

# Evaluation of effect of sedation on diagnostic cervical facet joint nerve blocks

**Submission date**  
27/09/2005

**Recruitment status**  
No longer recruiting

☐ Prospectively registered

☐ Protocol

**Registration date**  
17/11/2005

**Overall study status**  
Completed

☐ Statistical analysis plan

☒ Results

**Last Edited**  
02/10/2008

**Condition category**  
Musculoskeletal Diseases

☐ 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

Protocol #5

## Study information

### Scientific Title

### Study objectives

To demonstrate sedation has no effect on the validity of diagnostic cervical facet joint nerve blocks.

**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**

Chronic neck pain

**Interventions**

Intravenous injection of sodium chloride solution, midazolam, or fentanyl prior to cervical facet joint nerve blocks under fluoroscopy.

**Intervention Type**

Drug

**Phase**

Not Specified

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

Sodium chloride solution, midazolam and fentanyl

**Primary outcome(s)**

The administration of sedation with midazolam or fentanyl could be a confounding factor in the diagnosis of cervical facet joint pain in patients with chronic neck pain. However, if  $\geq 80\%$  pain relief with the ability to perform prior painful movements is used as the diagnostic standard, the effect of sedation on validity may be extremely low. In contrast, a significant number of patients may present as false-positives if  $\geq 50\%$  pain relief with ability to perform prior painful movements is used as the diagnostic criteria.

**Key secondary outcome(s)**

Prudent administration of midazolam only to patients who are not relaxed may not have significant adverse effect on the diagnostic validity of controlled comparative local anesthetic blocks. On the other hand, fentanyl could confound the diagnosis with false-positive results in a significant proportion of patients.

**Completion date**

30/04/2004

# Eligibility

## Key inclusion criteria

1. Subjects were between 18 and 90 years of age
2. Subjects had a history of chronic, function limiting, neck pain of at least 6 months duration
3. Subjects were able to give voluntary, written informed consent to participate in the investigation
4. Subjects who, in the opinion of the investigator, are able to understand the investigation, and /or cooperate with the investigational procedures
5. Subjects who had undergone diagnostic facet joint blocks and the diagnosis of cervical facet joint pain has been confirmed previously

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Adult

## Lower age limit

18 years

## Sex

All

## Key exclusion criteria

1. Subjects without cervical facet joint pain
2. Subjects with uncontrollable major depression or uncontrolled psychiatric disorders
3. Pregnant or lactating women
4. Subjects with multiple complaints involving multiple other problems with overlapping pain complaints
5. Subjects unable to achieve appropriate positioning and inability to understand informed consent and protocol
6. Subjects with a history of adverse reaction to either midazolam or fentanyl

## Date of first enrolment

02/02/2004

## Date of final enrolment

30/04/2004

# Locations

## Countries of recruitment

United States of America

**Study participating centre**  
2831 Lone Oak Road  
Paducah, KY  
United States of America  
42003

## Sponsor information

### Organisation

Ambulatory Surgery Center and Pain Management Center of Paducah (USA)

## Funder(s)

### Funder type

Hospital/treatment centre

### Funder Name

Ambulatory Surgery Center and Pain Management Center of Paducah (USA)

## 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?
<a href="#">Results article</a>	results	01/10/2004		Yes	No