

Ease of placement of the laryngeal tube during manual-in-line neck stabilisation.

Submission date 30/09/2005	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 30/09/2005	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 21/07/2009	Condition category Surgery	<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
N0176140630

Study information

Scientific Title

Study objectives

The laryngeal Tube (LT) is used in anaesthetics to secure patients' breathing and to administer oxygen and anaesthetic gases. LT consists of an airway tube with a small cuff attached at the tip (distal cuff) and a larger cuff at the middle part of the tube (proximal cuff). LT is inserted through the mouth. The proximal cuff provides a seal by forming a plug just above the voice box (larynx) and the distal cuff seals the gullet (oesophagus) inlet. There is a hole in the tube between the two cuffs to supply oxygen and anaesthetic gases through it. LT has a role in the airway management during anaesthesia and cardiopulmonary resuscitation. In patients with injury to the neck ("unstable necks"), airway management may be required while the head and neck are stabilised with the anaesthetist' assistant holding them in neutral position ("manual in-line stabilisation"). It is possible that this may make placement of the device more difficult. We wish to determine if the manual in-line stabilisation of the head and neck would alter the ease of insertion.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Primary study design

Interventional

Study design

Randomised controlled crossover trial

Study type(s)

Other

Health condition(s) or problem(s) studied

Surgery: Anaesthesia

Interventions

Randomised controlled trial. Comparison of 2 different insertion positions

Intervention Type

Procedure/Surgery

Phase

Not Specified

Primary outcome(s)

Clinically assessed adequacy of the ventilation via LT inserted in two different positions.

Key secondary outcome(s)

Ease and time of insertion of LT

Completion date

30/04/2004

Eligibility

Key inclusion criteria

55 patients

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Not Specified

Sex

Not Specified

Key exclusion criteria

Does not meet inclusion criteria

Date of first enrolment

01/05/2003

Date of final enrolment

30/04/2004

Locations**Countries of recruitment**

United Kingdom

England

Study participating centre

Department of Anaesthetics

Oxford

United Kingdom

OX3 9DU

Sponsor information**Organisation**

Department of Health

Funder(s)

Funder type

Hospital/treatment centre

Funder Name

Oxford Radcliffe Hospitals NHS Trust (UK)

Funder Name

Not available

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	01/12/2004		Yes	No