

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

10 Jun 2026

### The Comparison of the effect of dexmedetomidine and fentanyl as adjuvant to lidocaine on the onset time and duration of ultrasound guided infraclavicular brachial plexus block in orthopedic upper limb surgery

#### Protocol summary

##### Study aim

To determine the effectiveness of dexmedetomidine and fentanyl as adjuvant to lidocaine on the onset time and duration and postoperative analgesia of ultrasound guided infraclavicular block in orthopedic upper limb surgery

##### Design

This is a parallel randomized, double- blinded controlled phase 3 clinical trial of 60 patients. A simple randomization method using a table of random numbers is used to generate a random sequence of patients, and individuals are randomly assigned equally to one of the three study groups (20 patients in each group).

##### Settings and conduct

Patients scheduled for elective upper extremity surgery under infraclavicular block in Akhtar Hospital are enrolled in the study and are randomly divided into three equal groups. Participants, investigators, outcome assessors are not aware of the allocation of study groups.

##### Participants/Inclusion and exclusion criteria

ASA 1 or 2 patients scheduled for unilateral orthopedic surgery of the elbow or forearm or wrist or hand are included in the study if they give informed consent. Exclusion criteria are ASA class $\geq$ 3, age more than 75 and less than 15 years, allergy to local anesthetics, coagulation disorders, opium addiction, infection at the block site, BMI $>$ 30, uncooperative patients, liver or kidney failure, chronic use of painkillers and narcotics, patients who take narcotics before surgery and pregnancy.

##### Intervention groups

The control group receives 19 ml of lidocaine 1.5% + 1 ml of normal saline, fentanyl group receives 19 ml of lidocaine 1.5% + 1 ml containing 50  $\mu$ g of fentanyl and dexmedetomidine group receives 19 ml of lidocaine 1.5% + 1 ml containing 100  $\mu$ g of dexmedetomidine for

infraclavicular block.

##### Main outcome variables

The onset time of sensory and motor block, the time to achieve complete sensory and motor block, duration of sensory and motor block, degree of sedation, hemodynamic parameters, postoperative analgesia

#### General information

##### Reason for update

##### Acronym

##### IRCT registration information

IRCT registration number: **IRCT20131108015322N7**

Registration date: **2022-10-08, 1401/07/16**

Registration timing: **registered\_while\_recruiting**

Last update: **2022-10-08, 1401/07/16**

Update count: **0**

##### Registration date

2022-10-08, 1401/07/16

##### Registrant information

##### Name

Shideh Dabir

##### Name of organization / entity

##### Country

Iran (Islamic Republic of)

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+98 21 2243 2595

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##### Recruitment status

**Recruitment complete**

##### Funding source

##### Expected recruitment start date

2022-10-07, 1401/07/15  
**Expected recruitment end date**  
2023-01-10, 1401/10/20  
**Actual recruitment start date**  
empty  
**Actual recruitment end date**  
empty  
**Trial completion date**  
empty

#### **Scientific title**

The Comparison of the effect of dexmedetomidine and fentanyl as adjuvant to lidocaine on the onset time and duration of ultrasound guided infraclavicular brachial plexus block in orthopedic upper limb surgery

#### **Public title**

The effect of adding dexmedetomidine and fentanyl to lidocaine on the the quality of infraclavicular peripheral block in upper extremity orthopedic surgery

#### **Purpose**

Treatment

#### **Inclusion/Exclusion criteria**

##### **Inclusion criteria:**

ASA class1 and 2 unilateral upper limb surgery age 15-75 years patient's acceptance

##### **Exclusion criteria:**

ASA class $\geq$ 3 Allergy to local anesthetics Age more than 75 yrs and less than 15 yrs Coagulation disorders Opium addiction Infection at the block site BMI >30 liver or kidney failure chronic use of painkillers and narcotics patients who take narcotics before surgery pregnancy

