

# A comparison of carbetocin and oxytocin in prevention of uterine atony following emergency Caesarean section

<b>Submission date</b> 22/03/2010	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 07/04/2010	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 29/12/2020	<b>Condition category</b> Pregnancy and Childbirth	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N/A

# Study information

## Scientific Title

A double blind randomized comparison of carbetocin and oxytocin in prevention of uterine atony following emergency Caesarean section

## Study objectives

A single injection of carbetocin is as effective as oxytocin in preventing excessive intraoperative blood loss after caesarean section and less likely to need additional oxytocin for uterine atony or excessive bleeding.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

University Malaya Medical Centre Ethics Committee Board, Reference no : 678.18. Date of approval 17 September 2008

## Study design

Randomised double blind prospective single centre 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 the contact details below to request a patient information sheet

## Health condition(s) or problem(s) studied

Post delivery via emergency caesarean section

## Interventions

This is a randomised double blind study comparing Oxytocin and Carbetocin. For each of the study subjects, the kits containing each study drugs (which are identical) will be prepared according to the randomisation made so as to secure the blinding of the clinician as well as the patient. After the foetus and placenta has been delivered, 1 ml of the study drug as prepared in each kit will be administered intravenously through the subject's intravenous line with the help of the anaesthetic staff in charge.

## Intervention Type

Other

**Phase**

Not Specified

**Primary outcome measure**

Need for additional uterotonic intervention within 24 hours after LSCS to maintain the adequacy of uterine tone as judged by the attending surgeon and clinician.

**Secondary outcome measures**

1. Drop in haemoglobin and haematocrit level by 24 hours postoperatively
2. Total estimated blood loss
3. Vital signs
4. Side effects
5. Operating time
6. Need for blood transfusion

**Overall study start date**

15/12/2008

**Completion date**

15/12/2010

**Eligibility****Key inclusion criteria**

Women of 18 years or older with a term (more than 37 weeks period of gestation), singleton pregnancy who will be undergoing an emergency Lower Segment Caesarean Section (LSCS) under regional anaesthesia.

An emergency LSCS has been defined as an unplanned LSCS which is performed once labour has commenced or during the process of labour for any reasons indicated. Labour in this context has been defined as documented regular contractions with frequency of at least once in 10 minutes with cervical dilatation of 3cm and more.

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Sex**

Female

**Target number of participants**

600

**Total final enrolment**

547

**Key exclusion criteria**

1. Suspected or known coagulopathy
2. Hypersensitivity to the study drugs
3. History of heart disease including
  - 3.1. Cardiac arrhythmia
  - 3.2. Hypertension
  - 3.3. Evidence of liver, renal or endocrine diseases (other than gestational diabetes)
4. LSCS is done under general anaesthesia for any reason
5. Diagnosed placenta praevia
6. Placental abruption
7. Fibroid in pregnancy

**Date of first enrolment**

15/12/2008

**Date of final enrolment**

15/12/2010

**Locations****Countries of recruitment**

Malaysia

**Study participating centre**

Department of Obstetrics and Gynaecology, University Malaya Medical Center, Lembah Pantai  
Kuala Lumpur  
Malaysia  
59100

**Sponsor information****Organisation**

University Malaya Medical Centre (Malaysia)

**Sponsor details**

Department of Obstetrics and Gynaecology  
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**Sponsor type**

University/education

ROR

<https://ror.org/00vkrxq08>

## Funder(s)

### Funder type

University/education

### Funder Name

The University of Malaya (Malaysia) - research grant (ref: UMRG 108/09 HTM)

## Results and Publications

### Publication and dissemination plan

Not provided at time of registration

### Intention to publish date

### Individual participant data (IPD) sharing plan

### IPD sharing plan summary

Not provided at time of registration

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/03/2016	29/12/2020	Yes	No