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Cold versus hot snare polypectomy in post polypectomy bleeding in small colonic polyps

Submission date	Recruitment status	[ ] Prospectively registered
26/12/2010	No longer recruiting	[ ] Protocol
Registration date	**Overall study status**	[ ] Statistical analysis plan
06/05/2011	Completed	[ ] Results
Last Edited	**Condition category**	[ ] Individual participant data
06/05/2011	Digestive System	[ ] Record updated in last year

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
A prospective, randomised comparison of cold versus hot snare polypectomy in the occurrence of post polypectomy bleeding in small colonic polyps

Study objectives
The aim of our study is to compare cold snare polypectomy (CSP) with hot snare polypectomy (HSP) in the occurrence of postpolypectomy bleeding in small colonic polyps with size 3 - 8 mm.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Benizelion General Hospital Ethics Committee approved on the 17th December 2010 (ref: 16903)

Primary study design
Interventional

Study design
Randomised controlled trial

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Colonic polyps

Interventions
Colonoscopic polypectomy

Intervention Type
Other

Phase
Not Applicable

Primary outcome(s)
1. Post polypectomy bleeding
2. All patients were contacted by telephone 12 hours, 2 days and 1 month after procedure and were asked about pain, abdominal tenderness, fever and bleeding
3. In the HSP group, small polyps were removed as a single piece with a standard electrosurgical snare (Sensation Polypectomy Snare 13mm, Microvasive, Boston Scientific, Natick, MA) and monopolar coagulation current, using a 120W OLYMPUS HF-120 generator with a setting of 72W in endocut function
4. In the CSP group, the polyp was removed as a single piece with the same electrosurgical snare. According to expert opinion[3] 1-to 2mm of normal tissue around the small polyp were ensnared in the CSP group. All colonoscopies were performed with wide-angle (170o), high-resolution videocolonoscopes Olympus (CFH180AL, Tokyo, Japan) with a high-definition 1080-line screen - Olympus (OEV191H, Tokyo, Japan) and video processor Olympus (EVIS EXERA II CV-180, Tokyo, Japan).
5. Bowel preparation was accomplished with a 4L electrolyte solution of polyethylene glycol.

Key secondary outcome(s)
All patients were contacted by telephone 12 hours, 2 days and 1 month after procedure and were asked about:
1. Pain
2. Abdominal tenderness
3. Fever
4. Bleeding

Completion date
13/10/2010

Eligibility

Key inclusion criteria
1. All patients founded with small polyps (3 - 8 mm) during colonoscopy
2. Cold snare group (CSP): male/female: 107/101 with age range: 59,4±13,6
3. Hot snare group (HSP): male/female: 125/81 with age range: 61,3±11,0

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Adult

Sex
All

Key exclusion criteria
1. Cases with bleeding tendency (taking anticoagulant therapy, platelet count of less than 100,000/mm3, or prothrombin time more than 30% above the control
2. Cases with inadequate colonic preparation
3. Patients undergoing anticoagulant or antiplatelet therapy were instructed to discontinue the use of these types of medication at least 7 days before the endoscopic procedure

Date of first enrolment
19/05/2010

Date of final enrolment
13/10/2010

Locations

Countries of recruitment
Greece

Study participating centre
Benizelion General Hospital
Heraklion, Crete
Greece
71409

Sponsor information

Organisation
Benizelion General Hospital (Greece)

ROR
https://ror.org/043889z90

Funder(s)

Funder type
Hospital/treatment centre

Funder Name
Benizelion General Hospital (Greece)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Not provided at time of registration