

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

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

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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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