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Music therapy impact during anaesthesia for gastrointestinal endoscopy

Submission date
31/10/2025

Recruitment status
No longer recruiting

Registration date
03/11/2025

Overall study status
Completed

Last Edited
31/10/2025

Condition category
Mental and Behavioural Disorders

[ ] Prospectively registered
[ ] Protocol
[ ] Statistical analysis plan
[ ] Results
[ ] Individual participant data
[X] Record updated in last year

Plain English summary of protocol

Background and study aims
Ambulatory gastrointestinal (GI) endoscopy constitutes a large and growing share of procedural care. Anxiety correlates with fears about anaesthesia, pain, and adverse outcomes, and when not controlled, higher doses of hypnotics and analgesics are typically required. Music has long been integrated into medical practice and, in modern trials, has demonstrated clinically relevant benefits. Across adult surgical settings, music interventions reduce anxiety and improve pain outcomes when compared with usual care or silence. This study aims to find out whether patientselected music reduces propofol requirements during combined upper and lower gastrointestinal endoscopy.

Who can participate?
Outpatients aged 18 years and over scheduled for diagnostic gastroscopy and colonoscopy

What does the study involve?
Patients are randomly allocated to patient-selected music plus standard care or to standard care alone.

What are the possible benefits and risks of participating?
Benefits: reduced anxiety and propofol consumption
Risks: no additional risks, same as standard of care

Where is the study run from?
Princess Grace Hospital Center (Monaco)

When is the study starting and how long is it expected to run for?
November 2023 to October 2025

Who is funding the study?
Investigator initiated and funded

Who is the main contact?
1. Dr Gildas Rousseau, gildas.rousseau@chpg.mc

2. Nicolas Rijo, recherche.clinique@chpg.mc
3. Dr Sorina-Dana Mihailescu, recherche.clinique@chpg.mc

Contact information

Type(s)
Public, Scientific, Principal investigator

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Additional identifiers

Clinical Trials Information System (CTIS)
Nil known

Integrated Research Application System (IRAS)
Nil known

Protocol serial number
23-15

Study information

Scientific Title
Patientselected music reduces propofol requirements during combined upper and lower gastrointestinal endoscopy: a randomized controlled trial

Acronym
MUSICENDO

Study objectives
Music interventions can decrease sedative requirements and can reduce perioperative anxiety

Ethics approval required
Ethics approval not required

Ethics approval(s)

Study design
Openlabel singlecentre randomized controlled trial

Primary study design
Interventional

Study type(s)
Other

Health condition(s) or problem(s) studied
Anxiety during gastroscopy and colonoscopy

Interventions
This is an openlabel, singlecentre, randomized, controlled trial conducted at Princess Grace Hospital, Monaco. Consecutive adult outpatients scheduled for diagnostic gastroscopy and colonoscopy will be screened. Patients are allocated 1:1 to patientselected music plus standard care or to standard care alone using a computer-generated schedule with fixed permuted blocks.

Intervention Type
Other

Primary outcome(s)
Propofol consumption rate (mg·kg^{-1}·min^{-1}), defined as total propofol administered divided by body weight and by the intervention length (minutes from induction to procedure end)

Key secondary outcome(s))
1. Procedure duration (minutes), from induction to end of procedure
2. Total ambulatory pathway time (minutes), from induction to return to ambulatory unit
3. Anxiety level measured using the Amsterdam Preoperative Anxiety and Information Scale (APAIS) score at preanaesthesia consultation and on arrival in the ambulatory unit
4. Haemodynamic changes (systolic and diastolic blood pressures and pulse pressure) before vs after procedure
5. Adverse events (e.g., bronchospasm, laryngospasm) recorded during procedure
6. Number of propofol vials used per case for the procedure

Completion date
06/10/2025

Eligibility

Key inclusion criteria
Adults with ASA physical status I–III planned for combined diagnostic upper and lower GI endoscopy in ambulatory care

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Adult

Lower age limit
18 years

Sex
All

Total final enrolment
89

Key exclusion criteria
1. Legal incapacity
2. Hospital stay >24 h
3. Psychiatric disorders
4. Alcohol or toxic substance use
5. Severe renal failure (creatinine clearance <30 mL·min^{1})
6. Pregnancy or breastfeeding
7. Significant hearing impairment precluding music exposure
8. Urgent procedures
9. Lack of social insurance

Date of first enrolment
20/03/2024

Date of final enrolment
16/07/2024

Locations

Countries of recruitment
Monaco

Study participating centre
Centre Hospitalier Princesse Grace
1 avenue Pasteur
Monaco
Monaco
98000

Sponsor information

Organisation
Princess Grace Hospital Centre

ROR
https://ror.org/03x1jt541

Funder(s)

Funder type
Other

Funder Name
Investigator initiated and funded

Results and Publications

Individual participant data (IPD) sharing plan
Data will be shared with researchers who submit a methodologically sound protocol to Gildas Rousseau (gildas.rousseau@chpg.mc) following the signing of a data access agreement.

IPD sharing plan summary
Available on request