

The efficacy, safety and cost-effectiveness analysis of morphine and hydromorphone in intrathecal drug deliver system for intractable cancer pain

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| Submission date 03/01/2016 | Recruitment status No longer recruiting | <input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol |
| Registration date 26/01/2016 | Overall study status Completed | <input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results |
| Last Edited 02/02/2016 | Condition category Cancer | <input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year |

Plain English summary of protocol

Background and study aims

Intractable cancer pain (that is pain that is resistant to the effects of painkillers) is a difficult medical problem. Intrathecal analgesia (that is, painkiller injected into the spinal cord) has emerged as a key therapeutic option for pain relief for patients for which other treatment avenues have not worked as well as patients on high doses of analgesia (painkiller) suffering from unacceptable side effects. Hydromorphone, is a opioid drug with effects similar to that of morphine, but is more potent and acts more quickly due to its greater lipophilic properties (that is, it is more able to dissolve in lipids, or fats). But the comparison between hydromorphone and morphine in how well they work (efficacy), safety, and pharmacoeconomics analysis research (that is, comparing the value of one drug compared to another) is rare in China. The aims of this study was to observe the effects, security and pharmacoeconomics of morphine and hydromorphone in the treatment of intractable cancer pain.

Who can participate?

Adults with cancer suffering from intractable cancer pain

What does the study involve?

Participants are randomly allocated to one of two groups. Those in group 1 are given hydromorphone via a intrathecal catheter. Those in group 2 are given morphine via a intrathecal catheter. The pain experienced after treatment is assessed for each patient every day for the next 3 months.

What are the possible benefits and risks of participating?

The immediate direct benefit to those taking part is better pain management and a free intrathecal drug delivery system (IDDs). After treatment, patients' quality of life may improve. The main risk of this study is surgical complications from inserting the intrathecal catheter including bleeding, neurological injury, infection, cerebrospinal fluid (CSF) leakage and shredded catheters.

Where is the study run from?

Pain Management Department, Xinhua Hospital (affiliated to Shanghai Jiaotong University, School of Medicine)

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

December 2015 to December 2016

Who is funding the study?

Chinese association for the study of pain, the minimally invasive interventional group

Who is the main contact?

Professor Ke MA

marke72@163.com

Contact information

Type(s)

Scientific

Contact name

Prof Ke MA

ORCID ID

<http://orcid.org/0000-0002-5603-9321>

Contact details

Pain Management Centre

Xinhua Hospital (affiliated with Shanghai Jiaotong University, School of Medicine)

No 1665, Kongjiang Road

Yangpu District

Shanghai

China

2000092

+86 13651663779

marke72@163.com

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N/A

Study information

Scientific Title

The efficacy, safety and cost-effectiveness analysis of morphine and hydromorphone in intrathecal drug deliver system for intractable cancer paina multicenter, randomized single-blind, controlled study.

Study objectives

1. Morphine and hydromorphone are effective and safe when administered using the intrathecal drug delivery system for intractable cancer pain patients.
2. Morphine and hydromorphone administered using the intrathecal drug delivery system can improve the quality of life and reduce the oral pain-related drugs dosage of cancer pain patients.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Xinhua hospital Ethics Committee Affiliated to Shanghai Jiaotong University School of Medicine, 08/09/2015, ref: XHEC-C -2015-018-2

Study design

Multicenter single-blinded randomized controlled clinical study

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Not available in web format, please use contact details to request a participant information sheet

Health condition(s) or problem(s) studied

Cancer pain

Interventions

An intrathecal catheter is placed at the L4/5 or L3/4 level and the catheter is passed under fluoroscopic guidance to the T10 or T11 vertebral level. Then, a tunneled subcutaneous catheter plus a subcutaneous port, with an external infusion pump system were implanted.

240 patients with cancer pain were randomized and assigned into 2 equal groups:

1. Hydromorphone group (n = 120)
2. Morphine group (n = 120)

The duration of follow-up is 3 months post-treatment.

