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## Coronary MDCTA With Iopamidol Injection 370

**This study has been completed.**

**Sponsor:**

Bracco Diagnostics, Inc

**Information provided by (Responsible Party):**

Bracco Diagnostics, Inc

**ClinicalTrials.gov Identifier:**

NCT00558792

First received: November 13, 2007

Last updated: October 18, 2012

Last verified: October 2012

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Results First Received: August 13, 2012

<b>Study Type:</b>	Interventional
<b>Study Design:</b>	Allocation: Randomized; Endpoint Classification: Efficacy Study; Intervention Model: Parallel Assignment; Masking: Double Blind (Subject, Investigator, Outcomes Assessor); Primary Purpose: Diagnostic
<b>Condition:</b>	Coronary Artery Disease
<b>Interventions:</b>	Drug: Isovue 370, 70 mL Drug: Isovue 370, 80 mL Drug: Isovue 370, 90 mL

### Participant Flow

 [Hide Participant Flow](#)

#### Recruitment Details

**Key information relevant to the recruitment process for the overall study, such as dates of the recruitment period and locations**

Patients were enrolled from December 2007 to December 2009 in 17 investigational sites across the United States of America (USA), 2 investigational sites in Canada and 2 investigational sites in Italy. A blinded read of the images obtained during the study was performed in May 2010.

#### Pre-Assignment Details

**Significant events and approaches for the overall study following participant enrollment, but prior to group assignment**

This was a Phase II, multicenter, prospective, double-blind, randomized, parallel-group comparison of 3 doses of iopamidol injection 370 when used for coronary MDCTA.

## Reporting Groups

	Description
Isovue 370, 70 mL	iopamidol injection 370, 70 mL
Isovue 370, 80 mL	iopamidol injection 370, 80 mL
Isovue 370, 90 mL	iopamidol injection 370, 90 mL

## Participant Flow: Overall Study

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
STARTED	68	63	60
COMPLETED	68	63	60
NOT COMPLETED	0	0	0

 Baseline Characteristics

 Hide Baseline Characteristics

## Population Description

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

No text entered.

## Reporting Groups

	Description
Isovue 370, 70 mL	iopamidol injection 370, 70 mL
Isovue 370, 80 mL	iopamidol injection 370, 80 mL
Isovue 370, 90 mL	iopamidol injection 370, 90 mL
Total	Total of all reporting groups

## Baseline Measures

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL	Total
Number of Participants [units: participants]	68	63	60	191
Age [units: participants]				
<=18 years	0	0	0	0
Between 18 and 65 years	53	49	42	144
>=65 years	15	14	18	47
Age [units: years] Mean (Standard Deviation)	57.7 (8.85)	57.7 (8.54)	58.7 (9.25)	58.0 (8.85)
Gender [units: participants]				
Female	25	27	21	73
Male	43	36	39	118

Region of Enrollment [units: participants]				
United States	55	50	48	153
Canada	11	10	10	31
Italy	2	3	2	7

## ▶ Outcome Measures

▢ Hide All Outcome Measures

1. Primary: Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 1 [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 1
<b>Measure Description</b>	For all technically adequate coronary artery segments, each reader was to assess whether each segment was visualized to a quality that was adequate for accurate diagnosis of the presence and severity of stenosis. An adequate quality for the accurate diagnosis of the presence and severity of coronary artery stenosis was comprised of 2 basic features: 1) no more than mild blurring of the spatial distinction between the vessel wall and lumen, and 2) a readily visible distinction in image contrast between calcified plaque, enhanced vessel lumen, and uncalcified vessel wall or plaque.
<b>Time Frame</b>	Immediately post dose
<b>Safety Issue</b>	No

### Population Description

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

No text entered.

### Reporting Groups

	Description
<b>Isovue 370, 70 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

### Measured Values

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
<b>Number of Participants Analyzed</b> [units: participants]	68	62	60
<b>Number of Segments Present &amp; Technically Adequate Analyzed</b> [units: Segments Present & Technically Adequate]	963	865	848
<b>Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 1</b> [units: Segments Visualized Accurately]	949	842	841

**Statistical Analysis 1 for Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 1**

<b>Groups</b> [1]	All groups
<b>Method</b> [2]	Chi-squared
<b>P Value</b> [3]	0.0099

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:
	No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:
	No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:
	No text entered.