#### **Age**

From **15 years** old to **75 years** old

#### **Gender**

Both

#### **Phase**

3

#### **Groups that have been masked**

- Participant
- Care provider
- Investigator
- Outcome assessor
- Data analyser

#### **Sample size**

Target sample size: **60**

#### **Randomization (investigator's opinion)**

Randomized

#### **Randomization description**

A simple randomization method by a table of random numbers is used to generate a random sequence of patients and participants are randomly assigned to one of the three study groups. To use the table of random numbers, the researcher first determines the direction of reading the numbers in the table. Then numbers 0-20 are considered for the control group, numbers 21-40 for intervention D group, and numbers 41-60 for intervention F group. Then the researcher puts the hand on one of the numbers and moves in the predetermined direction, records the numbers and assigns them to different groups. Each of the randomly assigned

sequence numbers are recorded on a card and each card is placed in a sealed numbered envelope with the same card number. When the eligible participants enter the study, the envelopes are selected in order of their sequence and patients receive the intervention of the same group.

#### **Blinding (investigator's opinion)**

Double blinded

#### **Blinding description**

Randomization and assignment of patients in each group is done by persons with no involvement in the trial. Participants, investigators, care provider and outcome assessors are unaware of the allocation of individuals in each study group. Since the participants, researchers and outcome assessors are unaware of the allocation of the study groups, and the syringes containing the studied drugs are similar in terms of color and volume, this is a double blinded study.

#### **Placebo**

Not used

#### **Assignment**

Parallel

#### **Other design features**

### **Secondary Ids**

empty

### **Ethics committees**

#### **1**

##### **Ethics committee**

###### **Name of ethics committee**

Research Ethics Committee of shahid Beheshti University of Medical Sciences

###### **Street address**

Building no. 2, 6th floor, Office of Research Affairs, Shahid Chamran Highway, Yemen St., Arabi St., next to Taleghani Hospital, Shahid Beheshti University of Medical Sciences

###### **City**

Tehran

###### **Province**

Tehran

###### **Postal code**

1985717443

##### **Approval date**

2021-10-26, 1400/08/04

##### **Ethics committee reference number**

IR.SBMU.MSP.REC.1400.493

### **Health conditions studied**

#### **1**

##### **Description of health condition studied**

Improving the quality of infraclavicular brachial plexus block in terms of the onset and length of sensory and motor block and analgesic effect

##### **ICD-10 code**

##### **ICD-10 code description**

## Primary outcomes

### 1

#### Description

The onset time of sensory block

#### Timepoint

After the end of local anesthetic injection every 5 minutes for 20 minutes

#### Method of measurement

Based on a 0-2 grading scale

### 2

#### Description

The onset time of motor block

#### Timepoint

After the end of local anesthetic injection every 5 minutes for 20 minutes

#### Method of measurement

Based on modified Bromage scale 0-3

### 3

#### Description

Duration of sensory block

#### Timepoint

After the end of local anesthetic injection every 5 minutes for 20 minutes

#### Method of measurement

Based on a 0-2 grading scale

### 4

#### Description

Duration of motor block

#### Timepoint

After the end of local anesthetic injection every 5 minutes for 20 minutes

#### Method of measurement

Based on modified Bromage scale 0-3

## Secondary outcomes

### 1

#### Description

Heart rate

#### Timepoint

Before the block, 10, 20, and 30 minutes after the block, 5, 10, and 15 minutes after entering the recovery room, and 3, 12, and 24 hours after operation

#### Method of measurement

Electrocardiogram, Pulse oximeter

### 2

#### Description

Systolic blood pressure

#### Timepoint

Before the block, 10, 20, and 30 minutes after the block, 5, 10, and 15 minutes after entering the recovery room, and 3, 12, and 24 hours after operation

## Method of measurement

Noninvasive Blood pressure measurement method

### 3

#### Description

Sedation level

#### Timepoint

Before the block, 10, 20, and 30 minutes after the block, 5, 10, and 15 minutes after entering the recovery room, and 3, 12, and 24 hours after operation

