

# Spinal anaesthesia or general anaesthesia for anorectal surgery

<b>Submission date</b> 03/12/2007	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 20/03/2008	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 05/01/2010	<b>Condition category</b> Surgery	<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

**Secondary identifying numbers**  
N/A

## Study information

**Scientific Title**

Comparison of spinal anaesthesia with 1.0 mL hyperbaric bupivacaine 0.5% and total intravenous anaesthesia for minor anorectal surgery

**Study objectives**

Minor anorectal surgery can be performed with several anaesthesia techniques. Due to multiple irrational fears, many patients deny a spinal anaesthesia and prefer a general anaesthesia. In this study we evaluate the practicability, patients' acceptability and analgetic consumption for both anaesthesia techniques in patients undergoing minor anorectal surgery.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Ethics approval received from the local medical ethics committee (Medizinische Ethikkommission II Anschrift: Medizinische Ethik-Kommission II) on the 24th May 2007 (ref: 2007-085N-MA).

**Study design**

Single-centre, randomised controlled trial

**Primary study design**

Interventional

**Secondary study design**

Randomised controlled trial

**Study setting(s)**

Hospital

**Study type(s)**

Treatment

**Participant information sheet****Health condition(s) or problem(s) studied**

Minor anorectal surgery

**Interventions**

Patients with anorectal surgery are 1:1 randomised to either a spinal anaesthesia or a general anaesthesia. All patients received either:

1. A spinal anaesthesia with 1.0 mL hyperbaric bupivacaine 0.5% or
2. A total intravenous anaesthesia with:
  - 2.1. 0.2 mg fentanyl and 2 mg propofol 1% per kg body weight for induction
  - 2.2. Propofol 1% in a perfusion pump for the duration of anaesthesia, dosage depending on the demands of the patient
  - 2.3. A laryngeal mask (size depending on the body weight of the patient)

**Intervention Type**

Drug

**Phase**

Not Specified

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

Fentanyl, propofol, bupivacaine

**Primary outcome measure**

Recovery room time, measured on day of surgery.

**Secondary outcome measures**

Consumption of analgetics in the first 24 hours, measured 48 hours after surgery.

**Overall study start date**

01/09/2007

**Completion date**

01/02/2008

**Eligibility****Key inclusion criteria**

1. Patients (male/female) with minor anorectal surgery
2. Operation in jack knife position
3. Age: 18 - 75 years
4. American Society of Anaesthesiologists (ASA) grade I - II
5. No contra-indication against spinal anaesthesia or general anaesthesia

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Sex**

Both

**Target number of participants**

200

**Key exclusion criteria**

1. Contra-indications against spinal anaesthesia or general anaesthesia
2. Operations in prone position
3. Allergy against diclofenac

**Date of first enrolment**

01/09/2007

**Date of final enrolment**

01/02/2008

## Locations

**Countries of recruitment**

Germany

**Study participating centre**

Clinic of Anaesthesiology and Critical Care Medicine

Mannheim

Germany

68167

## Sponsor information

**Organisation**

University Hospital Mannheim (Germany)

**Sponsor details**

Clinic of Anaesthesiology and Critical Care Medicine

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**Sponsor type**

Hospital/treatment centre

**ROR**

<https://ror.org/05sxbyd35>

## Funder(s)

**Funder type**

Other

**Funder Name**

Investigator initiated and funded (Germany)

# 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

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/01/2010		Yes	No