## 2. Primary: Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 2 [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 2
<b>Measure Description</b>	For all technically adequate coronary artery segments, each reader was to assess whether each segment was visualized to a quality that was adequate for accurate diagnosis of the presence and severity of stenosis. An adequate quality for the accurate diagnosis of the presence and severity of coronary artery stenosis was comprised of 2 basic features: 1) no more than mild blurring of the spatial distinction between the vessel wall and lumen, and 2) a readily visible distinction in image contrast between calcified plaque, enhanced vessel lumen, and uncalcified vessel wall or plaque.
<b>Time Frame</b>	Immediately post dose
<b>Safety Issue</b>	No

**Population Description**

<b>Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.</b>
No text entered.

**Reporting Groups**

	Description
<b>Isovue 370, 70 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

**Measured Values**

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL

<b>Number of Participants Analyzed</b> [units: participants]	<b>68</b>	<b>62</b>	<b>60</b>
<b>Number of Segments Analyzed</b> [units: Segments]	<b>1042</b>	<b>950</b>	<b>927</b>
<b>Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 2</b> [units: Segments Visualized Accurately]	<b>1032</b>	<b>924</b>	<b>927</b>

#### Statistical Analysis 1 for Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 2

<b>Groups</b> [1]	All groups
<b>Method</b> [2]	Chi-squared
<b>P Value</b> [3]	<0.0001

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:
	No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:
	No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:
	No text entered.

#### 3. Primary: Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 3 [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 3
<b>Measure Description</b>	For all technically adequate coronary artery segments, each reader was to assess whether each segment was visualized to a quality that was adequate for accurate diagnosis of the presence and severity of stenosis. An adequate quality for the accurate diagnosis of the presence and severity of coronary artery stenosis was comprised of 2 basic features: 1) no more than mild blurring of the spatial distinction between the vessel wall and lumen, and 2) a readily visible distinction in image contrast between calcified plaque, enhanced vessel lumen, and uncalcified vessel wall or plaque.
<b>Time Frame</b>	Immediately post dose
<b>Safety Issue</b>	No

#### Population Description

<b>Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.</b>
No text entered.

#### Reporting Groups

	<b>Description</b>
<b>Isovue 370, 70 mL</b>	

	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

**Measured Values**

	<b>Isovue 370, 70 mL</b>	<b>Isovue 370, 80 mL</b>	<b>Isovue 370, 90 mL</b>
<b>Number of Participants Analyzed</b> [units: participants]	<b>68</b>	<b>62</b>	<b>60</b>
<b>Number of Segments Present &amp; Technically Adequate Analyzed</b> [units: Segments Present & Technically Adequate]	<b>925</b>	<b>826</b>	<b>817</b>
<b>Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 3</b> [units: Segments Visualized Accurately]	<b>925</b>	<b>824</b>	<b>817</b>

**Statistical Analysis 1 for Diagnostic Quality of Visualization of Coronary Arteries, Off-Site Reader 3**

<b>Groups</b> [1]	All groups
<b>Method</b> [2]	Chi-squared
<b>P Value</b> [3]	0.1212

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:  No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:  No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:  No text entered.

## 4. Primary: Contrast Density (CD) Measurements, Off-Site Reader 1 [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Contrast Density (CD) Measurements, Off-Site Reader 1
<b>Measure Description</b>	For this assessment, each off-site reader was to place regions of interest (ROIs) into the lumens of the mid-portion of the left main coronary artery (LM) (segment number 5), and into the mid-portion of segment number 1 of the right coronary artery (RCA). The mean Hounsfield Units levels and standard deviations (SD) for those 2 ROIs were to be recorded by the reader.
<b>Time Frame</b>	Immediately post dose
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

No text entered.

#### Reporting Groups

	Description
<b>Isovue 370, 70 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

#### Measured Values

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
<b>Number of Participants Analyzed</b> [units: participants]	67	58	59
<b>Contrast Density (CD) Measurements, Off-Site Reader 1</b> [units: Hounsfield Units] Mean (Standard Deviation)	372.806 (90.5842)	398.255 (82.3593)	418.197 (97.4072)

#### Statistical Analysis 1 for Contrast Density (CD) Measurements, Off-Site Reader 1

<b>Groups</b> [1]	All groups
<b>Method</b> [2]	ANOVA
<b>P Value</b> [3]	0.0200

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:  No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:  No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:  No text entered.

#### 5. Primary: Contrast Density (CD) Measurements, Off-Site Reader 2 [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Contrast Density (CD) Measurements, Off-Site Reader 2
<b>Measure Description</b>	For this assessment, each off-site reader was to place regions of interest (ROIs) into the lumens of the mid-portion of the left main coronary artery (LM) (segment number 5), and into the mid-portion of segment number 1 of the right coronary artery (RCA). The mean Hounsfield Units levels and standard deviations (SD) for those 2 ROIs were to be recorded by the reader.
<b>Time Frame</b>	Immediately post dose

<b>Safety Issue</b>	No
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**Population Description**

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

No text entered.

