

27G-Quincke® vs 27G-Pencil-Point® spinal needles for spinal saddle block

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| Submission date 22/02/2009 | Recruitment status No longer recruiting | <input type="checkbox"/> Prospectively registered |
| | | <input type="checkbox"/> Protocol |
| Registration date 26/05/2009 | Overall study status Completed | <input type="checkbox"/> Statistical analysis plan |
| | | <input type="checkbox"/> Results |
| Last Edited 26/05/2009 | Condition category Nervous System Diseases | <input type="checkbox"/> Individual participant data |
| | | <input type="checkbox"/> Record updated in last year |

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Protocol serial number
N/A

Study information

Scientific Title
Comparison of 27G-Quincke® vs 27G-Pencil-Point® spinal needles and 10 vs 30 minutes fixation time for spinal saddle block regarding the incidence of post-dural puncture headache

Study objectives

The incidence of post-dural puncture headache in spinal saddle block seems to be associated with the time given for fixation of the local anaesthetic. Under the assumption of an elevated cerebro-spinal-fluid pressure in the lumbar spine in the sitting position we hypothesised that (a) using a 27G-Pencil-Point® spinal needle instead of a 27G-Quincke-type® spinal needle AND (b) leaving the patient in the upright position for fixation of the local anaesthetic for 10 instead of 30 minutes would reduce the incidence of post-dural-puncture headache.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Medical Ethics Committee II, Faculty of Medicine, Ruprecht Karl University of Heidelberg (Medizinische Ethikkommission II: Medizinische Fakultät Mannheim der Ruprecht-Karls-Universität Heidelberg), approved on 27/09/2008.

Study design

Randomised controlled single-centre trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Post-dural puncture headache

Interventions

Patients are randomised 1:1:1:1 to:

A: 27-gauge Quincke® needle, being left in the upright position for 10 minutes

B: 27-gauge Quincke® needle, being left in the upright position for 30 minutes

C: 27-gauge Pencil-Point® needle, being left in the upright position for 10 minutes

D: 27-gauge Pencil-Point® needle, being left in the upright position for 30 minutes

Patients receive a questionnaire and phone call one week later to obtain information about satisfaction and occurring complications. The time for the performance of the spinal anaesthesia and problems with the handling of the spinal needle are recorded by the anaesthesiologist.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

Incidence of post-dural puncture headache and other complications, measured one week after anaesthesia.

Key secondary outcome(s))

No secondary outcome measures

Completion date

01/08/2009

Eligibility

Key inclusion criteria

1. Patients (male/female) with minor perianal surgery
2. Age 18-80 years
3. American Society of Anesthesiologists (ASA) physical status I-III
4. No contraindications for spinal anaesthesia

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Upper age limit

80 years

Sex

All

Key exclusion criteria

1. Contraindications for spinal anaesthesia
2. Allergy to local anaesthetics

Date of first enrolment

01/09/2008

Date of final enrolment

01/08/2009

Locations

Countries of recruitment

Germany

Study participating centre

Universitätsmedizin Mannheim
Mannheim

Germany
69167

Sponsor information

Organisation

B. Braun Melsungen AG (Germany)

ROR

<https://ror.org/04nxj7050>

Funder(s)

Funder type

University/education

Funder Name

University of Heidelberg (Germany) - main funder

Funder Name

B. Braun Melsungen AG (Germany) - provided the spinal needles

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration