

Clinical trial results:

Intraoperative clonidine for prevention of postoperative agitation in children anaesthetised with sevoflurane (PREVENT AGITATION): a randomised, placebo-controlled, double-blind trial

Summary

EudraCT number	2014-001466-10
Trial protocol	DK
Global end of trial date	08 December 2015
Results information	
Result version number	v1 (current)
This version publication date	24 November 2018
First version publication date	24 November 2018

Trial information

Trial identification	
Sponsor protocol code	MY-clonidin-1
Additional study identifiers	
ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT02361476
WHO universal trial number (UTN)	-
Other trial identifiers	National Committee on Biomedical Research Ethics: H-2-2014-072, Danish Data Protection Agency: 30-1348

Notes:

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Paediatric regulatory details

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Is trial part of an agreed paediatric investigation plan (PIP)	No
Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial?	No
Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial?	No

Notes:

Results analysis stage	
Analysis stage	Final
Date of interim/final analysis	08 December 2015
Is this the analysis of the primary completion data?	Yes
Primary completion date	08 December 2015
Global end of trial reached?	Yes
Global end of trial date	08 December 2015
Was the trial ended prematurely?	No

Notes:

General information about the trial

Main objective of the trial:

We aimed to assess the effects of intravenous clonidine administered intraoperatively on the incidence of postoperative agitation, pain, and adverse events.

Protection of trial subjects:

All patients received the same protocol-based care.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	01 January 2015
Long term follow-up planned	Yes
Long term follow-up rationale	Safety
Long term follow-up duration	1 Months
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

Population of trial subjects

Subjects enrolled per country

Country: Number of subjects enrolled	Denmark: 379
Worldwide total number of subjects	379
EEA total number of subjects	379

Notes:

Subjects enrolled per age group	
In utero	0
Preterm newborn - gestational age < 37 wk	0
Newborns (0-27 days)	0
Infants and toddlers (28 days-23 months)	89
Children (2-11 years)	290
Adolescents (12-17 years)	0
Adults (18-64 years)	0
From 65 to 84 years	0

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85 years and over	0

Subject disposition

Recruitment

Recruitment details:

We recruited children between January and December, 2015, from: Rigshospitalet, Copenhagen University Hospital, Copenhagen; Vejle Hospital, Vejle, and Zealand University Hospital, Køge

Pre-assignment

Screening details:

Children aged 1–5 years, with an American Society of Anesthesiologists physical classification score of 1–2, who were scheduled for anaesthesia with sevoflurane and fentanyl.

Period 1	
Period 1 title	inclusion (overall period)
Is this the baseline period?	Yes
Allocation method	Randomised - controlled
Blinding used	Double blind
Roles blinded	Subject, Investigator, Monitor, Data analyst, Carer, Assessor
Blinding implementation details:	
Vials were identical, we masked the trial investigators, other health-care provider we extended the masking to the authors this Article who initially drafted two vers	s, and statisticians. Additionally, of the abstract for
Arms	
Are arms mutually exclusive?	Yes
Arm title	intervention
Arm description:	
$3 \mu g/kg$ of intravenous clonidine - aroun	d 20 min before the end of surgery.
Arm type	Experimental
Investigational medicinal product name	clonidine
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Solution for injection/infusion
Routes of administration	Intravenous bolus use
Dosage and administration details:	
3 μg/kg of intravenous clonidine	
Arm title	placebo
Arm description:	
equal quantity of intravenous isotonic sa	line - around 20 min before completion of surgery
Arm type	Placebo
Investigational medicinal product name	NaCl
Investigational medicinal product code	
Other name	

Solution for injection/infusion

Intravenous bolus use

Dosage and administration details:

Pharmaceutical forms
Routes of administration

equal quantity of intravenous isotonic saline

Number of subjects in period 1	intervention	placebo
Started	191	188
Completed	191	188

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Baseline characteristics

Reporting groups	
Reporting group title	intervention
Reporting group description:	·
3 μg/kg of intravenous clonidine - a	around 20 min before the end of surgery.
Reporting group title placebo	
Reporting group description:	·
equal quantity of intravenous isoto	nic saline - around 20 min before completion of surgery

Reporting group values	intervention	placebo	Total
Number of subjects	191	188	379
Age categorical			
<2 years			
Units: Subjects			
<2 years	46	43	89
≥2 years	145	145	290
Gender categorical			
Units: Subjects			
Female	37	38	75
Male	154	150	304

End points

End points reporting groups			
Reporting group title	intervention		
Reporting group description:			
3 μg/kg of intravenous clonidine - around	d 20 min before the end of surgery.		
Reporting group title	placebo		
Reporting group description:			
equal quantity of intravenous isotonic sa	line - around 20 min before completion of surgery		
Subject analysis set title	Postoperative agitation		
Subject analysis set type	Intention-to-treat		
Subject analysis set description:			
Nine were excluded from the primary outcome analysis because of missing data points.			
Primary: Postoperative agitation			
End point title	Postoperative agitation		
End point description:			
A Watcha score of more than 2 was cons	idered as postoperative agitation.		
End point type	Primary		
End point timeframe:			
measured every 15 min in the POCU			

End point values	intervention	placebo	
Subject group type	Reporting group	Reporting group	
Number of subjects analysed	187	183	
Units: Watcha score			
agitation	46	86	

Statistical analyses

Statistical analysis title	intention-to-treat
Statistical analysis description:	
The proportion of patients with one or m (scores 3 or 4).	ore incidence of agitation measured on the Watcha-Scale
Comparison groups	placebo v intervention
Number of subjects included in analysis	370
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	generalised linear models (GLM)

Adverse events

Adverse events information		
Timeframe for reporting adverse ev	vents:	
until discharge		
Assessment type	Systematic	
Dictionary used		
Dictionary name	MedDRA	
Dictionary version	10	
Reporting groups		
Reporting group title	intervention	
Reporting group description:		
3 μg/kg of intravenous clonidine -	around 20 min before the end of surgery.	
Reporting group title	placebo	
Reporting group description:		
equal quantity of intravenous isotonic saline - around 20 min before completion of surgery		

Serious adverse events	intervention	placebo	
Total subjects affected by serious adverse events			
subjects affected / exposed	2 / 191 (1.05%)	2 / 188 (1.06%)	
number of deaths (all causes)	0	0	
number of deaths resulting from adverse events	0	0	
General disorders and administration site conditions			
events leading to admission			
subjects affected / exposed	2 / 191 (1.05%)	2 / 188 (1.06%)	
occurrences causally related to treatment / all	0 / 2	0 / 2	
deaths causally related to treatment / all	0 / 0	0 / 0	

Frequency threshold for reporting non-serious adverse events: 0 %

Non-serious adverse events	intervention	placebo	
Total subjects affected by non-serious adverse events			
subjects affected / exposed	0 / 191 (0.00%)	5 / 188 (2.66%)	
General disorders and administration site conditions			
div	Additional description: Opioid-related side-effects Laryngeal spasm Prolonged anaesthesia		
subjects affected / exposed	0 / 191 (0.00%)	5 / 188 (2.66%)	
occurrences (all)	0	5	

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
09 July 2015	We increased the number of participants from 304 to 380.

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported

Online references

http://www.ncbi.nlm.nih.gov/pubmed/30169192