**Reporting Groups**

	Description
<b>Isovue 370, 70 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

**Measured Values**

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
<b>Number of Participants Analyzed</b> [units: participants]	67	58	58
<b>Contrast Density (CD) Measurements, Off-Site Reader 2</b> [units: Hounsfield Units] Mean (Standard Deviation)	364.784 (78.2154)	396.291 (85.7038)	413.665 (86.0972)

**Statistical Analysis 1 for Contrast Density (CD) Measurements, Off-Site Reader 2**

<b>Groups</b> [1]	All groups
<b>Method</b> [2]	ANOVA
<b>P Value</b> [3]	0.0044

[1] Additional details about the analysis, such as null hypothesis and power calculation:

No text entered.

[2] Other relevant method information, such as adjustments or degrees of freedom:

No text entered.

[3] Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:

No text entered.

6. Primary: Contrast Density (CD) Measurements, Off-Site Reader 3 [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Contrast Density (CD) Measurements, Off-Site Reader 3
<b>Measure Description</b>	For this assessment, each off-site reader was to place regions of interest (ROIs) into the lumens of the mid-portion of

	the left main coronary artery (LM) (segment number 5), and into the mid-portion of segment number 1 of the right coronary artery (RCA). The mean Hounsfield Units levels and standard deviations (SD) for those 2 ROIs were to be recorded by the reader.
<b>Time Frame</b>	Immediately post dose
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

No text entered.

**Reporting Groups**

	Description
<b>Isovue 370, 70 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

**Measured Values**

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
<b>Number of Participants Analyzed</b> [units: participants]	64	58	57
<b>Contrast Density (CD) Measurements, Off-Site Reader 3</b> [units: Hounsfield Units] Mean (Standard Deviation)	363.071 (85.7795)	383.841 (96.8142)	406.206 (91.9117)

**Statistical Analysis 1 for Contrast Density (CD) Measurements, Off-Site Reader 3**

<b>Groups</b> [1]	All groups
<b>Method</b> [2]	ANOVA
<b>P Value</b> [3]	0.0371

[1] Additional details about the analysis, such as null hypothesis and power calculation:

No text entered.

[2] Other relevant method information, such as adjustments or degrees of freedom:

No text entered.

[3] Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:

No text entered.

7. Primary: Validity (Sensitivity and Specificity), Off-Site Reader 1 - Sensitivity [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Validity (Sensitivity and Specificity), Off-Site Reader 1 - Sensitivity
<b>Measure Description</b>	For each technically adequate coronary artery, the readers assessed or excluded the presence of coronary artery stenoses. If more than one stenosis was present in a single vessel, the readers recorded the most significant stenosis. Based on a match or mismatch between computed tomographic angiography (CTA) and coronary angiography as assessed by the adjudicator, each vessel diagnosis by CTA was defined as true negative (TN), false positive (FP), false negative (FN), or true positive (TP) based on coronary angiography findings. Technical inadequacy by multi-detector CTA was counted as FN or FP depending on the diagnostic results from conventional angiography. The percentage (%) of sensitivity [TP/(TP+FN)] is presented.
<b>Time Frame</b>	Immediately post dose
<b>Safety Issue</b>	No

#### Population Description

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

Number of participants with significant disease (>50% stenosis)

#### Reporting Groups

	Description
<b>Isovue 370, 70 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

#### Measured Values

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
<b>Number of Participants Analyzed</b> [units: participants]	65	55	58
<b>Number of Vessels Analyzed</b> [units: Vessels]	257	218	232
<b>Validity (Sensitivity and Specificity), Off-Site Reader 1 - Sensitivity</b> [units: Sensitivity (%)]	63.6	65.5	77.8

#### Statistical Analysis 1 for Validity (Sensitivity and Specificity), Off-Site Reader 1 - Sensitivity

<b>Groups</b> <sup>[1]</sup>	Isovue 370, 70 mL vs. Isovue 370, 90 mL
<b>Method</b> <sup>[2]</sup>	Chi-squared
<b>P Value</b> <sup>[3]</sup>	0.2758
<b>Difference in Sensitivity between Doses</b> <sup>[4]</sup>	14.1
<b>95% Confidence Interval</b>	-11.4 to 39.6

<sup>[1]</sup> Additional details about the analysis, such as null hypothesis and power calculation:

No text entered.

<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:
	No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:
	Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information:
	No text entered.

