

# A Randomized, Double-blind, Placebo-controlled Trial on the Prevention of Chronic Postoperative Pain after Inguinal Hernia and Knee Surgery by Postoperative Treatment with Tapentadol.

Published: 19-11-2019

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This study has been transitioned to CTIS with ID 2024-511010-21-00 check the CTIS register for the current data. To prevent the development of chronic postoperative pain after inguinal hernia surgery and knee replacement surgery and to to further...

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruiting
<b>Health condition type</b>	Other condition
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON52388

### Source

ToetsingOnline

### Brief title

Prevent

### Condition

- Other condition

### Synonym

Chronic pain

### Health condition

## **Research involving**

Human

## **Sponsors and support**

**Primary sponsor:** Leids Universitair Medisch Centrum

**Source(s) of monetary or material Support:** Ministerie van OC&W, Grunenthal

## **Intervention**

**Keyword:** Chronic postoperative pain, Tapentadol

## **Outcome measures**

### **Primary outcome**

The effect of tapentadol compared to placebo on the development of chronic pain in the first year after surgery

### **Secondary outcome**

1. The effect of Tapentadol compared to placebo on acute postoperative pain in patients planned for elective inguinal hernia surgery and knee replacement surgery.
2. The influence of the pre-operative pain profile (inhibitory as measured by CPM and facilitatory as measured by the presence of central sensitization) on the development of chronic postoperative pain in patients with and without chronic pain in the pre-operative phase.
3. The influence of Tapentadol and placebo on the individual pain profiles (inhibitory as measured by CPM and facilitatory as measured by the presence of central sensitization) and its influence on the development of chronic postoperative pain.

# Study description

## Background summary

The development of chronic postoperative pain is not well understood. We recently conducted a large trial in patients who underwent inguinal hernia surgery and investigated whether the pre-operative state of the endogenous pain modulatory system (a central pain modulatory system important for normal pain perception) could predict the development of postoperative chronic pain after inguinal hernia surgery. In this study we demonstrated that a normal functioning endogenous pain modulatory system was predictive for the development of postoperative chronic pain. Tapentadol is an analgesic able to influence the endogenous pain system by maintaining its function and we hypothesize that treatment with tapentadol will reduce the change to develop postoperative chronic pain.

## Study objective

This study has been transitioned to CTIS with ID 2024-511010-21-00 check the CTIS register for the current data.

To prevent the development of chronic postoperative pain after inguinal hernia surgery and knee replacement surgery and to further explore the mechanism behind the development of chronic postoperative pain.

## Study design

A double-blind, randomized, placebo-controlled, non-crossover longitudinal study.

## Intervention

Postoperative treatment with oral tapentadol sustained release (maximum of 100 mg twice daily) and placebo.

## Study burden and risks

The risk for the patients in the current study are minimal. Patients will be asked to use extra medication (outside the standard of care) for a period of 4 weeks. Most important side effects of the study medication are dizziness and somnolence. In case of unacceptable side effects the dose can be lowered during the study period.

## Contacts

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## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

Elderly (65 years and older)

### Inclusion criteria

1. Patients scheduled for elective inguinal hernia surgery or knee replacement surgery (to assess the severity of the knee osteoarthritis the Kellgren and Lawrance criteria will be used; see appendix 1).
2. American Society of Anesthesiologists score 1, 2 or 3
3. Age between 18-80 years

### Exclusion criteria

1. Pain scores > 3 (on a 11-point numerical rating scale, NRS) reported for most of the day during the past month (except for knee pain in patients planned for knee replacement surgery);
2. Regular use of anti-depressants or

anti-epileptics for any purpose, including SNRIs and gabapentinoids 3. Known allergies or contraindication to the study medication according to the SmPC (such as the presence of respiratory depression, severe asthma, paralytic ileus and acute intoxications with alcohol, hypnotics or other psychotropic active substances); 4. The presence of any chronic pain disorder; 5. Pregnancy/lactation; 6. Use of MAO-inhibitors or rifampicin within the last 14 days before inclusion; 7. Inability to perform psychophysical testing (eg. in case of cognitive or psychiatric disorders); 8. Inability to give informed consent; 9. Inability to communicate with the investigators.

## Study design

### Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Placebo
Primary purpose:	Prevention

### Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	09-11-2020
Enrollment:	540
Type:	Actual

### Medical products/devices used

Product type:	Medicine
Brand name:	Palexia
Generic name:	Tapentadol
Registration:	Yes - NL intended use

## Ethics review

Approved WMO

Date: 19-11-2019

Application type: First submission

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

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Approved WMO

Date: 13-01-2020

Application type: First submission

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

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Approved WMO

Date: 13-09-2021

Application type: Amendment

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

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Approved WMO

Date: 13-06-2022

Application type: Amendment

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

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Approved WMO

Date: 19-07-2022

Application type: Amendment

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

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## 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**

<b>Register</b>	<b>ID</b>
EU-CTR	CTIS2024-511010-21-00
EudraCT	EUCTR2018-004804-21-NL
CCMO	NL68622.058.18