

Nociceptive-Level (NoL)-guided analgia versus standerd practice during general remifentanil/propofol anesthesia in ASA 1-3 patients

Gepubliceerd: 28-02-2017 Laatste bijgewerkt: 18-08-2022

We hypothesize that, compared with standard management, NoL-guided anesthesia will lead to reduced incidence of inadequate anesthesia and increased hemodynamic stability. Furthermore, we hypothesize that NoL-guided anesthesia leads to reduced...

Ethische beoordeling	Positief advies
Status	Werving gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON27388

Bron

Nationaal Trial Register

Verkorte titel

NoLA

Aandoening

- Analgesia
- Anesthesia
- Nociceptive level index
- Intraoperative monitoring
- Haemodynamics

Ondersteuning

Primaire sponsor: Medasense

Overige ondersteuning: Medasense

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

1. Opioid and propofol consumption in total dose and dose/min; and

2. Incidence (number of episodes) and total duration of inadequate anesthesia

Toelichting onderzoek

Doel van het onderzoek

We hypothesize that, compared with standard management, NoL-guided anesthesia will lead to reduced incidence of inadequate anesthesia and increased hemodynamic stability. Furthermore, we hypothesize that NoL-guided anesthesia leads to reduced recovery times, reduced postoperative pain scores and PONV and faster PACU discharge (readiness) times.

Onderzoeksopzet

Perioperative period: intraoperative analgesia consumption and haemodynamics; postoperative pain, medication use, nausea/vomiting

Onderzoeksproduct en/of interventie

Nociceptive level guided analgesia

Contactpersonen

Publiek

Leiden University Medical Center (LUMC),
Department of Anesthesiology,
P.O. Box 9600
Albert Dahan
Albinusdreef 2
Leiden 2300 RC
The Netherlands
+31 (0)71 5262301

Wetenschappelijk

Leiden University Medical Center (LUMC),
Department of Anesthesiology,
P.O. Box 9600
Albert Dahan
Albinusdreef 2
Leiden 2300 RC
The Netherlands
+31 (0)71 5262301

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Age: 18-80 years;
2. ASA I-II-III
3. Elective open abdominal surgery or laparoscopic assisted abdominal surgery.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Unable to give written informed consent;
2. Use of epidural analgesia or local anesthesia (eg. transversus abdominal plain block, TAP block)
3. Non-elective surgery
4. Pregnancy/lactation;
5. BMI > 35 kg/m²;
6. Uncontrolled preoperative hypo- or hypertension (Mean arterial pressure < 60 mmHg or > 100 mmHg)
7. Preoperative Heart rate < 45/min or > 90/min;
8. Central nervous system disorder (neurologic/head trauma/uncontrolled epileptic seizures);

9. Illicit substance or alcohol abuse within 30 days;
10. Chronic use of pain medication within 30 days;
11. Chronic use of psychoactive drugs within 30 days;
12. Significant medical condition
 - a. Untreated or persistent peripheral or central cardiovascular disease
 - b. Severe pulmonary disease e.g. COPD gold 4 , FEV< 1.0 L/s, or (evidence of) elevated paCO₂ > 6.0 kPa
 - c. Significant hepatic disease with increased bilirubin, INR or low albumin
13. Beta blocker use

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blindering:	Enkelblind
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	25-07-2016
Aantal proefpersonen:	80
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies	
Datum:	28-02-2017

Soort:

Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL6002
NTR-old	NTR6500
Ander register	NL56370.058.15 : p16019

Resultaten