

# Leakage of fluid around the bronchial cuffs of double lumen endobronchial tubes (DLEBT)

<b>Submission date</b> 30/09/2004	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 30/09/2004	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 07/01/2009	<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**  
N0054131773

# Study information

## Scientific Title

### Study objectives

To determine the incidence of fluid leakage past the bronchial cuff of double lumen endobronchial tubes and to investigate the effectiveness of gel lubrication in reducing fluid leakage past the bronchial cuff. Demonstration by fiberoptic bronchoscopy of dye leakage past the bronchial cuff of double lumen endobronchial tubes placed in patients undergoing right sided thoracic procedure in the lateral position.

An aspiration rate of 44% has been shown in patients receiving unlubricated double lumen endobronchial tubes. We consider a clinically important reduction would be a reduction of 50%. Assuming a baseline aspiration rate of 44%, a sample size of 55 per group will provide a study of 80% power to detect this difference with a 5% chance of error (one tailed). 55 patients per group, plus 5 per group to allow for data corruption i.e.  $(55+5) \times 2 = 120$  patients in total.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Not provided at time of registration

### Study design

Prospective randomised double blind trial

### Primary study design

Interventional

### Secondary study design

Randomised controlled trial

### Study setting(s)

Not specified

### Study type(s)

Not Specified

## Participant information sheet

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

Surgery: Thoracic

### Interventions

Adult patients scheduled to undergo a right thoracic procedure involving lung isolation will be randomly assigned to one of two groups.

One group will receive an unlubricated DLEBT and the other group will receive a DLEBT liberally lubricated with aqueous jelly. A left sided DLEBT will be used for a right sided procedure.

After placing the patients in a lateral position and confirming correct placement of the DLEBT

with a fiberoptic bronchoscope, both groups will receive 10 mg (1 ml) of methylthionium chloride (methylene blue) made up to 5 ml with normal saline placed above the bronchial cuff via an epidural catheter. At 30-minute intervals during the procedure and immediately prior to extubation, the endobronchial lumen will be aspirated and the aspirates examined by a blinded observer for staining. The same observer will then utilise a fiberoptic bronchoscope to examine the bronchial mucosa for blue staining.

**Intervention Type**

Procedure/Surgery

**Phase**

Not Specified

**Primary outcome measure**

Some patients develop acute respiratory distress syndrome (ARDS) after an uneventful pneumonectomy a condition termed post-pneumonectomy syndrome. The pathogenesis of this syndrome is poorly understood. An increase in hydrostatic pressure after lung removal is unlikely to be the sole cause in the majority of patients. Aspiration of infected material or gastric acid past the endobronchial cuff of an endobronchial tube may be a significant factor in the development of this syndrome. This study will demonstrate by fiberoptic bronchoscopy of dye leakage past the bronchial cuff of double lumen endobronchial tubes placed in patients undergoing right sided thoracic procedure in the lateral position.

**Secondary outcome measures**

Not provided at time of registration

**Overall study start date**

01/11/2003

**Completion date**

31/05/2004

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

Adult patients undergoing thoracotomy or thoracoscopy.

**Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Not Specified

**Target number of participants**

55 patients per group, plus 5 per group to allow for data corruption i.e.  $(55+5) \times 2 = 120$  patients in total.

**Key exclusion criteria**

Not provided at time of registration

**Date of first enrolment**

01/11/2003

**Date of final enrolment**

31/05/2004

## **Locations**

**Countries of recruitment**

England

United Kingdom

**Study participating centre****Department of Anaesthesia**

Liverpool

United Kingdom

L14 3PE

## **Sponsor information**

**Organisation**

Department of Health

**Sponsor details**

Richmond House

79 Whitehall

London

United Kingdom

SW1A 2NL

**Sponsor type**

Government

**Website**

<http://www.dh.gov.uk/Home/fs/en>

## **Funder(s)**

**Funder type**

Government

### Funder Name

The Cardiothoracic Centre Liverpool 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

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/02/2006		Yes	No