**Statistical Analysis 2 for Validity (Sensitivity and Specificity), Off-Site Reader 1 - Sensitivity**

<b>Groups</b> <sup>[1]</sup>	Isovue 370, 80 mL vs. Isovue 370, 90 mL
<b>Method</b> <sup>[2]</sup>	Chi-squared
<b>P Value</b> <sup>[3]</sup>	0.3102
<b>Difference in Sensitivity between Doses</b> <sup>[4]</sup>	12.3
<b>95% Confidence Interval</b>	-11.1 to 35.6

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:
	No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:
	No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:
	Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information:
	No text entered.

**Statistical Analysis 3 for Validity (Sensitivity and Specificity), Off-Site Reader 1 - Sensitivity**

<b>Groups</b> <sup>[1]</sup>	Isovue 370, 70 mL vs. Isovue 370, 80 mL
<b>Method</b> <sup>[2]</sup>	Chi-squared
<b>P Value</b> <sup>[3]</sup>	0.8893
<b>Difference in Sensitivity between Doses</b> <sup>[4]</sup>	1.9
<b>95% Confidence Interval</b>	-24.6 to 28.4

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:
	No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:
	No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:

Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.

[4] Other relevant estimation information:

No text entered.

#### 8. Primary: Validity (Sensitivity and Specificity), Off-Site Reader 1 - Specificity [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Validity (Sensitivity and Specificity), Off-Site Reader 1 - Specificity
<b>Measure Description</b>	For each technically adequate coronary artery, the readers assessed or excluded the presence of coronary artery stenoses. If more than one stenosis was present in a single vessel, the readers recorded the most significant stenosis. Based on a match or mismatch between computed tomographic angiography (CTA) and coronary angiography as assessed by the adjudicator, each vessel diagnosis by CTA was defined as true negative (TN), false positive (FP), false negative (FN), or true positive (TP) based on coronary angiography findings. Technical inadequacy by multi-detector CTA was counted as FN or FP depending on the diagnostic results from conventional angiography. The percentage (%) of specificity [TN/(TN+FP)] is presented.
<b>Time Frame</b>	Immediately post dose
<b>Safety Issue</b>	No

#### Population Description

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Number of participants with significant disease (>50% stenosis)

#### Reporting Groups

	Description
<b>Isovue 370, 70 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

#### Measured Values

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
<b>Number of Participants Analyzed</b> [units: participants]	65	55	58
<b>Number of Vessels Analyzed</b> [units: Vessels]	257	218	232
<b>Validity (Sensitivity and Specificity), Off-Site Reader 1 - Specificity</b> [units: Specificity (%)]	98.3	95.2	96.6

#### Statistical Analysis 1 for Validity (Sensitivity and Specificity), Off-Site Reader 1 - Specificity

<b>Groups</b> [1]	Isovue 370, 70 mL vs. Isovue 370, 90 mL
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<b>Method [2]</b>	Chi-squared
<b>P Value [3]</b>	0.2511
<b>Difference in Specificity between Doses [4]</b>	-1.7
<b>95% Confidence Interval</b>	-4.7 to 1.3

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation: No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom: No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance: Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information: No text entered.

#### Statistical Analysis 2 for Validity (Sensitivity and Specificity), Off-Site Reader 1 - Specificity

<b>Groups [1]</b>	Isovue 370, 80 mL vs. Isovue 370, 90 mL
<b>Method [2]</b>	Chi-squared
<b>P Value [3]</b>	0.4985
<b>Difference in Specificity between Doses [4]</b>	1.3
<b>95% Confidence Interval</b>	-2.6 to 5.3

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation: No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom: No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance: Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information: No text entered.

#### Statistical Analysis 3 for Validity (Sensitivity and Specificity), Off-Site Reader 1 - Specificity

<b>Groups [1]</b>	Isovue 370, 70 mL vs. Isovue 370, 80 mL
<b>Method [2]</b>	Chi-squared
<b>P Value [3]</b>	0.0693
<b>Difference in Specificity between Doses [4]</b>	-3.1

<b>95% Confidence Interval</b>	-6.5 to 0.4
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<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:
	No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:
	No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:
	Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information:
	No text entered.

9. Primary: Validity (Sensitivity and Specificity), Off-Site Reader 2 - Sensitivity [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Validity (Sensitivity and Specificity), Off-Site Reader 2 - Sensitivity
<b>Measure Description</b>	For each technically adequate coronary artery, the readers assessed or excluded the presence of coronary artery stenoses. If more than one stenosis was present in a single vessel, the readers recorded the most significant stenosis. Based on a match or mismatch between computed tomographic angiography (CTA) and coronary angiography as assessed by the adjudicator, each vessel diagnosis by CTA was defined as true negative (TN), false positive (FP), false negative (FN), or true positive (TP) based on coronary angiography findings. Technical inadequacy by multi-detector CTA was counted as FN or FP depending on the diagnostic results from conventional angiography. The percentage (%) of sensitivity [TP/(TP+FN)] is presented.
<b>Time Frame</b>	Immediately post dose
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Number of participants with significant disease (>50% stenosis)

