

Hyperbaric Oxygen for the Prevention of OsteoradioNecrosis

Submission date 21/05/2008	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 13/06/2008	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 18/11/2016	Condition category Injury, Occupational Diseases, Poisoning	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

Plain English summary of protocol

<http://www.cancerhelp.org.uk/trials/a-study-looking-at-a-treatment-to-prevent-jaw-bone-damage-in-head-and-neck-cancer>

Contact information

Type(s)

Scientific

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Additional identifiers

Protocol serial number

2

Study information

Scientific Title

A randomised controlled trial of hyperbaric oxygen to prevent osteoradionecrosis of the irradiated mandible

Acronym

HOPON

Study objectives

The aim of this study is to determine the benefit of hyperbaric oxygen (HBO) in the prevention of osteoradionecrosis (ORN) subsequent to a surgical procedure in the "at risk" irradiated mandible. This study is designed as a randomised control multi-centre feasibility study.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Central Manchester Research Ethics Committee on 28/04/2008 (ref: 08/H1008/32)

Study design

Multicentre randomised controlled trial

Primary study design

Interventional

Study type(s)

Prevention

Health condition(s) or problem(s) studied

Osteoradionecrosis subsequent to a surgical procedure in an irradiated mandible

Interventions

Arm 1: Standard management:

1. Pre- and post-operative chlorohexidine 1 mouthwash 0.2% - use 10 ml (i.e. one capful) washed around the mouth for around 1 minute and spat out, three times daily for 5 days post-operatively.

1.1. In case of chlorohexidine allergy use warm salt mouthwash at 1 teaspoon per cup of warm water.

2. Oral antibiotics: amoxicillin 3 g oral 1 hour pre-operatively (or 1 g intravenously), and 250 mg three times a day (tds) x 5 days post-operatively

2.1. In penicillin allergy: Orally either 600 mg tablet, or same dose of 75 mg/5 ml suspension if tablets not tolerated, 1 hour pre-operatively or intravenously 600 mg at time of surgery, and 200 mg metronidazole (patients should be warned of interaction between alcohol and metronidazole) tds x 5 days post-operatively

Arm 2: Standard management plus HBO

Patients will undergo 20 HBO treatments prior to surgery followed by a further 10 HBO treatments. HBO will comply with dive table RN66. For each HBO treatment, patients are compressed to 2.4 ata while sitting in an appropriate British Hyperbaric Association recognised hyperbaric chamber. Patients breathe 100% oxygen at pressure via a transparent hood. The total time at 2.4 ata is 90 minutes. During the final 10 minutes of oxygen breathing, the chamber is depressurised to ambient atmospheric pressure at a linear rate (14.3 kpa/min).

3. All participants will be operated with a minimally traumatic surgical technique after the standard management with or without HBO.

Intervention Type

Other

Phase

Phase III

Primary outcome(s)

Mucosal healing and/or the presence of necrotic bone at 6 months following surgery, measured by the following:

1. Clinical assessment in centre
2. Clinical photograph with in-photograph ruler
3. Radiographic using orthopantomogram (OPT)

The primary outcome will be based on a blinded assessment of anonymised clinical photograph and radiograph by a central committee consisting of experienced clinicians in the field.

Key secondary outcome(s)

1. Mucosal healing at 3 months following surgery (measured as at 6 months following surgery)
2. Severity of cases of diagnosed osteoradionecrosis, with clinical and radiographic recordings of severity made according to the following:
 - 2.1. Grade I: ORN confined to alveolar bone
 - 2.2. Grade II: ORN limited to the alveolar bone and/or mandible above the level of inferior alveolar canal
 - 2.3. Grade III: ORN involving the mandible below the level of inferior alveolar canal and ORN with a skin fistula and/or pathologic fracture
3. Pain: patient questionnaire at 3 and 6 months
4. Quality of life (QoL): prior to randomisation but following consent, and at 3 and 6 months (as determined by a modified University of Washington)
5. Head and Neck QoL questionnaire (modified) at baseline, 3 and 6 months
6. Adverse events in HBO arm related to hyperbaric oxygen treatment, monitored throughout trial
7. Admissions, operations, complications (e.g. major bleeding, sepsis), monitored throughout trial
8. Mortality. Patients will be followed up until death or 6 months.
9. Implant retention (where appropriate) and outcomes of ORN (where appropriate) at 12 and 24 months following surgery

Completion date

31/05/2014

Eligibility

Key inclusion criteria

1. Both males and females, age >18 years
2. Prior history of external beam radiotherapy (dose >50 Gy) to mandible or prior history of brachytherapy with equivalent radiation dose as above
3. No evidence of cancer recurrence
4. Condition requiring surgery to mandible (commonest examples but not limited to: dental

extraction, implant placement, surgical tooth, cyst or osteosynthesis plate removal)
5. Patient has read and understood information leaflet and is willing to be randomised
6. Patient competent to consent and psychologically/ physically fit for HBO

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. Known contraindications to HBO:

1.1. Lung disease: Severe chronic obstructive airways disease; bullous lung disease, acute or chronic pulmonary infection; uncontrolled asthma, untreated pneumothorax

12. Middle ear disease (such as previous middle ear operations, eustachian tube dysfunction or recurrent attacks of vertigo) that proves refractory to simple interventions such as grommet insertion

2. Prior hyperbaric oxygen therapy

3. Prior diagnosis of osteoradionecrosis of the mandible

4. Previous surgery for osteoradionecrosis

5. Any history of systemic bisphosphonate therapy, pentoxifylline or tocopherol

6. Pregnancy

Date of first enrolment

01/06/2008

Date of final enrolment

31/05/2014

Locations**Countries of recruitment**

United Kingdom

England

Study participating centre

Regional Maxillofacial Unit
Liverpool
United Kingdom
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Sponsor information

Organisation

University of Liverpool (UK)

ROR

<https://ror.org/04xs57h96>

Funder(s)

Funder type

Charity

Funder Name

Cancer Research UK (ref: C23033/A9397)

Alternative Name(s)

CR_UK, Cancer Research UK - London, Cancer Research UK (CRUK), CRUK

Funding Body Type

Private sector organisation

Funding Body Subtype

Other non-profit organizations

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Study outputs

Output type

Details

Date created Date added Peer reviewed? Patient-facing?

Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Study website	Study website	11/11/2025	11/11/2025	No	Yes