

# A randomised controlled study of Epidural Fentanyl Analgesia following Lumbar Laminectomy

<b>Submission date</b> 29/11/2006	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 28/02/2007	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 25/04/2014	<b>Condition category</b> Musculoskeletal Diseases	<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

### Contact name

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### Contact details

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## Additional identifiers

### Protocol serial number

Version 2

## Study information

Scientific Title

**Acronym**

EFALL

**Study objectives**

Epidural fentanyl is not more effective at controlling post-operative pain than current standard analgesic techniques.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Newcastle and North Tyneside Local Research Ethics Committee on 11/10/2006 (ref: 2 06/Q0906 /126)

**Study design**

Randomised controlled single blinded study

**Primary study design**

Interventional

**Study type(s)**

Treatment

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

Degenerative lumbar canal stenosis

**Interventions**

Single bolus intraoperative epidural fentanyl (100 micrograms) versus best alternative medical care in patients following lumbar laminectomy.

**Intervention Type**

Drug

**Phase**

Not Specified

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

Fentanyl

**Primary outcome(s)**

Post-operative pain score, day one and day two.

**Key secondary outcome(s))**

1. Length of post-operative hospital stay
2. Post-operative analgesia requirements
3. Side effects:
  - a. urinary retention
  - b. nausea

- c. vomiting
- d. pruritis

**Completion date**

30/11/2007

## Eligibility

**Key inclusion criteria**

1. Having a lumbar laminectomy for degenerative canal stenosis
2. 18 years or older
3. Able to give informed consent for this trial

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Sex**

Not Specified

**Key exclusion criteria**

1. There is a Cerebrospinal Fluid (CSF) leak or the dura is opened
2. Contraindication to fentanyl as follows:
  - a. respiratory depression
  - b. obstructive airways disease
  - c. concurrent administration with monoamine oxidase inhibitors, or within two weeks of their discontinuation
  - d. known intolerance to fentanyl
3. Vulnerable group or unable to consent

**Date of first enrolment**

01/12/2006

**Date of final enrolment**

30/11/2007

## Locations

**Countries of recruitment**

United Kingdom

England

**Study participating centre**  
**Department of Neurosurgery**  
Cambridge  
United Kingdom  
CB2 2QQ

## Sponsor information

**Organisation**  
Addenbrooke's Hospital (UK)

**ROR**  
<https://ror.org/055vbx86>

## Funder(s)

**Funder type**  
Hospital/treatment centre

**Funder Name**  
The costs of this trial are minimal. They will mostly be covered by internal department funds from the Department of Neurosurgery at Addenbrookes Hospital (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?
<a href="#">Results article</a>	results	01/08/2012		Yes	No