**Reporting Groups**

	Description
<b>Isovue 370, 70 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

**Measured Values**

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
<b>Number of Participants Analyzed [units: participants]</b>	65	55	58

<b>Number of Vessels Analyzed</b> [units: Vessels]	<b>257</b>	<b>218</b>	<b>232</b>
<b>Validity (Sensitivity and Specificity), Off-Site Reader 2 - Sensitivity</b> [units: Sensitivity (%)]	<b>68.2</b>	<b>79.3</b>	<b>66.7</b>

**Statistical Analysis 1 for Validity (Sensitivity and Specificity), Off-Site Reader 2 - Sensitivity**

<b>Groups</b> [1]	Isovue 370, 70 mL vs. Isovue 370, 90 mL
<b>Method</b> [2]	Chi-squared
<b>P Value</b> [3]	0.9104
<b>Difference in Sensitivity between Doses</b> [4]	-1.5
<b>95% Confidence Interval</b>	-27.9 to 24.8

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:  No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:  No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:  Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information:  No text entered.

**Statistical Analysis 2 for Validity (Sensitivity and Specificity), Off-Site Reader 2 - Sensitivity**

<b>Groups</b> [1]	Isovue 370, 80 mL vs. Isovue 370, 90 mL
<b>Method</b> [2]	Chi-squared
<b>P Value</b> [3]	0.2857
<b>Difference in Sensitivity between Doses</b> [4]	-12.6
<b>95% Confidence Interval</b>	-35.7 to 10.5

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:  No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:  No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:  Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information:  No text entered.

**Statistical Analysis 3 for Validity (Sensitivity and Specificity), Off-Site Reader 2 - Sensitivity**

<b>Groups</b> [1]	Isovue 370, 70 mL vs. Isovue 370, 80 mL
<b>Method</b> [2]	Chi-squared
<b>P Value</b> [3]	0.3664
<b>Difference in Sensitivity between Doses</b> [4]	11.1
<b>95% Confidence Interval</b>	-13.3 to 35.5

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation: No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom: No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance: Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information: No text entered.

## 10. Primary: Validity (Sensitivity and Specificity), Off-Site Reader 2 - Specificity [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Validity (Sensitivity and Specificity), Off-Site Reader 2 - Specificity
<b>Measure Description</b>	For each technically adequate coronary artery, the readers assessed or excluded the presence of coronary artery stenoses. If more than one stenosis was present in a single vessel, the readers recorded the most significant stenosis. Based on a match or mismatch between computed tomographic angiography (CTA) and coronary angiography as assessed by the adjudicator, each vessel diagnosis by CTA was defined as true negative (TN), false positive (FP), false negative (FN), or true positive (TP) based on coronary angiography findings. Technical inadequacy by multi-detector CTA was counted as FN or FP depending on the diagnostic results from conventional angiography. The percentage (%) of specificity [TN/(TN+FP)] is presented.
<b>Time Frame</b>	Immediately post dose
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Number of participants with significant disease (>50% stenosis)

**Reporting Groups**

	Description
<b>Isovue 370, 70 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4

	mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

**Measured Values**

	<b>Isovue 370, 70 mL</b>	<b>Isovue 370, 80 mL</b>	<b>Isovue 370, 90 mL</b>
<b>Number of Participants Analyzed</b> [units: participants]	<b>65</b>	<b>55</b>	<b>58</b>
<b>Number of Vessels Analyzed</b> [units: Vessels]	<b>257</b>	<b>218</b>	<b>232</b>
<b>Validity (Sensitivity and Specificity), Off-Site Reader 2 - Specificity</b> [units: Specificity (%)]	<b>94.5</b>	<b>92.1</b>	<b>90.7</b>

**Statistical Analysis 1 for Validity (Sensitivity and Specificity), Off-Site Reader 2 - Specificity**

<b>Groups</b> [1]	Isovue 370, 70 mL vs. Isovue 370, 90 mL
<b>Method</b> [2]	Chi-squared
<b>P Value</b> [3]	0.1322
<b>Difference in Specificity between Doses</b> [4]	-3.7
<b>95% Confidence Interval</b>	-8.7 to 1.2

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation: No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom: No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance: Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information: No text entered.

