# Prospective randomized trial to assess the efficacy of 0.5% Marcaine subserosal injection in the gall bladder fossa to reduce the post operative pain from laparoscopic cholecystectomy

Recruitment status	<ul><li>Prospectively registered</li></ul>
No longer recruiting	☐ Protocol
Overall study status	Statistical analysis plan
Completed	Results
Condition category	Individual participant data
Signs and Symptoms	Record updated in last year
	No longer recruiting  Overall study status  Completed  Condition category

# Plain English summary of protocol

Not provided at time of registration

## Contact information

## Type(s)

Scientific

#### Contact name

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#### Contact details

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# Additional identifiers

Protocol serial number N0008171900

# Study information

#### Scientific Title

Prospective randomized trial to assess the efficacy of 0.5% Marcaine subserosal injection in the gall bladder fossa to reduce the post operative pain from laparoscopic cholecystectomy

#### **Study objectives**

Pain after Laparoscopic Cholecystectomy (key hole removal of gall bladder) is much lower than an open operation for the removal of gall bladder. However one can still expect mild to moderate pain after the key hole operation.

Can we reduce the post operative pain after the key hole operation by injecting local anaesthetic in the gall bladder bed?

#### 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

Signs and Symptoms: Pain

#### **Interventions**

We will recruit every suitable patient who undergoes a Laparoscopic Cholecystectomy under either of the Upper Gastrointestinal Surgeons at Frimley Park Hospital.

They will be given information leaflet about Laparoscopic cholecystectomy, and also given a leaflet with a diagram showing the site of injection.

An informed consent will be taken for the study in addition to the standard consent form for the procedure.

The surgeon will be unaware of the nature of the solution that he will inject into the gall bladder fossa (saline and bupivicaine injection will be shown to him pre op to check their details). A member of the team will draw an envelope to randomize the patients in either arm and will brief the nurse about the injection without the surgeon becoming aware of this Solution will be carefully injected with a 0.2 mm epidural needle connected to a syringe percutaneously in the subserosal area taking great care not to inject intravascularly.

The rest of the operation will be performed as normal.

Pain levels will be assessed at various periods after the operation and the results will be compared.

#### Intervention Type

#### Drug

#### Phase

Not Applicable

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

Marcaine

#### Primary outcome(s)

Post operative pain scores

#### Key secondary outcome(s))

Not provided at time of registration

#### Completion date

01/01/2006

# Eligibility

### Key inclusion criteria

Not provided at time of registration

#### Participant type(s)

**Patient** 

## Healthy volunteers allowed

No

#### Age group

Adult

#### Sex

All

#### Key exclusion criteria

Not provided at time of registration

#### Date of first enrolment

01/08/2005

#### Date of final enrolment

01/01/2006

# Locations

#### Countries of recruitment

**United Kingdom** 

England

Study participating centre
Portsmouth Road
Camberley
United Kingdom
GU16 7UJ

# Sponsor information

#### Organisation

Record Provided by the NHSTCT Register - 2006 Update - Department of Health

# Funder(s)

## Funder type

Government

#### **Funder Name**

Frimley Park Hospital NHS Foundation Trust (UK)

# **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?

Participant information sheet 11/11/2025 No Yes