

Comparison of oral and nasogastric (n/g) rehydration in childhood gastroenteritis

Submission date 12/09/2003	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 12/09/2003	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
Last Edited 12/12/2014	Condition category Digestive System	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

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
N0515122182

Study information

Scientific Title

Comparison of oral and nasogastric (n/g) rehydration in childhood gastroenteritis

Study objectives

Hypothesis: The World Health Organisation has published guidelines for use of oral rehydration solution (ORS) in childhood gastroenteritis. The solution can be administered by mouth or via nasogastric (n/g) tube. We hypothesise that oral administration, which is successful in the developing world, will not be effective in the UK. The comparison of the two methods has not been tested in a developed world setting.

Value: Determine the most effective and best tolerated method of rehydration which may reduce hospital admissions.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised open 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

Digestive System: Gastroenteritis

Interventions

Following an initial 30 min assessment all children who had not successfully taken and tolerated 10 ml/kg oral rehydration solution (ORS) would be approached for trial entry. Parents will be consented by research nurse/PACU registrar. Children would have a baseline set of observations, and clinical assessment of dehydration (according to American Academy of Paediatrics protocol). Standard history taking and examination will be carried out.

Randomisation to oral or n/g group done by pre-prepared packs with sealed, opaque envelopes.

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

The main outcome measure is percentage weight gain at 4 h from the onset of rehydration

Secondary outcome measures

1. Failure of rehydration, defined as follows:

1.1 n/g group: failure to pass n/g after three attempts or vomiting of n/g tube on more than one occasion OR

1.2 Oral group: patient failed to take 80% of expected volume at 2 h or >three vomits from hour

2. Parental satisfaction questionnaires

Overall study start date

01/12/2002

Completion date

31/03/2007

Eligibility

Key inclusion criteria

Patients aged 3 months to 5 years.

Participant type(s)

Patient

Age group

Child

Lower age limit

3 Months

Upper age limit

5 Years

Sex

Not Specified

Target number of participants

88 patients in total, 44 in each group

Key exclusion criteria

Not provided at time of registration

Date of first enrolment

01/12/2002

Date of final enrolment

31/03/2007

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

North West London Hospitals NHS Trust

Harrow

United Kingdom

HA1 3UJ

Sponsor information

Organisation

Department of Health (UK)

Sponsor details

Richmond House

79 Whitehall

London

United Kingdom

SW1A 2NL

Sponsor type

Government

Website

<http://www.doh.gov.uk>

Funder(s)

Funder type

Hospital/treatment centre

Funder Name

North West London 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