# Post operative pain control after abdominal gynaecological surgery using pump-releasing local anaesthetic for 24 hours continuously

	Prospectively registered
No longer recruiting	☐ Protocol
Overall study status	Statistical analysis plan
Completed	Results
Condition category	Individual participant data
Signs and Symptoms	Record updated in last year
	Completed  Condition category

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Mr Philip Reginald

#### Contact details

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# Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

Secondary identifying numbers

# Study information

## Scientific Title

Post operative pain control after abdominal gynaecological surgery using pump-releasing local anaesthetic for 24 hours continuously: a prospective, double-blind, randomised, placebocontrolled study

## Study objectives

To evaluate whether administering local anaesthetic to the wound area using an infiltration catheter, with a pump releasing system, for 24 hours following surgery will reduce the amount of post operative pain experienced by patients, their opioid consumption and subsequent delayed gastric emptying.

# 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

Not available in web format, please use the contact details below to request a patient information sheet

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

Signs and Symptoms: Pain

#### **Interventions**

The surgery will be performed under general anaesthetic induced with fentanyl and propofol. Vecuronium will be administered to facilitate tracheal intubation and for neuromuscular block during surgery. Diclofenac 100 mg will be administered per rectum at the end of the operation. Before the wound is closed a single infiltration catheter which is 1.2 mm in diameter with 90 side holes will be placed between the rectus sheath and subcutaneous layer along the transverse incision. Following the operation patients will be randomised into either an experimental or

placebo controlled group using computer generated random numbers. Those in the experimental group will receive marcain 0.5% every 4 hours for 24 hours through the catheter. The placebo controlled group will receive Na-Saline in the same regime. Post-operatively, if patients complain of pain or ask for analgesics morphine will be administered and recorded using a PCA (patient controlled analgesia) device. The patients' pain will be assessed 4, 8, 12, 24, 36, 48 and 72 hours post operatively, at rest during coughing and when mobilising from supine to sitting position in bed. Gastric emptying will also be monitored. Any complication including wound infection will be recorded.

## Intervention Type

Other

## Phase

**Not Specified** 

## Primary outcome measure

- 1. Post operative pain at 4, 8, 12, 24, 36, 48 and 72 hours while at rest, coughing and mobilising from supine to sitting position in bed, assessed using a 10 point visual analogue scale.
- 2. Gastric emptying will be recorded on a trial sheet.
- 3. Opioid consumption will be recorded using the Patient Controlled Analgesia device and included on the trial sheet for 3 days post op.

## Secondary outcome measures

Not provided at time of registration

## Overall study start date

01/03/2002

## Completion date

01/05/2003

# **Eligibility**

## Key inclusion criteria

80 women aged 30 to 70 years undergoing elective gynaecological surgery performed through a transverse incision in the lower abdomen.

## Participant type(s)

**Patient** 

#### Age group

Adult

#### Sex

Female

## Target number of participants

80

## Key exclusion criteria

- 1. Patients with a known allergy to morphine, fentanyl, propofol, vecuronium, diclofenac or marcain.
- 2. Regular medication with opioids for the last 6 months.
- 3. Body mass index (BMI) greater or equal to 32.
- 4. Previous major surgery during the last 6 months.

## Date of first enrolment

01/03/2002

## Date of final enrolment

01/05/2003

# Locations

## Countries of recruitment

England

**United Kingdom** 

# Study participating centre Heatherwood and Wexham Park Hospitals NHS Trust

Slough United Kingdom SL2 4HL

# Sponsor information

# Organisation

Department of Health

## Sponsor details

Richmond House 79 Whitehall London United Kingdom SW1A 2NL

## Sponsor type

Government

## Website

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

# Funder(s)

## Funder type

Hospital/treatment centre

## Funder Name

Heatherwood and Wexham Park Hospitals NHS Trust (UK)

# **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