

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

03 Jun 2026

### To comparison effect of intracameral adrenalin solution with concentration 1/10000 & 1/100000 on corneal endothelium and macular thickness after uneventful phacoemulsification

#### Protocol summary

##### Study aim

Comparison of different concentrations of intraocular adrenaline on corneal endothelium and macular thickness after cataract surgery.

##### Design

Clinical trial with control group: patients were divided into three groups 1. Patients who received balanced salt solution as placebo. 2. Patients who received epinephrine without preservative with concentration (1:10000). 3. Patients who received epinephrine without preservative with concentration (1:100000). with parallel groups Randomization: two blind groups, the patient and the person who measured the thickness of the macula and the number of endothelium cells and as a person who does not know about the groups. The sample size is 210 patients Phase 3 study

##### Settings and conduct

This study was conducted in Shiraz Khalili Hospital and Motahari and Poostachi Clinic. The patient and the person who measured the thickness of the macula and the number of endothelium cells were blinded.

##### Participants/Inclusion and exclusion criteria

Inclusion criteria: This study is conducted on 210 eyes, patients referred to the dermatology clinic for cataract surgery, all patients are selected in the same age group. Exclusion criteria: patients with a history of eye surgery; eye trauma; Systemic disease such as diabetes mellitus; high eye pressure; exfoliation syndrome; previous endothelium problems; Corneal edema; iris atrophy; macular problems; Complications during surgery (long Phico time, iris trauma, posterior capsule rupture) Complications after surgery

##### Intervention groups

1. Patients who received balanced salt solution as placebo. 2. Patients who received epinephrine without preservative with concentration (1:10000). 3. Patients who received epinephrine without preservative with

concentration (1:100000).

##### Main outcome variables

Number and characteristics of corneal endothelium cells and macular thickness

#### General information

##### Reason for update

##### Acronym

##### IRCT registration information

IRCT registration number: **IRCT20141019019581N5**

Registration date: **2023-09-04, 1402/06/13**

Registration timing: **retrospective**

Last update: **2023-09-04, 1402/06/13**

Update count: **0**

##### Registration date

2023-09-04, 1402/06/13

##### Registrant information

##### Name

Shahram Bamdad

##### Name of organization / entity

Shiraz University of Medical Sciences

##### Country

Iran (Islamic Republic of)

##### Phone

+98 71 3230 2830

##### Email address

shahrambamdad@yahoo.com

##### Recruitment status

**Recruitment complete**

##### Funding source

From shiraz university of medical sciences

##### Expected recruitment start date

2011-09-23, 1390/07/01

##### Expected recruitment end date

2015-02-20, 1393/12/01

**Actual recruitment start date**

empty

**Actual recruitment end date**

empty

**Trial completion date**

empty

**Scientific title**

To comparison effect of intracameral adrenalin solution with concentration 1/10000 & 1/100000 on corneal endothelium and macular thickness after uneventful phacoemulsification

**Public title**

To comparison effect of intracameral adrenalin solution with concentration 1/10000 & 1/100000 on corneal endothelium and macular thickness after uneventful phacoemulsification

**Purpose**

Treatment

**Inclusion/Exclusion criteria**

**Inclusion criteria:**

210patients with cataract that refer to poostchi clinic

**Exclusion criteria:**

Patients with a history of eye surgery Patients with a history of eye trauma Patients with a history of diabetes mellitus and high eye pressure Patients with a history of exfoliation syndrome Patients with a history of corneal edema Patients with a history of macular problems Patients with any complications during the operation, including long phaco time, iris trauma and capsule rupture

**Age**

No age limit

**Gender**

Both

**Phase**

3

**Groups that have been masked**

- Participant
- Outcome assessor
- Data analyser

**Sample size**

Target sample size: **210**

**Randomization (investigator's opinion)**

Randomized

**Randomization description**

Randomization and assignment were performed using research randomizer software (version 4.0; Urbaniak, G. C. & Plous, S.; 2011), the patients were entered into three groups: intervention 1, intervention 2 and control group.

