# The PaPa Trial: Paracetamol as an adjunct to intrapartum Remifentanil/PCA. An RCT of multimodal pain management during labor.

Published: 06-11-2019 Last updated: 10-04-2024

Primary objective: to research if Paracetamol reduces Remifentanil use when added to Remifentanil/PCA pain management during labour. Patients: Women in labour, using Remifantanil as pain management Intervention: Paracetamol intravenous (1 gram,...

Ethical review Approved WMO

**Status** Recruitment stopped

**Health condition type** Other condition

**Study type** Observational non invasive

## **Summary**

#### ID

NL-OMON49620

#### **Source**

**ToetsingOnline** 

#### **Brief title**

The PaPa Trial

#### **Condition**

- Other condition
- Pregnancy, labour, delivery and postpartum conditions

#### **Synonym**

contractions, Labour pain

#### **Health condition**

Pijn/ pijnbehandeling

#### Research involving

Human

#### **Sponsors and support**

**Primary sponsor:** Reinier de Graaf Groep

**Source(s) of monetary or material Support:** Subsidie wetenschapscommissie (WAC)

Reinier de Graaf

#### Intervention

Keyword: Intrapartum, Multimodal, Pain Management, Paracetamol

#### **Outcome measures**

#### **Primary outcome**

The sample size calculation will be performed on the primary outcome: administered Remifentanil doses after 60 minutes. Further analysis will be performed on Remifentanil bolus requests and actual administered Remifentanil doses at 30, 60, 90, 120, 150, 180 minutes from zerotime: start of treatment with Remifentanil and either Paracetamol IV or Placebo.

#### **Secondary outcome**

Maternal parameters: Need for oxygen administration, frequency of vomiting, time to full dilatation in minutes from start of pain treatment,

Neonatal parameters: Apgar Score\*7 after 5 minutes, Arterial pH level <7.20

# **Study description**

#### **Background summary**

Paracetamol is the primary option for treatment of acute pain. In the Netherlands, the primary choice for treating labour pain is epidural analgesia, followed by Remifentanil/ Patient Controlled Analgesia. The limited research of the use of Paracetamol for management of labour pain shows that Paracetamol provides similar pain relief, with fewer side effects, compared to Tramadol or

Pethidine.One study shows that Paracetamol as an adjunct to Patient Controlled Epidural Analgesia shows lower opioid consumption compared to Saline as adjunct. Also, duration of labour might be shortened when Paracetamol is used intrapartum. The moment Remifentanil was introduced in the Dutch obstetrical care, intravenous Paracetamol was not yet available on the Dutch market. Complications with use of Remifentanil are rare, but severe: desaturation, hypopnoea and bradycardia. Studies concerning postoperative multimodal pain management show that adding Paracetamol to treatment with opioids reduces opioid use. Paracetamol might reduce Remifentanil use when added to treatment as intrapartum pain management as Patient Controlled Analgesia.

#### Study objective

Primary objective: to research if Paracetamol reduces Remifentanil use when added to Remifentanil/PCA pain management during labour.

Patients: Women in labour, using Remifantanil as pain management Intervention: Paracetamol intravenous (1 gram, Paracetamol Fresenius Kabi 10

mg/ml)

Control: Placebo intravenous (100 ml Saline)

Outcome: Remifantanil/PCA requests and administered doses

#### Study design

Single centre double-blind randomised placebo controlled intervention trial.

#### Study burden and risks

Counselling for enrolment in the study might be a burden for the labouring woman. However, when need for pain treatment arises, counselling for Epidural Analgesia vs. Remifentanil/ PCA will take place anyhow. Further, the burden is minimal: number of Remifentanil requests and actual administered doses can be read from the infusion pump. The expectation is that the labouring woman will benefit from opioid reduction, with less desaturation, hypopnoea and bradycardia and therefore less need for administration of oxygen. Also, there is research on possible shorter duration of the dilatation process when Paracetamol is used as intra-partum pain management. Adverse effects of Paracetamol are rare.

## **Contacts**

#### **Public**

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## **Trial sites**

#### **Listed location countries**

Netherlands

# **Eligibility criteria**

#### Age

Adults (18-64 years) Elderly (65 years and older)

#### Inclusion criteria

Pregnant, in labour, >3 centimetres dilatation.

Pain request during labour, medication of choice: Remifentanil/ PCA.

Age 18 years and older.

Able to understand the written and verbal information about the PaPa Trial.

#### **Exclusion criteria**

Refusal for participation in the PaPa Trial
No adequate communication possible (e.g. language barrier)
Use of other opioids, e.g. Pethidine of epidural analgesia <4 hours prior to start of Remifentanil as pain management.
Hypersensitivity for Paracetamol.
Liver- of kidneydiseases
Alcohol abuse
Glucose-6-phosphate dehydrogenase

Use of other medication that contains Acetaminophen/ Paracetamol

# Study design

### **Design**

Study type: Observational non invasive

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Double blinded (masking used)

Control: Placebo

Primary purpose: Treatment

#### Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 15-06-2020

Enrollment: 80

Type: Actual

## Medical products/devices used

Product type: Medicine

Brand name: Perfalgan, Perfusalgan

Generic name: Paracetamol

Registration: Yes - NL intended use

Product type: Medicine

Brand name: Ultiva

Generic name: Remifentanil

Registration: Yes - NL outside intended use

## **Ethics review**

Approved WMO

Date: 06-11-2019

Application type: First submission

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

Approved WMO

Date: 07-12-2020

Application type: Amendment

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

# **Study registrations**

## Followed up by the following (possibly more current) registration

No registrations found.

## Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register ID

EudraCT EUCTR2019-002825-31-NL

CCMO NL70766.098.19

## **Study results**

Date completed: 11-12-2020

Actual enrolment: 79

#### **Summary results**

Trial is onging in other countries