

A double-blind, randomised, controlled multicentre trial of misoprostol treatment prior to Vacuum Aspiration for termination of early pregnancy

Submission date 17/04/2007	Recruitment status No longer recruiting	☐ Prospectively registered
Registration date 03/05/2007	Overall study status Completed	☐ Protocol
Last Edited 10/10/2014	Condition category Pregnancy and Childbirth	☐ Statistical analysis plan
		☐ Results
		☐ Individual participant data
		☐ 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

Protocol serial number

A15066

Study information

Scientific Title

Acronym

Cervical priming prior to VA

Study objectives

Null hypothesis:

There is no difference between first trimester abortion with and without pre-abortion priming of the cervix with 400 micrograms of misoprostol with regard to all complications associated with abortion.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approval received from the SCRIHS (Scientific Committee for Research in Human Subjects) and local ethics committees at each participating centre. SCRIHS approved the protocol of this Project A15066 on 23/07/2001

Study design

Randomised placebo-controlled multicentre clinical trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Termination of early pregnancy by vacuum aspiration

Interventions

Two tablets of 200 micrograms of misoprostol or two placebo tablets will be administered vaginally three hours before vacuum aspiration. Type of analgesia/anaesthesia, baseline cervical dilation, duration of procedure, amount of bleeding, complications during and after procedure, etc., will be recorded. A follow-up visit is scheduled 7 to 10 days after vacuum aspiration.

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Misoprostol

Primary outcome(s)

Complication rates in misoprostol and placebo groups, measured during the procedure, in the immediate post-operative period, and up until the follow-up visit 7 to 14 days after the procedure

Key secondary outcome(s)

1. Ease of the procedure (dilation, duration of procedure, pain level), measured during the procedure
2. Side-effects, measured at any time after administration of misoprostol until the end of the study

Completion date

24/09/2005

Eligibility**Key inclusion criteria**

1. Women requesting abortion and eligible for legal termination of normal single intrauterine pregnancy of less than 12 completed weeks (84 days) of gestation
2. Consent to participation
3. Able to understand information on the study
4. Agree to return for the scheduled follow-up visit

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

Female

Key exclusion criteria

Women are not eligible if they have:

1. A medical condition or disease that requires special treatment, care of precautions in conjunction with vacuum aspiration
2. Allergy to misoprostol
3. Contraindications to misoprostol
4. Anaemia or any coagulation disorder

Date of first enrolment

21/10/2002

Date of final enrolment

24/09/2005

Locations**Countries of recruitment**

Armenia

China

Cuba

Hungary

India

Mongolia

Romania

Slovenia

Switzerland

Viet Nam

Study participating centre

Department of Reproductive Health and Research

Geneva-27

Switzerland

CH-1211

Sponsor information

Organisation

UNDP/UNFPA/WHO/World Bank - Special Programme of Research, Development and Research Training in Human Reproduction

ROR

<https://ror.org/01f80g185>

Funder(s)

Funder type

Research organisation

Funder Name

United Nations Development Programme (UNDP)/United Nations Population Fund (UNFPA) /World Health Organization (WHO)/World Bank - Special Programme of Research, Development and Research Training in Human Reproduction (HRP)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration