

# The effect of an ilio-inguinal block in appendectomy on post operative pain and hospital stay

<b>Submission date</b> 28/09/2007	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 28/09/2007	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 06/07/2009	<b>Condition category</b> Signs and Symptoms	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

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### Contact details

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Royal Berkshire Hospital  
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## Additional identifiers

### Protocol serial number

N0199192286

## Study information

### Scientific Title

**Study objectives**

Does the use of local anaesthetic nerve blocks to numb the operation site, once the patient is anaesthetised, reduce post operative pain in patients undergoing appendectomy? This will be compared to infiltration of the skin alone with local anaesthetic.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Not provided at time of registration

**Study design**

Randomised prospective trial with patient and ward staff blinded to intervention

**Primary study design**

Interventional

**Study type(s)**

Treatment

**Health condition(s) or problem(s) studied**

Signs and Symptoms: Pain

**Interventions**

1. Group A: local infiltration of skin prior to incision with bupivacaine according to weight.
2. Group B: half the bupivacaine by weight infiltrated into the skin prior to incision. As incision deepened second half of bupivacaine given under direct vision deep to external oblique, lateral to the incision, to create field block.

**Intervention Type**

Other

**Phase**

Not Specified

**Primary outcome(s)**

1. Post operative pain in recovery: by questionnaire in recovery
2. Post operative pain on ward at 4 and 8 hours post op: by questionnaire
3. Post operative pain at 24 hours or at discharge, whichever is sooner.
4. Hours from operation to discharge.

**Key secondary outcome(s))**

Not provided at time of registration

**Completion date**

30/06/2007

**Eligibility****Key inclusion criteria**

All open appendectomies undertaken for acute appendicitis at Royal Berkshire Hospital. At time of analysis different sub groups formed according to operative findings: gangrenous / perforated appendix or normal appendix.

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Not Specified

**Sex**

Not Specified

**Key exclusion criteria**

1. Laparoscopic appendectomies.
2. Appendix removed at time of planned laparotomy (i.e. not through small incision).

These exclusion criteria exist as we wish to judge the effect of local anaesthetic on post operative pain. Where a different size wound is left (laparoscopic or laparotomy) it would be an unfair comparison.

Where the initial operation is appendectomy via a lanz incision but an alternative pathology is found or the wound is extended for a laparotomy then the patient will be included in the study until the time of analysis.

**Date of first enrolment**

07/03/2007

**Date of final enrolment**

30/06/2007

**Locations****Countries of recruitment**

United Kingdom

England

**Study participating centre**

Department of General Surgery

Reading

United Kingdom

RG1 5AN

**Sponsor information**

## Organisation

Record Provided by the NHSTCT Register - 2007 Update - Department of Health

## Funder(s)

### Funder type

Government

### Funder Name

Royal Berkshire NHS Foundation Trust (UK)

## Results and Publications

### Individual participant data (IPD) sharing plan

### IPD sharing plan summary

Not provided at time of registration

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/05/2010		Yes	No