will be announced. Patients with treatment failure will be removed from the study and their treatment will be based on the cardiologist's discretion. all adverse events and outcomes will be recorded before and after cardioversion.

#### Category

Treatment - Devices

## Recruitment centers

### 1

#### Recruitment center

#### Name of recruitment center

Tehran Heart center

#### Full name of responsible person

Farzad Masoud Kabir

#### Street address

Department of Cardiovascular Research, Tehran Heart Center, North Kargar Ave, Tehran, Iran

#### City

tehran

#### Province

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#### Postal code

1411713138,

#### Phone

+98 912 236 9133

#### Email

farzad.masoudkabir@gmail.com

## Sponsors / Funding sources

### 1

#### Sponsor

##### Name of organization / entity

Avecinna co

##### Full name of responsible person

Matin Motamedi

##### Street address

Unit 1, No.3, 58th St, Asad Abadi St, (Yousef Abad St)

##### City

Tehran

##### Province

Tehran

##### Postal code

1436864843

##### Phone

+98 21 8805 4231

##### Email

export1@avecinna.com

#### Grant name

#### Grant code / Reference number

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

Yes

#### Title of funding source

Avecinna co

#### Proportion provided by this source

100

#### 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

Industry

## Person responsible for general inquiries

#### Contact

##### Name of organization / entity

Tehran University of Medical Sciences  
**Full name of responsible person**  
Farzad Masoud Kabir  
**Position**  
associate professor  
**Latest degree**  
Subspecialist  
**Other areas of specialty/work**  
Cardiology  
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Department of Cardiovascular Research, Tehran  
Heart Center, North Kargar Ave, Tehran, 1411713138  
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## Person responsible for scientific inquiries

### Contact

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Tehran University of Medical Sciences  
**Full name of responsible person**  
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## Person responsible for updating data

### Contact

**Name of organization / entity**  
Tehran University of Medical Sciences

**Full name of responsible person**  
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## Sharing plan

### Deidentified Individual Participant Data Set (IPD)

Yes - There is a plan to make this available

### Study Protocol

No - There is not a plan to make this available

### Statistical Analysis Plan

No - There is not a plan to make this available

### Informed Consent Form

No - There is not a plan to make this available

### Clinical Study Report

Undecided - It is not yet known if there will be a plan to make this available

### Analytic Code

No - There is not a plan to make this available

### Data Dictionary

No - There is not a plan to make this available

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

only a part of the data such as the primary outcomes will be shared

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

after completion of the study

### To whom data/document is available

for scientific community

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

documents will be shared upon reasonable request

### From where data/document is obtainable

from cardiovascular diseases research institute

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

please email farzad.masoudkabir.  
farzad.masoudkabir@gmail.com

### Comments