

Music therapy impact during anaesthesia for gastrointestinal endoscopy

Submission date 31/10/2025	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 03/11/2025	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 31/10/2025	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input checked="" type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

Ambulatory gastrointestinal (GI) endoscopy constitutes a large and growing share of procedural care. Anxiety correlates with fears about anaesthesia, pain, and adverse outcomes, and when not controlled, higher doses of hypnotics and analgesics are typically required. Music has long been integrated into medical practice and, in modern trials, has demonstrated clinically relevant benefits. Across adult surgical settings, music interventions reduce anxiety and improve pain outcomes when compared with usual care or silence. This study aims to find out whether patient-selected music reduces propofol requirements during combined upper and lower gastrointestinal endoscopy.

Who can participate?

Outpatients aged 18 years and over scheduled for diagnostic gastroscopy and colonoscopy

What does the study involve?

Patients are randomly allocated to patient-selected music plus standard care or to standard care alone.

What are the possible benefits and risks of participating?

Benefits: reduced anxiety and propofol consumption

Risks: no additional risks, same as standard of care

Where is the study run from?

Princess Grace Hospital Center (Monaco)

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

November 2023 to October 2025

Who is funding the study?

Investigator initiated and funded

Who is the main contact?

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Contact information

Type(s)

Public, Scientific, Principal investigator

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Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

Integrated Research Application System (IRAS)

Nil known

ClinicalTrials.gov (NCT)

Nil known

Protocol serial number

23-15

Study information

Scientific Title

Patientselected music reduces propofol requirements during combined upper and lower gastrointestinal endoscopy: a randomized controlled trial

Acronym

MUSICENDO

Study objectives

Music interventions can decrease sedative requirements and can reduce perioperative anxiety

Ethics approval required

Ethics approval not required

Ethics approval(s)

Study design

Openlabel singlecentre randomized controlled trial

Primary study design

Interventional

Study type(s)

Other

Health condition(s) or problem(s) studied

Anxiety during gastroscopy and colonoscopy

Interventions

This is an openlabel, singlecentre, randomized, controlled trial conducted at Princess Grace Hospital, Monaco. Consecutive adult outpatients scheduled for diagnostic gastroscopy and colonoscopy will be screened. Patients are allocated 1:1 to patientselected music plus standard care or to standard care alone using a computer-generated schedule with fixed permuted blocks.

Intervention Type

Other

Primary outcome(s)

Propofol consumption rate ($\text{mg}\cdot\text{kg}^{-1}\cdot\text{min}^{-1}$), defined as total propofol administered divided by body weight and by the intervention length (minutes from induction to procedure end)

Key secondary outcome(s)

1. Procedure duration (minutes), from induction to end of procedure
2. Total ambulatory pathway time (minutes), from induction to return to ambulatory unit
3. Anxiety level measured using the Amsterdam Preoperative Anxiety and Information Scale (APAIS) score at preanaesthesia consultation and on arrival in the ambulatory unit
4. Haemodynamic changes (systolic and diastolic blood pressures and pulse pressure) before vs after procedure
5. Adverse events (e.g., bronchospasm, laryngospasm) recorded during procedure
6. Number of propofol vials used per case for the procedure

Completion date

06/10/2025

Eligibility

Key inclusion criteria

Adults with ASA physical status I–III planned for combined diagnostic upper and lower GI endoscopy in ambulatory care

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Total final enrolment

89

Key exclusion criteria

1. Legal incapacity
2. Hospital stay >24 h
3. Psychiatric disorders
4. Alcohol or toxic substance use
5. Severe renal failure (creatinine clearance <30 mL·min¹)
6. Pregnancy or breastfeeding
7. Significant hearing impairment precluding music exposure
8. Urgent procedures
9. Lack of social insurance

Date of first enrolment

20/03/2024

Date of final enrolment

16/07/2024

Locations

Countries of recruitment

Monaco

Study participating centre

Centre Hospitalier Princesse Grace

1 avenue Pasteur

Monaco

Monaco

98000

Sponsor information

Organisation

Princess Grace Hospital Centre

ROR

<https://ror.org/03x1jt541>

Funder(s)**Funder type**

Other

Funder Name

Investigator initiated and funded

Results and Publications**Individual participant data (IPD) sharing plan**

Data will be shared with researchers who submit a methodologically sound protocol to Gildas Rousseau (gildas.rousseau@chpg.mc) following the signing of a data access agreement.

IPD sharing plan summary

Available on request