

# Reduction of acute anterior shoulder dislocation with or without the use of articular lidocaine anaesthesia

**Submission date**  
03/04/2011

**Recruitment status**  
No longer recruiting

☐ Prospectively registered

☐ Protocol

**Registration date**  
26/04/2011

**Overall study status**  
Completed

☐ Statistical analysis plan

☒ Results

**Last Edited**  
27/09/2013

**Condition category**  
Injury, Occupational Diseases, Poisoning

☐ 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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### Contact details

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## Additional identifiers

### Protocol serial number

N/A

## Study information

### Scientific Title

Reduction of acute anterior shoulder dislocation with or without the use of articular lidocaine anaesthesia: a prospective randomised controlled trial

**Study objectives**

The intra-articular lidocaine could reduce pain for treatment of shoulder dislocation.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Hospital Sao Paulo Research Ethics Committee (Cpmitê de Ética em Pesquisa Hospital São Paulo) approved on 08/08/2008 (ref: CEP 1019/08)

**Study design**

Prospective randomised controlled trial

**Primary study design**

Interventional

**Study type(s)**

Treatment

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

Anterior shoulder dislocation

**Interventions**

After fulfilling the study inclusion and exclusion criteria, each patient received a sequential registration number and a sealed, opaque envelope marked with the number corresponding to their registration. The envelope contained information regarding the treatment method that was randomly assigned to the patients registration number. The attending physician led the patient to a waiting room where after the door was closed and the envelope was opened, either intra-articular lidocaine injection was applied or no treatment was given in accordance to the method disclosed. In both cases, the anatomical region of the arm corresponding to the application of intra-articular anaesthetic was covered with dressings to mask whether or not the intervention had been performed. Whether or not the patients underwent the intervention, all patients were placed supine on a stretcher with the affected shoulder at 60° abduction. The pull maneuver and counter-traction were performed with a bedsheet placed under their armpit.

**Intervention Type**

Drug

**Phase**

Not Applicable

**Drug/device/biological/vaccine name(s)**

Lidocaine

**Primary outcome(s)**

Pain was assessed through the application of a visual analogue scale at the time of pre reduction, and 1 and 5 minutes after the reduction maneuver was performed

**Key secondary outcome(s))**

1. The time span to achieve shoulder joint reduction in minutes
2. Neurological, vascular and infectious complications
3. Occurrence of failures were also assessed (defined as unsuccessful reduction after a 10-minute attempt). After 5 minutes, two other physicians were called to perform the reduction maneuver. Both were blinded to which treatment the patient had received.

**Completion date**

31/12/2009

## Eligibility

**Key inclusion criteria**

All patients with acute anterior shoulder dislocation who were treated at the Emergency Room of Hospital Sao Paulo were included in the study.

The diagnostic criteria used were clinical findings:

1. Shoulder deformity
2. Acute pain and disability for active and passive mobility of the shoulder
3. Radiographic findings showing total loss of articular congruity between the humeral head and glenoid cavity, as evidenced by frontal, profile and axillary shoulder radiographs

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Sex**

All

**Key exclusion criteria**

1. Patients who were diagnosed with fracture-dislocation of the shoulder joint, except those with Hill-Sachs lesions, were disqualified
2. Patients with immature skeletons (open physis), who underwent surgery, or had previous fractures in the affected shoulder
3. Patients in whom the use of lidocaine is contraindicated
4. Those who refused to sign the consent form

**Date of first enrolment**

01/09/2008

**Date of final enrolment**

31/12/2009

## Locations

**Countries of recruitment**

Brazil

**Study participating centre**  
Rua das Rosas 126 apto 73  
São Paulo  
Brazil  
04048-000

## Sponsor information

**Organisation**  
Federal University of Sao Paulo (Universidade Federal de São Paulo) (Brazil)

**ROR**  
<https://ror.org/02k5swt12>

## Funder(s)

**Funder type**  
Hospital/treatment centre

**Funder Name**  
Hospital Sao Paulo (Brazil)

## Results and Publications

**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	01/10/2012		Yes	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes