

TREC2 - Rapid tranquillisation for agitated patients in emergency psychiatric rooms in Rio de Janeiro. A randomised trial of intramuscular Haloperidol versus intramuscular Haloperidol + Promethazine.

Submission date 31/08/2005	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 13/09/2005	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 01/11/2007	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<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

Protocol serial number
N/A

Study information

Scientific Title

Acronym

TREC - Rapid Tranquillisation Clinical Trial (Tranquilização Rápida-Ensaio Clínico)

Study objectives

The trial was undertaken to test the risks and benefits of adding promethazine to haloperidol for rapid intramuscular tranquillisation.

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

Serious mental illnesses combined with overt aggression or violence

Interventions

1. Haloperidol (up to 10 mg intramuscular [IM])
 2. Haloperidol (up to 10 mg IM) with promethazine (up to 50 mg IM)
- Doses are not fixed and are at the discretion of the attending doctors.

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Promethazine, haloperidol

Primary outcome(s)

Tranquil or asleep by 20 minutes after medication is given

Key secondary outcome(s)

1. Asleep by 20 minutes
2. Tranquil or asleep by 40, 60 and 120 minutes

3. Physically restrained or given additional medication within 2 hours
4. Severe adverse events during the subsequent 24 hours
5. Another episode of agitation/aggression during the subsequent 24 hours
6. Needing additional visits from the doctor during the subsequent 24 hours
7. Overall antipsychotic load in the first 24 hours
8. Still in hospital after 2 weeks

Completion date

01/07/2004

Eligibility

Key inclusion criteria

People are eligible for trial entry if:

1. It is clear that they need acute intramuscular sedation because of disturbed and dangerous behaviour thought to be due to serious mental illness
2. The clinician is uncertain about the benefits and risks of the comparator medications

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Not Specified

Sex

Not Specified

Key exclusion criteria

People are not eligible for trial entry if the clinician believes that one treatment represents an additional risk for the patient

Date of first enrolment

06/01/2004

Date of final enrolment

01/07/2004

Locations

Countries of recruitment

Brazil

Study participating centre

INCQS-FIOCRUZ
Rio de Janeiro
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21045-900

Sponsor information

Organisation

National School of Public Health (ENSP), Oswaldo Cruz Foundation (FIOCRUZ) (Brazil)

ROR

<https://ror.org/04jhswv08>

Funder(s)

Funder type

Research council

Funder Name

The National Council for Research and Development (Consejo Nacional de Desarrollo Científico y Tecnológico [CNPq]) (Brazil)

Funder Name

Regional Health Authorities (Brazil) - donated drugs

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?
Results article	Results	27/10/2007		Yes	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes