

Trial record 1 of 1 for: TC-2402-038-SP

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## TASALL - TachoSil® Against Liquor Leak

**This study has been completed.**

**Sponsor:**

Takeda

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

Takeda

**ClinicalTrials.gov Identifier:**

NCT01355627

First received: May 11, 2011

Last updated: June 26, 2014

Last verified: June 2014

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Results First Received: June 26, 2014

<b>Study Type:</b>	Interventional
<b>Study Design:</b>	Allocation: Randomized; Intervention Model: Parallel Assignment; Masking: Open Label; Primary Purpose: Treatment
<b>Condition:</b>	Cerebrospinal Fluid Leaks
<b>Interventions:</b>	Procedure: TachoSil® Procedure: Current Practice

### ▶ 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**

Participants took part in the study at thirty-five Centres in a total of 10 countries: Belgium, France, Germany, Greece, Italy The Netherlands, Poland, Russia, Spain and Sweden from 28 April 2011 to 27 June 2013.

#### Pre-Assignment Details

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

Participants requiring dura sealing techniques for the prevention of post-operative cerebrospinal fluid (CSF) leaks were enrolled; 726 participants were randomized equally in 1 of 2 treatment groups, TachoSil® or Current practice group.

#### Reporting Groups

	Description
<b>TachoSil®</b>	Primary suture was performed. Duraplasty could be performed at the discretion of the investigator. TachoSil® was

	applied under aseptic conditions during the closure of the dura.
<b>Current Practice Group</b>	Primary suture was performed. Duraplasty could be performed at the discretion of the investigator. In addition to primary suture, whatever means of dura closure treatment, alone or in combination, as deemed necessary by the investigator was used with the exception of TachoSil®.

**Participant Flow: Overall Study**

	TachoSil®	Current Practice Group
<b>STARTED</b>	<b>362</b>	<b>364</b>
<b>Safety Analysis Set</b>	<b>362</b>	<b>364</b>
<b>Full Analysis Set</b>	<b>361 [1]</b>	<b>365 [2]</b>
<b>COMPLETED</b>	<b>329</b>	<b>326</b>
<b>NOT COMPLETED</b>	<b>33</b>	<b>38</b>
<b>Request By the Patient to Discontinue</b>	<b>5</b>	<b>7</b>
<b>Lost to Follow-up</b>	<b>8</b>	<b>7</b>
<b>Fatal Adverse Event</b>	<b>19</b>	<b>23</b>
<b>Other</b>	<b>1</b>	<b>1</b>

[1] One participant's data for final follow-up is missing, completion status could not be confirmed.

[2] One participant randomized to Current Practice actually received TachoSil®.

**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.

Baseline Measures were based on the Full Analysis Set that included all enrolled randomized patients.

**Reporting Groups**

	Description
<b>TachoSil®</b>	Primary suture was performed. Duraplasty could be performed at the discretion of the investigator. TachoSil® was applied under aseptic conditions during the closure of the dura.
<b>Current Practice Group</b>	Primary suture was performed. Duraplasty could be performed at the discretion of the investigator. In addition to primary suture, whatever means of dura closure treatment, alone or in combination, as deemed necessary by the investigator was used with the exception of TachoSil®.
<b>Total</b>	Total of all reporting groups

**Baseline Measures**

	TachoSil®	Current Practice Group	Total
<b>Number of Participants</b> [units: participants]	<b>361</b>	<b>365</b>	<b>726</b>
<b>Age</b> [units: years] Mean (Standard Deviation)	<b>53.1 (13.80)</b>	<b>53.2 (14.22)</b>	<b>53.1 (14.00)</b>
<b>Age, Customized</b> [units: participants]			

18-65 years	288	293	581
>65 years	73	72	145
<b>Gender</b> [units: participants]			
Female	233	211	444
Male	128	154	282
<b>Race/Ethnicity, Customized</b> [units: participants]			
White/Caucasian	355	361	716
Asian	1	0	1
Black or African American	3	2	5
American Indian or Alaska Native	1	1	2
Other	1	1	2
<b>Race/Ethnicity, Customized</b> [units: participants]			
Hispanic or Latino	55	62	117
Non-Hispanic and Non-Latino	295	289	584
Unknown	11	14	25
<b>Region of Enrollment</b> [units: participants]			
Belgium	87	87	174
Germany	33	29	62
Spain	54	54	108
France	24	26	50
Greece	34	38	72
Italy	14	14	28
Netherlands	3	2	5
Poland	59	61	120
Russian Federation	9	8	17
Sweden	44	46	90
<b>Height</b> [units: cm] Mean (Standard Deviation)	167.4 (9.44)	168.5 (9.18)	168.0 (9.32)
<b>Weight</b> [units: kg] Mean (Standard Deviation)	73.6 (14.40)	75.2 (16.79)	74.4 (15.65)
<b>Body Mass Index (BMI)</b> [units: kg/m <sup>2</sup> ] Mean (Standard Deviation)	26.20 (4.44)	26.42 (5.10)	26.31 (4.79)
<b>Fertility Status</b> [units: participants]			
Fertile	74	74	148

Post-Menopausal	140	111	251
Surgically Sterile	19	26	45
Not Applicable	128	154	282

## ▶ Outcome Measures

[+ Show All Outcome Measures](#)

1. Primary: Percentage of Participants With Clinically Evident Verified Post-Operative Cerebrospinal Fluid Leak or Clinically Evident Pseudomeningocele or Treatment Failure [ Time Frame: Up to 8 Weeks (7 Weeks ± 1 Week) ]

[+ Show Outcome Measure 1](#)

2. Secondary: Percentage of Participants With Post-Surgical Non-Clinically Evident Post-Operative Pseudomeningocele [ Time Frame: Assessment at least once prior to discharge from neurosurgical ward, with the expected discharge from neurosurgical ward after an average of 10 days (Up to 28 Weeks) ]

[+ Show Outcome Measure 2](#)

## ▶ Serious Adverse Events

[+ Show Serious Adverse Events](#)

## ▶ Other Adverse Events

[+ Show Other Adverse Events](#)

## ▶ Limitations and Caveats

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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 first study related publication will be a multi-center publication submitted within 24 months after conclusion



or termination of a study at all sites. After such multi site publication, all proposed site publications and presentations will be submitted to sponsor for review 60 days in advance of publication. Site will remove Sponsor confidential information unrelated to study results. Sponsor can delay a proposed publication for another 60 days to preserve intellectual property.

**Results Point of Contact:**

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Responsible Party: Takeda

ClinicalTrials.gov Identifier: [NCT01355627](#) [History of Changes](#)

Other Study ID Numbers: **TC-2402-038-SP**

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Health Authority: Austria: Ethikkommission

Belgium: Federal Agency for Medicinal Products and Health Products

France: Afssaps - Agence française de sécurité sanitaire des produits de santé (Saint-Denis)

Germany: Paul-Ehrlich-Institut

Greece: National Organization of Medicines

Italy: The Italian Medicines Agency

Netherlands: The Central Committee on Research Involving Human Subjects (CCMO)

Poland: Office for Registration of Medicinal Products, Medical Devices and Biocidal Products

Russia: Ethics Committee

Spain: Agencia Española de Medicamentos y Productos Sanitarios

Sweden: Regional Ethical Review Board

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