Intervention Type

Procedure/Surgery

Primary outcome measure

1. Pain after treatment, measured using the visual analogue score (VAS) every day during 3 months after treatment
2. Drug cost-effectiveness at 1, 2 and 3 months after treatment

Secondary outcome measures

1. The frequency, duration and degree of the flare pain everyday during 3 months after treatment
2. Intensity of anxiety experienced by patient. measured using the PHQ - 9 evaluation scale at 1, 2 and 3 months after treatment
3. Intensity of depression experienced by patient, measured by the GAD - 7 anxiety screening scale) at 1, 2 and 3 months after treatment
4. Quality of life measured by the quality of life score (SF - 36) at 1, 2 and 3 months after treatment

Overall study start date

01/12/2015

Completion date

31/12/2016

Eligibility**Key inclusion criteria**

Cancer pain

Participant type(s)

Patient

Age group

Adult

Sex

Both

Target number of participants

240

Key exclusion criteria

1. Researchers think that there is any reason can't include
2. IDDS procedure contraindications
3. Uncooperative and unable to finish the self evaluation (PHQ - 9, GAD - 7 and SF-36)
4. Spinal deformity, intolerance to operation
5. The central infection, severe systemic infection
6. The blood coagulation dysfunction; severe liver and kidney dysfunction
7. Patient who has a history of drug abuse

Date of first enrolment

01/12/2015

Date of final enrolment

30/12/2016

Locations

Countries of recruitment

China

Study participating centre

Pain Management Department, Xinhua Hospital affiliated to Medical School of Shanghai Jiaotong University

No 1995 Kongjiang Road

Shanghai

China

200092

Study participating centre

Pain Medicine Center, Nanjing Jinling Hospital,

No.305 Zhongshan East Road

Nanjing

China

210002

Study participating centre

Tiantan Hospital, Pain Department

No 6, West Tiantan Road

Dongcheng District

Beijing

China

100050

Study participating centre

Xijing Hospital, Pain Management Department

No 127, West Changle Road

Xi'an

China

710032

Study participating centre

The First Affiliated Hospital, China Medical University

Department of Pain Medicine

No 155North Nanjing Road
Heping District
Shenyang
China
110001

Study participating centre
The First Hospital affiliated to Medical School of Zhejiang University
Pain Management Department
NO 79Qingchun Road
Hangzhou
China
310003

Study participating centre
Gulou Hospital
Pain Management Department
No 321, Zhongshan Road
Nanjing
China
210008

Study participating centre
The People's Hospital of Qinghai Province
Pain Management Department
No.2, Gonghe Road
Xi'ning
China
810007

Study participating centre
The First Hospital affiliated to Chongqing Medical College
No 1, Youyi Road
Yuan jiaguang, Yu Zhong Distric
Chongqing
China
400016

Study participating centre
The 2nd affiliated Hospital of Kunming Medical College
Pain Management Department

No 1, Dian Mian Road.
Kunming
China
650000

Study participating centre
The Tenth Hospital affiliated to Tongji University
Department of Anesthesiology
No 301,Yanchang Road
Shanghai
China
200072

Study participating centre
Tumor Hospital of Hennan province
Department of Pain Medicine
No 127 Dongming Road
Zhengzhou
China
450008

Sponsor information

Organisation

Chinese association for the study of pain, the minimally invasive interventional group

Sponsor details

No 6, The West Tiantan Road
Chongwen district
Beijing
China
100050
+86 13361879260
marke72@sjtu.edu.cn

Sponsor type

Research organisation

ROR

<https://ror.org/03tygvc25>

Funder(s)

Funder type

Research organisation

Funder Name

Chinese association for the study of pain, the minimally invasive interventional group

Results and Publications

Publication and dissemination plan

The clinical trial will be finished at Mar 2017, and the paper will be finished and contributed to an appropriate journal in Jun 2017.

Intention to publish date

30/06/2017

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Data sharing statement to be made available at a later date