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# The effect of Continuous Positive Airway Pressure (CPAP) on the collapsed lung during single-lung-ventilation in patients undergoing robot-assisted thoracoscopic esophageal resection: pulmonary complications, local and systemic cytokine production

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| **Submission date**<br>28/04/2006 | **Recruitment status**<br>No longer recruiting | [ ] Prospectively registered<br>[ ] Protocol<br>[ ] Statistical analysis plan<br>[ ] Results<br>[ ] Individual participant data<br>[ ] Record updated in last year |
| **Registration date**<br>28/04/2006 | **Overall study status**<br>Completed | |
| **Last Edited**<br>28/04/2006 | **Condition category**<br>Cancer | |

**Plain English summary of protocol**
Not provided at time of registration

## Contact information

**Type(s)**
Scientific

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## Additional identifiers

# Study information

### Scientific Title

### Acronym
COCTAIL

### Study objectives
Continuous positive airway pressure on the deflated lung prevents total alveolar collapse, resulting in less local and systemic cytokine response, causing less pulmonary complications.

### Ethics approval required
Old ethics approval format

### Ethics approval(s)
Ethics approval received from the local medical ethics committee

### Primary study design
Interventional

### Study design
Randomised controlled trial

### Study type(s)
Treatment

### Health condition(s) or problem(s) studied
Esophageal cancer

### Interventions
Continuous Positive Airway Pressure (CPAP) to the collapsed lung during single-lung-ventilation versus no CPAP.

### Intervention Type
Other

### Phase
Not Specified

### Primary outcome(s)
Local and systemic cytokine production.

### Key secondary outcome(s)
1. Pulmonary complications
2. Ventilation time
3. Intensive care unit (ICU) stay
4. Hospital stay

### Completion date

05/04/2008

# Eligibility

### Key inclusion criteria
1. Patients with resectable carcinoma of the esophagus or junction that will undergo robot-assisted thoracoscopic esophago-lymphadenectomy with gastric conduit formation
2. American Society of Anesthesiologists (ASA) classification <4
3. Written informed consent

### Participant type(s)
Patient

### Healthy volunteers allowed
No

### Age group
Adult

### Sex
All

### Key exclusion criteria
1. Moderate/severe lung function impairment ascertained by pulmonary function tests, requiring high dose steroid therapy
2. No epidural catheter

### Date of first enrolment
05/04/2006

### Date of final enrolment
05/04/2008

# Locations

### Countries of recruitment
Netherlands

### Study participating centre
**University Medical Center Utrecht (UMCU)**
Utrecht
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# Sponsor information

**Organisation**
University Medical Center Utrecht (UMCU), Department of Surgery (The Netherlands)

**ROR**
https://ror.org/0575yy874

# Funder(s)

**Funder type**
Research organisation

**Funder Name**
Comprehensive Cancer Centre (Integraal Kankercentrum)

# Results and Publications

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**
Not provided at time of registration