**Statistical Analysis 2 for Validity (Sensitivity and Specificity), Off-Site Reader 2 - Specificity**

<b>Groups</b> [1]	Isovue 370, 80 mL vs. Isovue 370, 90 mL
<b>Method</b> [2]	Chi-squared
<b>P Value</b> [3]	0.6381
<b>Difference in Specificity between Doses</b> [4]	-1.3
<b>95% Confidence Interval</b>	-6.9 to 4.2

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation: No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:

	No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:
	Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information:
	No text entered.

**Statistical Analysis 3 for Validity (Sensitivity and Specificity), Off-Site Reader 2 - Specificity**

<b>Groups [1]</b>	Isovue 370, 70 mL vs. Isovue 370, 80 mL
<b>Method [2]</b>	Chi-squared
<b>P Value [3]</b>	0.3217
<b>Difference in Specificity between Doses [4]</b>	-2.4
<b>95% Confidence Interval</b>	-7.2 to 2.4

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:
	No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:
	No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:
	Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information:
	No text entered.

## 11. Primary: Validity (Sensitivity and Specificity), Off-Site Reader 3 - Sensitivity [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Validity (Sensitivity and Specificity), Off-Site Reader 3 - Sensitivity
<b>Measure Description</b>	For each technically adequate coronary artery, the readers assessed or excluded the presence of coronary artery stenoses. If more than one stenosis was present in a single vessel, the readers recorded the most significant stenosis. Based on a match or mismatch between computed tomographic angiography (CTA) and coronary angiography as assessed by the adjudicator, each vessel diagnosis by CTA was defined as true negative (TN), false positive (FP), false negative (FN), or true positive (TP) based on coronary angiography findings. Technical inadequacy by multi-detector CTA was counted as FN or FP depending on the diagnostic results from conventional angiography. The percentage (%) of sensitivity [TP/(TP+FN)] is presented.
<b>Time Frame</b>	Immediately post dose
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or**

another method. Also provides relevant details such as imputation technique, as appropriate.

Number of participants with significant disease (>50% stenosis)

#### Reporting Groups

	Description
<b>Isovue 370, 70 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

#### Measured Values

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
<b>Number of Participants Analyzed</b> [units: participants]	65	55	58
<b>Number of Vessels Analyzed</b> [units: Vessels]	257	218	232
<b>Validity (Sensitivity and Specificity), Off-Site Reader 3 - Sensitivity</b> [units: Sensitivity (%)]	59.1	62.1	66.7

#### Statistical Analysis 1 for Validity (Sensitivity and Specificity), Off-Site Reader 3 - Sensitivity

<b>Groups</b> <sup>[1]</sup>	Isovue 370, 70 mL vs. Isovue 370, 90 mL
<b>Method</b> <sup>[2]</sup>	Chi-squared
<b>P Value</b> <sup>[3]</sup>	0.5843
<b>Difference in Sensitivity between Doses</b> <sup>[4]</sup>	7.6
<b>95% Confidence Interval</b>	-19.6 to 34.7

<sup>[1]</sup> Additional details about the analysis, such as null hypothesis and power calculation:

No text entered.

<sup>[2]</sup> Other relevant method information, such as adjustments or degrees of freedom:

No text entered.

<sup>[3]</sup> Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:

Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.

<sup>[4]</sup> Other relevant estimation information:

No text entered.

#### Statistical Analysis 2 for Validity (Sensitivity and Specificity), Off-Site Reader 3 - Sensitivity

<b>Groups</b> <sup>[1]</sup>	Isovue 370, 80 mL vs. Isovue 370, 90 mL
<b>Method</b> <sup>[2]</sup>	Chi-squared

<b>P Value</b> <sup>[3]</sup>	0.7197
<b>Difference in Sensitivity between Doses</b> <sup>[4]</sup>	4.6
<b>95% Confidence Interval</b>	-20.5 to 29.7

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:
	No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:
	No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:
	Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information:
	No text entered.

#### Statistical Analysis 3 for Validity (Sensitivity and Specificity), Off-Site Reader 3 - Sensitivity

<b>Groups</b> <sup>[1]</sup>	Isovue 370, 70 mL vs. Isovue 370, 80 mL
<b>Method</b> <sup>[2]</sup>	Chi-squared
<b>P Value</b> <sup>[3]</sup>	0.8292
<b>Difference in Sensitivity between Doses</b> <sup>[4]</sup>	3.0
<b>95% Confidence Interval</b>	-24.1 to 30.1

<b>[1]</b>	Additional details about the analysis, such as null hypothesis and power calculation:
	No text entered.
<b>[2]</b>	Other relevant method information, such as adjustments or degrees of freedom:
	No text entered.
<b>[3]</b>	Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:
	Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.
<b>[4]</b>	Other relevant estimation information:
	No text entered.