#### Method of measurement

Sedation scale with a rating of 1-4

### 4

#### Description

Pain severity

#### Timepoint

10, 20 and 30 minutes after the start of the operation, 5, 10 and 15 minutes after entering the recovery and 3, 12 and 24 hours after operation

#### Method of measurement

A 5-point verbal rating scale (VRS) consisting of (0 =no pain, 4=unbearable pain)

### 5

#### Description

Total number of patient's requests for systemic analgesics

#### Timepoint

In the first 24 hours after operation

#### Method of measurement

Recording the number of requests for analgesic

## Intervention groups

### 1

#### Description

Control group: Receives 19 ml of lidocaine 1.5% with epinephrine 1:200000 + 1 ml of normal saline for infraclavicular block.

#### Category

Treatment - Drugs

### 2

#### Description

Fentanyl group: Receives 19 ml of lidocaine 1.5% with epinephrine 1:200000 + 1 ml containing 50 µg of fentanyl infraclavicular block.

#### Category

Treatment - Drugs

### 3

#### Description

Dexmedetomidine group: Receives 19 ml of lidocaine 1.5% + 1 ml containing 100 µg of dexmedetomidine for infraclavicular block.

#### Category

## Recruitment centers

### 1

#### Recruitment center

**Name of recruitment center**

Akhtar hospital

**Full name of responsible person**

Faramarz Mosaffa

**Street address**

Department of Anesthesiology, Akhtar Hospital,  
Shariati Ave., Pole- Rumi St., Sharifimanesh St., Azar  
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## Sponsors / Funding sources

### 1

#### Sponsor

**Name of organization / entity**

Shahid Beheshti University of Medical Sciences

**Full name of responsible person**

Dr. Afshin Zarghi

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shahid Beheshti University of Medical sciences,  
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&pageid=2554](http://retech.sbm.ac.ir/index.jsp?fkeyid=&siteid=24&pageid=2554)

**Grant name****Grant code / Reference number****Is the source of funding the same sponsor organization/entity?**

Yes

**Title of funding source**

Shahid Beheshti University of Medical Sciences

**Proportion provided by this source**

100

**Public or private sector**

Public

**Domestic or foreign origin**

Domestic

**Category of foreign source of funding**

empty

**Country of origin****Type of organization providing the funding**

Academic

## Person responsible for general inquiries

**Contact****Name of organization / entity**

Shahid Beheshti University of Medical Sciences

**Full name of responsible person**

Shideh Dabir

**Position**

Professor

**Latest degree**

Specialist

**Other areas of specialty/work**

Anesthesiology

**Street address**

Anesthesiology Department, Taleghani Hospital, Arabi  
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## Person responsible for scientific inquiries

**Contact****Name of organization / entity**

Shahid Beheshti University of Medical Sciences

**Full name of responsible person**

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**Position**

Professor

**Latest degree**

Specialist

**Other areas of specialty/work**

Anesthesiology

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**Person responsible for updating data****Contact****Name of organization / entity**

Shahid Beheshti University of Medical Sciences

**Full name of responsible person**

Shideh Dabir

**Position**

Professor

**Latest degree**

Specialist

**Other areas of specialty/work**

Anesthesiology

**Street address**Department of Anesthesiology, Taleghani Hospital,  
Aaraabi St., Yaman St., Velenjak**City****Sharing plan****Deidentified Individual Participant Data Set (IPD)**

No - There is not a plan to make this available

**Justification/reason for indecision/not sharing IPD**

There is no further information.

**Study Protocol**

No - There is not a plan to make this available

**Statistical Analysis Plan**

No - There is not a plan to make this available

**Informed Consent Form**

No - There is not a plan to make this available

**Clinical Study Report**

No - There is not a plan to make this available

**Analytic Code**

No - There is not a plan to make this available

**Data Dictionary**

Not applicable