

The effect of an ilio-inguinal block in appendectomy on post operative pain and hospital stay

Submission date 28/09/2007	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 28/09/2007	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 06/07/2009	Condition category Signs and Symptoms	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

Dr Simon Middleton

Contact details

Department of General Surgery
Royal Berkshire Hospital
London Road
Reading
United Kingdom
RG1 5AN

Additional identifiers

Protocol serial number

N0199192286

Study information

Scientific Title

Study objectives

Does the use of local anaesthetic nerve blocks to numb the operation site, once the patient is anaesthetised, reduce port operative pain in patients undergoing appendectomy? This will be compared to infiltration of the skin alone with local anaesthetic.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Primary study design

Interventional

Study design

Randomised prospective trial with patient and ward staff blinded to intervention

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Signs and Symptoms: Pain

Interventions

1. Group A: local infiltration of skin prior to incision with bupivacaine according to weight.
2. Group B: half the bupivacaine by weight infiltrated into the skin prior to incision. As incision deepened second half of bupivacaine given under direct vision deep to external oblique, lateral to the incision, to create field block.

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

1. Post operative pain in recovery: by questionnaire in recovery
2. Post operative pain on ward at 4 and 8 hours post op: by questionnaire
3. Post operative pain at 24 hours or at discharge, whichever is sooner.
4. Hours from operation to discharge.

Key secondary outcome(s)

Not provided at time of registration

Completion date

30/06/2007

Eligibility

Key inclusion criteria

All open appendectomies undertaken for acute appendicitis at Royal Berkshire Hospital. At time of analysis different sub groups formed according to operative findings: gangrenous / perforated appendix or normal appendix.

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Not Specified

Sex

Not Specified

Key exclusion criteria

1. Laparoscopic appendectomies.
2. Appendix removed at time of planned laparotomy (i.e. not through small incision).

These exclusion criteria exist as we wish to judge the effect of local anaesthetic on post operative pain. Where a different size wound is left (laparoscopic or laparotomy) it would be an unfair comparison.

Where the initial operation is appendectomy via a lanz incision but an alternative pathology is found or the wound is extended for a laparotomy then the patient will be included in the study until the time of analysis.

Date of first enrolment

07/03/2007

Date of final enrolment

30/06/2007

Locations**Countries of recruitment**

United Kingdom

England

Study participating centre

Department of General Surgery

Reading

United Kingdom

RG1 5AN

Sponsor information

Organisation

Record Provided by the NHSTCT Register - 2007 Update - Department of Health

Funder(s)

Funder type

Government

Funder Name

Royal Berkshire 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?
Results article	results	01/05/2010		Yes	No