A comparison of analgesic efficacy and postoperative nausea and vomiting following morphine or fentanyl for perioperative analgesia in paediatric adenotonsillectomy

Submission date Recruitment status Prospectively registed	ered
12/09/2003 No longer recruiting [] Protocol	
Registration date Overall study status [] Statistical analysis p	lan
12/09/2003 Completed [] Results	
Last Edited Condition category Individual participan	t data
26/10/2015 Signs and Symptoms [] Record updated in la	ist year

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

Dr AS Carr

Contact details

Anaesthetic Department Level 04 Derriford Hospital Derriford Plymouth United Kingdom PL6 8DH

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N0185088382

Study information

Scientific Title

A comparison of analgesic efficacy and postoperative nausea and vomiting following morphine or fentanyl for perioperative analgesia in paediatric adenotonsillectomy

Study objectives

To determine whether there is a difference in vomiting episodes or analgesic requirements after use of morphine or fentanyl during adenotonsillectomy operation.

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

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied

Signs and Symptoms: Vomiting

Interventions

Children aged 5-16 years, American Society of Anesthesiologists (ASA) 1-2 scheduled for adenotonsillectomy will be recruited to the study after obtaining parental consent and verbal assent from the child, if appropriate. They will receive a standard anaesthetic. All children will receive paracetamol and diclofenac for analgesia. At induction all children will receive fentanyl. Intraoperatively they will be randomised to receive either morphine intramuscular (IM) (group M) or fentanyl (group F). Postoperatively they will receive fentanyl or morphine as rescue

analgesia. Rescue antiemetic will be given if required. Postoperatively, pain and sedation scores and the number of vomiting episodes in 24 h will be assessed and the intravenous (IV) and oral morphine requirements over 24 h.

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Morphine, fentanyl

Primary outcome measure

The following outcome measures will be used: pain scores, sedation scores, numbering of vomiting episodes in 24 h, IV and oral opioid requirements in 24 h.

Secondary outcome measures

Not provided at time of registration

Overall study start date

15/04/2002

Completion date

15/04/2003

Eligibility

Key inclusion criteria

Not provided at time of registration

Participant type(s)

Patient

Age group

Child

Sex

Both

Target number of participants

Not provided at time of registration

Key exclusion criteria

Does not meet inclusion criteria

Date of first enrolment

15/04/2002

Date of final enrolment

Locations

Countries of recruitment

England

United Kingdom

Study participating centre Derriford Hospital

Plymouth United Kingdom PL6 8DH

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

Plymouth Hospitals NHS Trust (UK)

Results and Publications

Publication and dissemination planNot provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summaryNot provided at time of registration