#### 12. Primary: Validity (Sensitivity and Specificity), Off-Site Reader 3 - Specificity [ Time Frame: Immediately post dose ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Validity (Sensitivity and Specificity), Off-Site Reader 3 - Specificity
<b>Measure Description</b>	For each technically adequate coronary artery, the readers assessed or excluded the presence of coronary artery stenoses. If more than one stenosis was present in a single vessel, the readers recorded the most significant stenosis. Based on a match or mismatch between computed tomographic angiography (CTA) and coronary angiography as

	assessed by the adjudicator, each vessel diagnosis by CTA was defined as true negative (TN), false positive (FP), false negative (FN), or true positive (TP) based on coronary angiography findings. Technical inadequacy by multi-detector CTA was counted as FN or FP depending on the diagnostic results from conventional angiography. The percentage (%) of specificity [TN/(TN+FP)] is presented.
<b>Time Frame</b>	Immediately post dose
<b>Safety Issue</b>	No

#### Population Description

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

Number of participants with significant disease (>50% stenosis)

#### Reporting Groups

	Description
<b>Isovue 370, 70 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 milliliters (mL), at a rate of >4 mL per second (/sec), followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 80 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.
<b>Isovue 370, 90 mL</b>	Patients received a randomized total dose of Iopamidol injection 370, which could be 70, 80, or 90 mL, at a rate of >4 mL/sec, followed by a 40 mL saline flush, administered at the same injection rate.

#### Measured Values

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
<b>Number of Participants Analyzed</b> [units: participants]	65	55	58
<b>Number of Vessels Analyzed</b> [units: Vessels]	257	218	232
<b>Validity (Sensitivity and Specificity), Off-Site Reader 3 - Specificity</b> [units: Specificity (%)]	94.9	91.5	90.7

#### Statistical Analysis 1 for Validity (Sensitivity and Specificity), Off-Site Reader 3 - Specificity

<b>Groups</b> <sup>[1]</sup>	Isovue 370, 70 mL vs. Isovue 370, 90 mL
<b>Method</b> <sup>[2]</sup>	Chi-squared
<b>P Value</b> <sup>[3]</sup>	0.0888
<b>Difference in Specificity between Doses</b> <sup>[4]</sup>	-4.2
<b>95% Confidence Interval</b>	-9.0 to 0.7

**[1]** Additional details about the analysis, such as null hypothesis and power calculation:

No text entered.

**[2]** Other relevant method information, such as adjustments or degrees of freedom:

No text entered.

**[3]** Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:

Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.

[4] Other relevant estimation information:

No text entered.

#### Statistical Analysis 2 for Validity (Sensitivity and Specificity), Off-Site Reader 3 - Specificity

<b>Groups [1]</b>	Isovue 370, 80 mL vs. Isovue 370, 90 mL
<b>Method [2]</b>	Chi-squared
<b>P Value [3]</b>	0.7796
<b>Difference in Specificity between Doses [4]</b>	-0.8
<b>95% Confidence Interval</b>	-6.4 to 4.8

[1] Additional details about the analysis, such as null hypothesis and power calculation:

No text entered.

[2] Other relevant method information, such as adjustments or degrees of freedom:

No text entered.

[3] Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:

Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.

[4] Other relevant estimation information:

No text entered.

#### Statistical Analysis 3 for Validity (Sensitivity and Specificity), Off-Site Reader 3 - Specificity

<b>Groups [1]</b>	Isovue 370, 70 mL vs. Isovue 370, 80 mL
<b>Method [2]</b>	Chi-squared
<b>P Value [3]</b>	0.1662
<b>Difference in Specificity between Doses [4]</b>	-3.4
<b>95% Confidence Interval</b>	-8.2 to 1.5

[1] Additional details about the analysis, such as null hypothesis and power calculation:

No text entered.

[2] Other relevant method information, such as adjustments or degrees of freedom:

No text entered.

[3] Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance:

Study was not powered for diagnostic performance analyses. Sample size was based on quality of visualization of coronary artery segments.

[4] Other relevant estimation information:

No text entered.

13. Secondary: Number of Participants Who Experienced Adverse Events With Incidence of 5% or Greater [ Time Frame: up to 72 hours post dose ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Number of Participants Who Experienced Adverse Events With Incidence of 5% or Greater
<b>Measure Description</b>	Participants who received investigational product (iopamidol injection) and experienced an adverse event (AE). See Adverse Events module for further details.
<b>Time Frame</b>	up to 72 hours post dose
<b>Safety Issue</b>	No

#### Population Description

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

No text entered.

