

Clinical Trial Protocol

Iranian Registry of Clinical Trials

11 Sep 2026

Evaluation of Effect of Adding Ultrasound-Guided Paravertebral Block to Continuous Intravenous Analgesia in Patients Undergoing Laparotomy

Protocol summary

Summary

1) Objectives: Evaluation of effect of adding ultrasound-guided paravertebral block to continuous intravenous analgesia in patients undergoing laparotomy 2) Design: in this randomized clinical trial we will assign 21 patients for each group randomly. 3) Setting and Conduct: Paravertebral block will be applied postoperatively in the intervention group, intravenous analgesia will be administrated in patients of the both groups. During 48 hours of the study, one of our colleagues who is blinded to groups will gather and analyze the data. 4) Participants: Inclusion criteria: Patients with American Society of Anesthesiologists (ASA) I-III scheduled for upper abdominal laparotomy that ranged in age from 18-80 years. Exclusion criteria: contraindication to regional anesthesia (preoperative hemostasis disorder or a local or general infection), history of allergic reaction to local anesthetic , a past medical history of asthma, chronic renal failure or hepatic dysfunction, history of opium abuse; history of neurological, neuromuscular or psychological disorders and pregnancy 5) Interventions: Intervention Group: ultrasound-guided paravertebral block with ropivacaine hydrochloride 0.2% (Naropin 10mg/ml, 10ml polyamp, ASTRAZENECA) 20 cc for each side in T7-T8 level plus continuous intravenous analgesia filled with fentanyl (Fentanyl, Abureyhan, Iran) 20cc with 80cc normal saline with infusion rate of 4ml/hour. Control Group: continuous intravenous analgesia filled with fentanyl 20 cc with 80 cc normal saline with infusion rate of 4 ml per hour. If patients experience "visual analogue scale" (VAS) above three, Pethidine HCL (0.5 mg per kg) will be administered intravenously during 48 after surgery. 6) Main Outcome Variable: "visual analogue scale", total dosage of opioid

General information

Acronym

IRCT registration information

IRCT registration number: **IRCT201303227984N8**

Registration date: **2013-05-04, 1392/02/14**

Registration timing: **registered_while_recruiting**

Last update:

Update count: **0**

Registration date

2013-05-04, 1392/02/14

Registrant information

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Recruitment status

Recruitment complete

Funding source

Vice Chancellor for Research, Tehran University of Medical Sciences, Tehran, Iran

Expected recruitment start date

2012-08-22, 1391/06/01

Expected recruitment end date

2013-08-23, 1392/06/01

Actual recruitment start date

empty

Actual recruitment end date

empty

Trial completion date

empty

Scientific title

Evaluation of Effect of Adding Ultrasound-Guided

Paravertebral Block to Continuous Intravenous Analgesia in Patients Undergoing Laparotomy		Ethics committee reference number 91.130.1927.5	
Public title Effect of Paravertebral Block in Decreasing of Post Operative Pain of Laparotomy		Health conditions studied	
Purpose Treatment		<u>1</u>	
Inclusion/Exclusion criteria Inclusion criteria: American Society of Anesthesiologists (ASA) I-III patients scheduled for upper abdominal laparotomy who ranged in age from 18-80 years. Patients were excluded if they exhibited a contraindication to regional anesthesia (preoperative homeostasis disorder or a local or general infection), history of allergic reaction to local anesthetic , a past medical history of asthma, chronic renal failure or hepatic dysfunction, history of opium abuse; history of neurological, neuromuscular or psychological disorders and pregnancy		Description of health condition studied Patientis Undergoing Laparatomy	
Age From 18 years old to 80 years old		ICD-10 code	
Gender Both		ICD-10 code description	
Phase 2-3		Primary outcomes	
Groups that have been masked <i>No information</i>		<u>1</u>	
Sample size Target sample size: 42		Description Post Operative Pain	
Randomization (investigator's opinion) Randomized		Timepoint 2,6,12,24,48 Hour After Operation	
Randomization description		Method of measurement Visual Analog Scale (VAS)	
Blinding (investigator's opinion) Single blinded		Secondary outcomes	
Blinding description		<u>1</u>	
Placebo Used		Description Total Dosage of Opioid	
Assignment Parallel		Timepoint During 48 Hours after Surgery	
Other design features		Method of measurement mg/ Nursing Report	
Secondary Ids empty		Intervention groups	
Ethics committees		<u>1</u>	
<u>1</u>		Description Intervention Group: ultrasound-guided paravertebral block with ropivacaine hydrochloride 0.2% (Naropin 10mg/ml, 10ml polyamp, ASTRAZENECA) 20 cc for each side in T7-T8 level plus continuous intravenous analgesia filled with fentanyl (Fentanyl, Abureyhan, Iran) 20cc with 80cc normal saline with infusion rate of 4ml/hour.	
Ethics committee		Category Treatment - Drugs	
Name of ethics committee Ethics committee of Tehran University of Medical Sciences		<u>2</u>	
Street address Room 501, 5th Floor, Central Office of Tehran University of Medical Sciences, Keshavarz Bolvard		Description Control Group: continuous intravenous analgesia (CIA) filled with fentanyl (Fentanyl, Abureyhan, Iran) 20cc with 80cc normal saline with infusion rate of 4ml/hour.	
City Tehran		Category Treatment - Drugs	
Postal code		Recruitment centers	
Approval date 2012-11-08, 1391/08/18			

1

Recruitment center

Name of recruitment center

Hazrat Rasoul Hospital

Full name of responsible person

Farnad Imani

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Niyayesh St, Sattarkhan St.

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Tehran

Sponsors / Funding sources

1

Sponsor

Name of organization / entity

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Full name of responsible person

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Grant name

Grant code / Reference number

Is the source of funding the same sponsor organization/entity?

Yes

Title of funding source

Vice Chancellor for Research of Tehran University of Medical Sciences

Proportion provided by this source

100

Public or private sector

empty

Domestic or foreign origin

empty

Category of foreign source of funding

empty

Country of origin

Type of organization providing the funding

empty

Person responsible for general inquiries

Contact

Name of organization / entity

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Sharing plan

Deidentified Individual Participant Data Set (IPD)

empty

Study Protocol

empty

Statistical Analysis Plan

empty

Informed Consent Form

empty

Clinical Study Report

empty

Analytic Code

empty

Data Dictionary

empty