# The effect of acupressure of PC6 on postoperative nausea and vomiting (PONV) after hysterectomy

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
20/12/2013		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
24/01/2014	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
10/05/2021	Surgery			

## Plain English summary of protocol

Background and study aims

Hysterectomy is the surgical removal of the uterus and is the most common major gynaecological surgery worldwide. In Denmark about 5,000 hysterectomies are performed annually. There are many reasons for hysterectomy. Regardless of the condition hysterectomy is usually performed due to a benign disorder such as irregular bleeding, benign growths, pain and bulging of the uterus. The surgery is performed to improve women's quality of life and can be performed through the abdominal cavity as a keyhole surgery or through the vagina. Many women who have their uterus removed by surgical procedure experience nausea and/or vomiting after surgery [postoperative nausea and vomiting (PONV)]. The reason why women who undergo gynaecological surgery have more PONV than those undergoing other kinds of operations is yet not fully understood. However, it is clear that many things come into play, and that efforts to prevent and treat PONV are to be deployed from multiple sides. This study aims to find out the effectiveness of stimulating the acupressure point PC6 on the patients experience of PONV on the first day after the operation.

## Who can participate?

Participants must be aged 18 or over and have been referred to have a laparoscopic or vaginal hysterectomy on a benign indication.

## What does the study involve?

Participants will be randomly allocated to the intervention or the control group. The participants in the intervention group will get a Sea-Band bracelet on each arm. The bracelets will be placed on the arms about one hour before surgery and will be removed 24 hours after surgery. The bracelets will be placed so they stimulate the acupuncture point PC6. The control group will receive the usual treatment for PONV. Both groups will complete a diary during hospitalization.

# What are the possible benefits and risks of participating?

The possible benefits of participating in this study are a lower intensity of nausea and vomiting. Participation in this study is not believed to have any risks. The Sea-Band may cause minor discomfort, such as itching, minor swelling or pain. The Sea-Band can be removed from the arms

for half an hour should this occur. Extra time spent at the consultation and completing the diary is considered to be of minor inconvenience.

Where is the study run from?

The study is run from the Research and Gynecological units at Horsens Regional Hospital, Denmark.

When is the study starting and how long is it expected to run for? The study started in November 2013 and is expected to run until February 2015.

Who is funding the study?

The study is funded by the Horsens Regional Hospital (Denmark) and Sea-Band Denmark (Denmark).

Who is the main contact? Mrs Hrønn Thorn johtho@rm.dk

# **Contact information**

#### Type(s)

Scientific

#### Contact name

Mrs Hrønn Thorn

#### Contact details

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# Additional identifiers

Protocol serial number 39487

# Study information

#### Scientific Title

Peroperative acupressure: Effectiveness on postoperative nausea and vomiting - a randomized clinical trial among women with hysterectomy of benign indication

# **Study objectives**

Women who have had their uterus removed by a surgical procedure experience more postoperative nausea and vomiting than other surgical patients. It is well-known that stimulation of PC 6 can have a positive effect on PONV. There are studies indicating that

especially gynecological patients experience a reduction in PONV. We propose to carry out a fully randomized clinical trial exploring the benefits of stimulating PC6 with Sea-Band, from about one hour before the surgical procedure and the next 24 hours.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

The scientific committees of Central Denmark Region, 17/10/2013

#### Study design

Single-center randomized controlled trial

#### Primary study design

Interventional

#### Study type(s)

Treatment

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

Hysterecomy of benign indication

#### **Interventions**

Patients are randomized to two groups:

1. Intervention group: in addition to the usual nausea treatment, women get a Sea-Band placed on each arm, so that PC6 is stimulated. The Sea-Band bracelets are placed by nurses who have completed the course "Acupuncture treatment of hyper emesis and postoperative nausea and vomiting". The Sea-Bands are maintained for 24 hours postoperatively. In case of discomfort, the Sea-Band may be removed for half an hour, and placed back on the arms by a nurse. The number and time will be registered in the diary by the participant.

2. Control group: usual treatment

# Intervention Type

Procedure/Surgery

#### Phase

Not Applicable

## Primary outcome(s)

Nausea is measured on a Visual Analog Scale (VAS). Measurements will be performed three times at baseline, i.e. 2 and 6 hours postoperatively and at 10 am on the first postoperative day

# Key secondary outcome(s))

- 1. Occurrence of vomiting (measured at baseline, questionnaire)
- 2. Quantity of required antiemetic (measured at baseline, patient record)
- 3. Time to first dose of required antiemetic (measured at baseline, patient record)
- 4. Diet and fluid intake (measured at baseline, questionnaire)
- 5. Pain score measured on a VAS (measurement will be performed at 2 and 6 hours postoperatively and at 10 am on the first postoperative day, questionnaire)
- 6. Quantity of required analgesics (measured at baseline, patient record)
- 7. Time to first required analgesics (measured at baseline, patient record)

- 8. Time to first mobilization (measured at baseline, questionnaire)
- 9. Postoperative hospital stay (measured at baseline, questionnaire)

#### Completion date

31/01/2015

# **Eligibility**

#### Key inclusion criteria

- 1. Aged 18 or over
- 2. Referred to laparoscopic or vaginal hysterectomy
- 3. Read and understand Danish
- 4. Informed written consent and authorization given

## Participant type(s)

**Patient** 

#### Healthy volunteers allowed

No

#### Age group

Adult

#### Lower age limit

18 years

#### Sex

Female

#### Total final enrolment

72

#### Key exclusion criteria

- 1. Carpal tunnel syndrome
- 2. Diabetes
- 3. Nausea and vomiting preoperatively
- 4. Lymph edema
- 5. Skin diseases or wounds on the wrists
- 6. Body Mass Index (BMI) above 35

#### Date of first enrolment

01/11/2013

#### Date of final enrolment

31/01/2015

# Locations

#### Countries of recruitment

Denmark

# Study participating centre Kvindeafdelingen Horsens Denmark 8700

# Sponsor information

#### Organisation

Horsens Regional Hospital (Denmark)

#### **ROR**

https://ror.org/021dmtc66

# Funder(s)

## Funder type

Hospital/treatment centre

#### **Funder Name**

Horsens Regional Hospital (Denmark)

#### **Funder Name**

Sea-Band Denmark (Denmark) - provides us with free bands on request

# **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? 29/05/2020 No Abstract results No Participant information sheet 11/11/2025 11/11/2025 No

Participant information sheet

Yes