

Study on initial pain management in patients with acute pancreatitis

Submission date	Recruitment status	<input type="checkbox"/> Prospectively registered
27/04/2023	No longer recruiting	<input checked="" type="checkbox"/> Protocol
Registration date	Overall study status	<input type="checkbox"/> Statistical analysis plan
11/05/2023	Completed	<input checked="" type="checkbox"/> Results
Last Edited	Condition category	<input type="checkbox"/> Individual participant data
09/06/2025	Signs and Symptoms	

Plain English summary of protocol

Background and study aims

Abdominal pain is the main symptom for most patients with acute pancreatitis (AP). It's important for diagnosing AP and can affect the patient's prognosis. Early management of AP involves pain relief and fluids, but there is debate on the best pain relief protocol. Pain is a big part of the patient's experience and relieving it can improve their quality of life and lower the risk of complications.

Previous studies have not shown a clear favourite among analgesic drugs for AP. A new review of 12 randomized control trials found that epidural analgesia was most effective for pain relief in the first 24 hours, but opioids were just as effective at 48 hours. Non-steroidal anti-inflammatory drugs (NSAIDs) were just as effective as opioids for pain relief in the first 24 hours. However, the studies had limitations and were not able to determine the specific efficacy of each analgesic drug.

Opioids are still the main treatment for pain in AP, but they have side effects like constipation and slow digestion. Recent studies have shown that opioids can worsen AP. Despite the importance of pain relief in AP, there have been few well-designed studies on analgesic protocols, and guidelines for managing AP do not offer clear recommendations.

This study aims to document current analgesic practices for AP in the UK and examine the relationship between analgesics and complications of AP.

Who can participate?

Adults over 18 years, at the first visit to a hospital for acute pancreatitis.

What does the study involve?

This is an observational study looking at patient records, no additional activity is being carried out with participants.

What are the possible benefits and risks of participating?

None

Where is the study run from?
Freeman Hospital (UK)

When is the study starting and how long is it expected to run for?

Who is funding the study?
Investigator initiated and funded

Who is the main contact?
Sanjay Pandanaboyana, s.pandanaboyana@nhs.net

Contact information

Type(s)
Principal investigator

Contact name
Mr Sanjay Pandanaboyana

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Additional identifiers

Clinical Trials Information System (CTIS)
Nil known

ClinicalTrials.gov (NCT)
Nil known

Protocol serial number
Nil known

Study information

Scientific Title
Multicentre prospective study on initial PAin management IN patients with Acute Pancreatitis:
PAINAP study protocol

Acronym

Study objectives

The PAINAP Study aims to determine current analgesic practices and association between type of analgesic use and their impact on short term outcomes in patients with AP

Ethics approval required

Old ethics approval format

Ethics approval(s)

This is prospective observational study. The study was registered with Newcastle hospitals NHS Trust R&D department. The R&D department agreed that given the prospective nature of the study and there is no patient identifiable information, formal ethics approval is not required.

Study design

Multicentre prospective observational study

Primary study design

Observational

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Pain management in acute pancreatitis

Interventions

There will be no change in the clinical course for the participants in this trial given this is a observational study. The patients will be followed for 1 month post recruitment to record any complications.

Patient records will be used to:

1. Document current analgesic practice for patients with Acute pancreatitis
2. Examine the relationship between different analgesics and local and systemic complications of AP.

Intervention Type

Other

Primary outcome(s)

Analgesics used during admission (i.e. simple analgesics, mild opioids, strong opioids and epidural analgesia) are measured using patient records at a single timepoint

Key secondary outcome(s)

Local and systemic complications of AP measured using patient records at a single timepoint (1 month after admission)

Completion date

30/06/2022

Eligibility

Key inclusion criteria

1. Patients aged 18 years and above
2. First presentation with acute pancreatitis of any etiology

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Total final enrolment

2200

Key exclusion criteria

1. Recurrent acute pancreatitis
2. Chronic pancreatitis
3. Post ERCP pancreatitis (will have been given prophylactic NSAIDs)
4. Those on regular opioids, tricyclic antodipressants and gabapentinoids for other painful conditions, including chronic pain (for other reasons)
5. Pregnancy

Date of first enrolment

01/04/2022

Date of final enrolment

30/06/2022

Locations

Countries of recruitment

United Kingdom

England

Scotland

Wales

Argentina

Australia

China

Cyprus

Denmark

Egypt

Georgia

Greece

India

Italy

Jordan

Kyrgyzstan

New Zealand

Pakistan

Portugal

Romania

Serbia

Singapore

South Africa

Spain

Sri Lanka

Sudan

Türkiye

Ukraine

United States of America

Study participating centre

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Glasgow Royal Infirmary
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Australia
QLD 4131

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Royal Melbourne Hospital
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Melbourne
Australia
VIC 3050

Study participating centre

Royal North Shore Hospital
Reserve Road
St Leonards
Australia
NSW 2065

Study participating centre

Prince of Wales Hospital

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Sponsor information

Organisation
Newcastle upon Tyne Hospitals NHS Foundation Trust

ROR
<https://ror.org/05p40t847>

Funder(s)

Funder type
Other

Funder Name
Investigator initiated and funded

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and analysed during the current study are/will be available upon request from Mr Sanjay Pandanaboyana, s.pandanaboyana@nhs.net

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		14/08/2024	09/06/2025	Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Protocol file	version 2	23/02/2022	28/04/2023	No	No