# Does paracetamol given by mouth before wisdom tooth extraction give equal pain relief compared to paracetamol given by intravenous infusion?

Submission date	Recruitment status No longer recruiting	Prospectively registered		
22/01/2008		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
09/05/2008	Completed	[X] Results		
<b>Last Edited</b> 12/12/2012	Condition category Signs and Symptoms	[] 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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#### Contact details

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#### Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

Secondary identifying numbers

# Study information

#### Scientific Title

A comparison of pre-medication with oral paracetamol versus intravenous paracetamol given at time of induction for post-operative analgesia following wisdom tooth extraction

#### **Study objectives**

There is no clinically significant difference between the post-operative analgesic effects of paracetamol when given orally as a pre-medication one hour pre-operatively, and when given as an intravenous infusion immediately pre-operatively.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Brighton East Research Ethics Committee approved as of 19th February 2008 (ref: 08/H1107/16)

#### Study design

Randomised, controlled, blinded 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

Analgesia in wisdom tooth extraction

#### Interventions

Participants will be randomly assigned to either:

- 1. Oral pre-med group: two 500 milligram paracetamol capsules and 100 ml bag of normal saline for injection, or
- 2. IV group: two placebo lactose capsules and 100 ml (1 gram) of paracetamol for injection

The oral pre-medication will be given one hour prior to surgery and the intravenous whilst the participant is under a general anaesthetic. Duration of treatment 15 minutes for intravenous injection. Duration of follow up until discharged from hospital (max 3 - 4 hours).

#### Intervention Type

Drug

#### Phase

**Not Specified** 

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

Paracetamol

#### Primary outcome measure

We will compare the pain scores of patients in the two study arms one hour post-operatively. This will be done in recovery using a Visual Analogue Scale (VAS) pain scoring system.

#### Secondary outcome measures

We will compare the time to request of post-operative rescue analgesia between the two study arms. Specifically, this will be measured from when the patient arrives in recovery. This point will serve as a standard time zero (t0). The time elapsed before the patient requests additional analgesia (if at all) will act as a secondary surrogate marker of analgesic efficacy.

#### Overall study start date

31/03/2008

#### Completion date

31/12/2008

# **Eligibility**

#### Key inclusion criteria

Patients over 18 years (either sex) having a general anaesthetic for extraction of wisdom teeth of which at least one must be a lower molar tooth.

#### Participant type(s)

Patient

#### Age group

Adult

#### Lower age limit

18 Years

#### Sex

Both

#### Target number of participants

116

#### Key exclusion criteria

- 1. Patients who are unable to give full consent, or who do not wish to take part in the trial
- 2. Patients who have a baseline Visual Analogue Scale (VAS) score of more than zero
- 3. Patients unable to swallow tablets

- 4. Patients who have taken simple analgesics that day, prior to surgery
- 5. Hypersensitivity or history of serious adverse reactions to paracetamol or non-steroidal anti-inflammatory drugs
- 6. Active liver disease
- 7. Renal dysfunction
- 8. Pregnant or breast feeding women
- 9. Alcohol or drug abuse
- 10. History of unresponsiveness to paracetamol
- 11. Gastric or peptic ulcer disease
- 12. Inflammatory bowel disease
- 13. Blood coagulation abnormalities

#### Date of first enrolment

31/03/2008

#### Date of final enrolment

31/12/2008

#### Locations

#### Countries of recruitment

England

**United Kingdom** 

# Study participating centre Oueen Victoria Hospital NHS Foundation Trust

East Grinstead United Kingdom RH19 3QE

# Sponsor information

#### Organisation

Queen Victoria Hospital NHS Foundation Trust (UK)

#### Sponsor details

Holtye Road
East Grinstead
England
United Kingdom
RH19 3DZ
sarah.dawe@qvh.nhs.uk

#### Sponsor type

Hospital/treatment centre

#### Website

http://www.qvh.nhs.uk/

#### **ROR**

https://ror.org/03bs2yy11

# Funder(s)

#### Funder type

Government

#### **Funder Name**

National Institute for Health Research (UK) - the Research for Patient Benefit (RfPB) programme

### **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?
Results article	results	01/03/2013		Yes	No