#### Reporting Groups

	Description
Isovue 370, 70 mL	iopamidol injection 370, 70 mL
Isovue 370, 80 mL	iopamidol injection 370, 80 mL
Isovue 370, 90 mL	iopamidol injection 370, 90 mL

#### Measured Values

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
<b>Number of Participants Analyzed</b> [units: participants]	68	63	60
<b>Number of Participants Who Experienced Adverse Events With Incidence of 5% or Greater</b> [units: Participants who Experienced AE(s)]	15	14	13

No statistical analysis provided for Number of Participants Who Experienced Adverse Events With Incidence of 5% or Greater

#### ► Serious Adverse Events

 Hide Serious Adverse Events

<b>Time Frame</b>	Patients were monitored for any untoward medical occurrence from the time they signed the informed consent until 72 hours after the administration of iopamidol injection 370.
<b>Additional Description</b>	Only those adverse events that were reported after the injection of iopamidol injection 370 are presented.

#### Reporting Groups

	Description

Isovue 370, 70 mL	iopamidol injection 370, 70 mL
Isovue 370, 80 mL	iopamidol injection 370, 80 mL
Isovue 370, 90 mL	iopamidol injection 370, 90 mL

### Serious Adverse Events

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
Total, serious adverse events			
# participants affected / at risk	0/68 (0.00%)	0/63 (0.00%)	0/60 (0.00%)

### Other Adverse Events

 Hide Other Adverse Events

<b>Time Frame</b>	Patients were monitored for any untoward medical occurrence from the time they signed the informed consent until 72 hours after the administration of iopamidol injection 370.
<b>Additional Description</b>	Only those adverse events that were reported after the injection of iopamidol injection 370 are presented.

### Frequency Threshold

Threshold above which other adverse events are reported	5%
---	----

### Reporting Groups

	Description
Isovue 370, 70 mL	iopamidol injection 370, 70 mL
Isovue 370, 80 mL	iopamidol injection 370, 80 mL
Isovue 370, 90 mL	iopamidol injection 370, 90 mL

### Other Adverse Events

	Isovue 370, 70 mL	Isovue 370, 80 mL	Isovue 370, 90 mL
Total, other (not including serious) adverse events			
# participants affected / at risk	15/68 (22.06%)	14/63 (22.22%)	13/60 (21.67%)
<b>General disorders</b>			
Feeling Hot † 1			
# participants affected / at risk	6/68 (8.82%)	5/63 (7.94%)	5/60 (8.33%)
# events	6	5	5
Injection Site Erythema † 1			
# participants affected / at risk	0/68 (0.00%)	5/63 (7.94%)	1/60 (1.67%)
# events	0	5	1
<b>Nervous system disorders</b>			
Headache † 1			
# participants affected / at risk	7/68 (10.29%)	6/63 (9.52%)	2/60 (3.33%)
# events	7	6	2
<b>Vascular disorders</b>			
Flushing † 1			

# participants affected / at risk	4/68 (5.88%)	4/63 (6.35%)	5/60 (8.33%)
# events	4	4	5

† Events were collected by systematic assessment

1 Term from vocabulary, MedDRA version 12.1

## ▶ Limitations and Caveats

▢ Hide Limitations and Caveats

Limitations of the study, such as early termination leading to small numbers of participants analyzed and technical problems with measurement leading to unreliable or uninterpretable data

No text entered.

## ▶ More Information

▢ Hide More Information

### Certain Agreements:

Principal Investigators are **NOT** employed by the organization sponsoring the study.

There **IS** an agreement between Principal Investigators and the Sponsor (or its agents) that restricts the PI's rights to discuss or publish trial results after the trial is completed.

The agreement is:

The only disclosure restriction on the PI is that the sponsor can review results communications prior to public release and can embargo communications regarding trial results for a period that is **less than or equal to 60 days**. The sponsor cannot require changes to the communication and cannot extend the embargo.

The only disclosure restriction on the PI is that the sponsor can review results communications prior to public release and can embargo communications regarding trial results for a period that is **more than 60 days but less than or equal to 180 days**. The sponsor cannot require changes to the communication and cannot extend the embargo.

Other disclosure agreement that restricts the right of the PI to discuss or publish trial results after the trial is completed.

**Restriction Description:** The results of the study may be presented during scientific symposia or published in a scientific journal only after review by Bracco in accordance with the guidelines set forth in the applicable publication or financial agreement.

### Results Point of Contact:

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### No publications provided

Responsible Party: Bracco Diagnostics, Inc

ClinicalTrials.gov Identifier: [NCT00558792](#) [History of Changes](#)

Other Study ID Numbers: **IOP 108**

Study First Received: November 13, 2007

Results First Received: August 13, 2012

Last Updated: October 18, 2012

Health Authority: United States: Food and Drug Administration

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