# Videolaryngoscopy results in less forces exerted on the upper teeth during intubation compared to direct laryngoscopy

Submission date 26/09/2010	<b>Recruitment status</b> No longer recruiting	[X] Prospectively registered
		[_] Protocol
Registration date	Overall study status	[] Statistical analysis plan
29/10/2010	Completed	[_] Results
Last Edited 29/10/2010	<b>Condition category</b> Surgery	Individual participant data
		[] Record updated in last year

### Plain English summary of protocol

Not provided at time of registration

### Contact information

Type(s) Scientific

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### **Contact details**

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers N/A

## Study information

#### Scientific Title

Videolaryngoscopy results in less forces exerted on the upper teeth during intubation compared to direct laryngoscopy: a single centre randomised controlled cross-over study

#### Study objectives

Three videolaryngoscopes (McGrath, C-Mac and Glidescope Cobalt) exert reduced forces on both upper and lower teeth, compared to a classic Macintosh laryngoscope blade.

**Ethics approval required** Old ethics approval format

**Ethics approval(s)** Catharina Hospital Eindhoven (Netherlands)

**Study design** Single centre randomised controlled cross-over 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

Intubation technique

#### Interventions

After three minutes of oxygen administration via facemask, intravenous (iv) induction of general anesthesia (1 µg/kg fentanyl, 3 mg/kg propofol and 0.7 mg/kg rocuronium) the following interventions will be performed:

Direct laryngoscopy: 1. Macintosh classic laryngoscope (blade III)

Indirect laryngoscopy with one of three indirect videolaryngoscopes:

- 1. McGrath (Aircraft Medical, Edinburgh, UK)
- 2. C-MAC (Karl Storz, Tuttlingen, Germany)
- 3. Glidescope Cobalt (Verathon, Bothell, WA, USA)

Intubation: endotracheal tube 7.5 mm (female) or 8.0 mm (male). After two unsuccessful attempts a stylet will be inserted into the endotracheal tube.

### Intervention Type

Procedure/Surgery

**Phase** Not Applicable

#### Primary outcome measure

Differences between direct and indirect laryngoscopies with respect to the frequency with which forces are applied on the upper and lower teeth. The measurement of forces will be performed with Flexiforce (r) sensors (A201-25, Tekscan, MA) fixed to the blade of the laryngoscope at the possible area of contact with the teeth.

#### Secondary outcome measures

For the cases in which forces are being applied, differs the magnitude of forces between the laryngoscopes?

Overall study start date

01/11/2010

### Completion date

01/01/2011

## Eligibility

#### Key inclusion criteria

- 1. American Society of Anaesthesiologists (ASA) grade I II
- 2. Normal airway
- 3. Undergoing a surgical intervention for which endotracheal intubation is indicated
- 4. Aged 18 years or above, either sex

Participant type(s)

Patient

**Age group** Adult

**Lower age limit** 18 Years

**Sex** Both

Target number of participants 150

#### Key exclusion criteria

1. Younger than 18 years

- 2. Patients requiring more than blade size III of laryngoscope
- 3. Patients with pre-operative predictors of a difficult airway (Mallampati score IV, thyromental

distance less than 65 mm, interincisor/interdental distance less than 35 mm) 4. Patients with inadequate neck movement 5. ASA III - IV 6. Patients requiring surgery of the face and throat

**Date of first enrolment** 01/11/2010

Date of final enrolment 01/01/2011

### Locations

**Countries of recruitment** Netherlands

**Study participating centre P. Debyelaan 25** Maastricht Netherlands 6229 HX

### Sponsor information

**Organisation** Catharina Hospital Eindhoven (Netherlands)

**Sponsor details** Department of Anesthesiology, ICU and Pain Therapy Michelangelolaan 2 Eindhoven Netherlands 5623 EJ

**Sponsor type** Hospital/treatment centre

ROR https://ror.org/01qavk531

## Funder(s)

Funder type

#### Funder Name

Catharina Hospital Eindhoven (Netherlands) - Department of Anesthesiology, ICU and Pain Therapy

### **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