Metoclopramide versus prochlorperazine for hyperemesis gravidarum

Submission date	Recruitment status	Prospectively registered
13/11/2009	No longer recruiting	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
17/02/2011	Completed	Results
Last Edited	Condition category	Individual participant data
17/02/2011	Pregnancy and Childbirth	Record updated in last year

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

Prof Peng Chiong Tan

Contact details

Department of Obstetrics and Gynaecology Faculty of Medicine University of Malaya Lembah Pantai Kuala Lumpur Malaysia 50603

Additional identifiers

Protocol serial number

732.20

Study information

Scientific Title

Metoclopramide versus prochlorperazine for hyperemesis gravidarum: a double blind randomised trial

Acronym

MetPro Trial

Study objectives

Prochlorperazine is as effective as metoclopramide for hyperemesis gravidarum.

Ethics approval required

Old ethics approval format

Ethics approval(s)

University of Malaya Medical Centre Medical Ethics Committee approved on the 31st July 2009

Study design

Double blind randomised trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Hyperemesis gravidarum

Interventions

Metoclopramide (10 mg) or prochlorperazine (12.5 mg) intravenously 8-hourly for 24 hours.

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Prochlorperazine, metoclopramide

Primary outcome(s)

- 1. Satisfaction score at 24 hours using a self-administered 10 point visual numerical rating scale (VNRS)
- 2. Frequency of vomiting during the 24 hours study period

Key secondary outcome(s))

- 1. Nausea scores measured using a 10 point VNRS at enrolment, 8 hours, 16 hours and 24 hours
- 2. Ketonuria status at the end of study period
- 3. Addition or change of anti-emetic required during the study period
- 4. Admission to discharge interval
- 5. Time to discontinuation of IV fluids
- 6. Time to discontinuation of IV anti-emetics
- 7. Any adverse events
- 8. Self administered side effects profile at end of study period symptoms of:

- 8.1. Drowsiness
- 8.2. Inability to sleep
- 8.3. Dry mouth
- 8.4. Dizziness
- 8.5. Diarrhoea
- 8.6. Headache
- 8.7. Palpitations
- 8.8. Uncontrollable movements or muscle spasms
- 8.9. Rash

Completion date

05/11/2010

Eligibility

Key inclusion criteria

- 1. Females aged over 16 years
- 2. First hospitalisation for hypermesis gravidarum in current pregnancy
- 3. Gestation less than 20 weeks
- 4. Clinically dehydrated with ketonuria

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

Female

Key exclusion criteria

- 1. Multiple gestation
- 2. Proven non viable pregnancy
- 3. Pre-existing medical condition that can cause nausea and vomiting, e.g.:
- 3.1. Concomitant confounders of severity of nausea and vomiting, e.g., culture proven symptomatic urinary tract infection, dengue fever
- 3.2. Gastrointestinal causes of vomiting, e.g., gastro-enteritis
- 3.3. Medical causes of vomiting e.g. diabetic ketoacidosis
- 3.4. Allergies to metoclopramide or prochlorperazine

Date of first enrolment

06/11/2009

Date of final enrolment

05/11/2010

Locations

Countries of recruitment

Malaysia

Study participating centre
Department of Obstetrics and Gynaecology

Kuala Lumpur Malaysia 50603

Sponsor information

Organisation

University of Malaya (Malaysia)

ROR

https://ror.org/00rzspn62

Funder(s)

Funder type

University/education

Funder Name

University of Malaya (Malaysia)

Alternative Name(s)

University of Malaya, University Malaya, Malayan University, King Edward VII College of Medicine, Raffles College, University of Malaya in Singapore, , , , UM

Funding Body Type

Government organisation

Funding Body Subtype

Universities (academic only)

Location

Malaysia

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 No Yes