

Randomised trial comparing the use of suction with underwater seal versus only an underwater seal applied to chest drains following lung resection

Submission date 29/09/2006	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 29/09/2006	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 15/02/2010	Condition category Surgery	<input type="checkbox"/> Individual participant data

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N0013145914

Study information

Scientific Title

Study objectives

Is there a difference between the two groups with respect to the three primary outcomes?

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Surgery: Lobectomy

Interventions

Chest drains connected to an underwater seal are routinely left in the chest cavity (pleural space) following lung resections. They provide a one way escape route for any air that might leak from the surface of the lung and for any fluid that might collect in the chest cavity. This helps to maintain a negative pressure in the pleural cavity and facilitates lung expansion. We propose to compare the duration of air leak following lung resection between two groups of prospectively randomised patients one of which will have suction applied to the underwater seal. We will record the time to the last air leak and then determine any statistically significant difference (if any) between the two groups.

Randomisation will be into two groups: 1. chest drain connected to water seal only 2. chest drain connected to water seal and wall suction applied to the water seal at 3 kPa. Suction started in the recovery room immediately after the operation.

Intervention Type

Procedure/Surgery

Phase

Not Specified

Primary outcome measure

1. Time to last bubble (air leak time)
2. Time to removal of drain
3. Time to discharge home

Secondary outcome measures

Not provided at time of registration

Overall study start date

01/06/2002

Completion date

01/06/2003

Eligibility**Key inclusion criteria**

Cases eligible to be included in the trial: all lobectomies, all wedges, all lung biopsies, all operations of pneumothorax.

Participant type(s)

Patient

Age group

Adult

Sex

Not Specified

Target number of participants

300

Key exclusion criteria

Lung volume reduction surgery and pneumonectomies.

Date of first enrolment

01/06/2002

Date of final enrolment

01/06/2003

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Cardiothoracic Surgery

London

United Kingdom

SE17EH

Sponsor information

Organisation

Record Provided by the NHSTCT Register - 2006 Update - Department of Health

Sponsor details

The Department of Health, Richmond House, 79 Whitehall

London

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Sponsor type

Government

Website

<http://www.dh.gov.uk/Home/fs/en>

Funder(s)

Funder type

Government

Funder Name

Guy's and St. Thomas' NHS Foundation Trust (UK), Own Account

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?
Results article	results	01/03/2005		Yes	No