

# How effective is Ametop 4% gel, before a venipuncture, at reducing procedural pain in infants: a randomized placebo-controlled trial

<b>Submission date</b> 29/07/2005	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 04/11/2005	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
<b>Last Edited</b> 27/10/2022	<b>Condition category</b> Signs and Symptoms	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

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## Additional identifiers

### Protocol serial number

BL 002

## Study information

### Scientific Title

How effective is Ametop 4% gel, before a venipuncture, at reducing procedural pain in infants: a randomized placebo-controlled trial

**Study objectives**

Amethocaine 4% gel applied before a venipuncture in newborn infants will safely and significantly decrease procedural pain

**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

**Study type(s)**

Treatment

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

Procedural pain

**Interventions**

Ametop (amethocaine) 4% gel versus placebo, 1.5 g applied to skin for 30 minutes prior to the venipuncture

**Intervention Type**

Drug

**Phase**

Not Specified

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

Ametop (amethocaine, tetracaine hydrochloride) 4% gel

**Primary outcome(s)**

Premature Infant Pain Profile (PIPP) score in the first minute after skin puncture

**Key secondary outcome(s)**

1. PIPP scores during the first, second, third and fourth minute post-skin puncture
2. Mean heart rate in beats per minute, mean respiratory rate per minute, mean blood pressure in mm Hg and mean O2 saturation in % at the end of baseline, 1 minute after skin puncture then 2, 3, 4, 5 and 10 minutes after skin puncture
3. Duration of cry, from skin puncture to recovery
4. Ease of procedure, as reflected by the mean number of attempts required to obtain the bloodwork, the success rate at obtaining the bloodwork and subjective measure of easiness on a scale of 1 to 5 (1 being very easy and 5 very hard)

The safety of amethocaine was assessed using the following data: local skin reaction (redness, edema), complete blood count and differential (pre and post intervention), aspartate

aminotransferase (AST) and ALT (pre and post intervention), and creatinine levels (post intervention). All infants' vital signs were monitored throughout and after the intervention and any significant event (apnea/bradycardia, sustained bradycardia or tachycardia, sustained desaturation requiring intervention) was recorded.

**Completion date**

30/12/2004

## Eligibility

**Key inclusion criteria**

1. Born at >24 weeks gestation
2. Skin considered in good condition (no burns or rash)
3. If <27 weeks gestation, at least 48 hours of life
4. Considered stable by the treating neonatologist

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Neonate

**Sex**

All

**Total final enrolment**

142

**Key exclusion criteria**

1. Skin considered immature (insensible water losses requiring more fluids than usual for gestation)
2. Suspected or proven significant central nervous system anomaly
3. Receiving opioids or sedatives at time of venipuncture or in the previous 12 hours or receiving muscle relaxants
4. Facial anomalies (cleft lip/palate, Moebius syndrome) preventing typical facial expression of pain
5. Sub optimal hepatic function (alanine aminotransferase [ALT] >2 x upper normal limit) or sub optimal renal function (urine output <1 ml/kg/hour in the last 12 hours)

**Date of first enrolment**

03/01/2003

**Date of final enrolment**

30/12/2004

## Locations

## Countries of recruitment

Canada

## Study participating centre

401 Smyth Road

Ottawa

Canada

K1H 8L1

## Sponsor information

### Organisation

Children's Hospital of Eastern Ontario Research Institute (Canada)

### ROR

<https://ror.org/05nsbhw27>

## Funder(s)

### Funder type

Hospital/treatment centre

### Funder Name

Physicians Services Incorporated (#02-39) and Children's Hospital of Eastern Ontario Research Institute

## Results and Publications

### Individual participant data (IPD) sharing plan

Not provided at time of registration

### 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>		08/02/2007	27/10/2022	Yes	No