**Blinding (investigator's opinion)**

Double blinded

**Blinding description**

Double blind technique patient and the person who measured endothelial cell count and macular thickness was blind to groups

**Placebo**

Not used

**Assignment**

Parallel

**Other design features**

Study design and participants: In this prospective interventional study, we randomly enrolled 210 eligible patients with age-related cataracts, all of whom were scheduled for unilateral phacoemulsification and intraocular lens (IOL) implantation. All the cases underwent a complete ocular examination including Snellen VA, applanation tonometry, slit-lamp exam, and dilated fundus examination. Lens Opacities Classification System (LOCS) III protocol (Chylack et al. 1993) was used preoperatively for grading of nuclear and cortical cataracts to rule out preoperative differences between the two groups. The mean surgery time (min), mean US time, mean US power(%), mean total US energy, and mean irrigation volume (mL) were measured during the surgery for all patients. Surgical Procedure: Before the surgery, tropicamide 1.0% was used to achieve mydriasis in all patients. All operations were performed by the same surgeon (S. B) and a similar phacoemulsification machine was used for all operations. A similar technique was used for all operations: Using general or local anesthesia, after preparation with Povidone Iodine 10%, a 3.0 mm temporal clear cornea incision was created. Then, the control group did not receive epinephrine; the epinephrine groups received either an injection of 0.2 mL preservative-free epinephrine (1:10000) or 0.2 mL preservative-free epinephrine (1:100000). In all the 3 groups, the same viscoelastic (HPMC, Ocucoat, Bausch & Lomb) was injected into the anterior chamber. Then, a continuous curvilinear capsulorhexis was created and Phacoemulsification performed using a stop-and-chop technique. The cortex was aspirated in irrigation/aspiration mode. Sodium hyaluronate 1% (Healon) was injected into the capsular bag and a foldable acrylic IOL implanted in the bag. Viscoelastic was irrigated from the anterior chamber and stromal hydration was used to close the corneal incisions. Topical chloramphenicol and prednisolone acetate eyedrops were given 6 times daily for the first week. Then, Chloramphenicol eye drop was continued 4 times daily for 3 weeks and the prednisolone acetate was slowly tapered during 4 weeks postoperatively and then discontinued. Postoperative examinations included BSCVA, slit-lamp biomicroscopy, IOP measurement, and indirect ophthalmoscopy. Study Outcome Measures: Corneal endothelial density: Central corneal endothelial photographs were taken with the Topcon SP-3000P specular microscope (Topcon Europe BV, Capelle a/d IJssel, the Netherlands) preoperatively and at 3 month postoperatively. The corneal endothelial morphology was calculated from a central cluster of 10 cells from each photograph. Three photographs were taken from the center and the measurements recorded and averaged. The hexagonality quantifying the percentage of endothelial cells with the ideal hexagonal cell shape was also calculated and recorded. The coefficient of variation in cell size (CV) was also calculated. A comparison between pre- and postoperative values was performed. Macular thickness:

OCT measurements were performed preoperatively and at 1, and 3 months postoperation. Macular thickness measurements were performed using Optical coherence tomography (Spectralis OCT, Heidelberg Engineering, SN:TR-KT-1457, Germany). The central 1.0 mm retinal thickness measurements were taken from the fast macular thickness maps, which were calculated from the 6 low-resolution diagonal scans. The 6 radial diagonal scans were used to quantitatively evaluate the macula. Before the inclusion, all patients in the study had normal macular morphology and thickness.

## Secondary Ids

empty

## Ethics committees

### 1

#### Ethics committee

##### Name of ethics committee

Ethics committee of Shiraz University of Medical Sciences

##### Street address

Zand Boulevard

##### City

Shiraz

##### Province

Fars

##### Postal code

7134814336

##### Approval date

2013-10-27, 1392/08/05

##### Ethics committee reference number

IR.SUMS.REC.1392.2863

## Health conditions studied

### 1

#### Description of health condition studied

Cataracts

#### ICD-10 code

H25.1

#### ICD-10 code description

Age-related nuclear cataract

## Primary outcomes

### 1

#### Description

Changes in macular thickness in the intervention groups

#### Timepoint

Before the intervention and three months later

#### Method of measurement

by specular device

## Secondary outcomes

### 1

#### Description

Corneal endothelium cell density

#### Timepoint

Before operation and 3 month after operation

#### Method of measurement

Specular microscope

### 2

#### Description

The size of corneal endothelium cells

#### Timepoint

Before the operation and 3 months after the operation

#### Method of measurement

Specular microscope

### 3

#### Description

The shape of corneal endothelium cells

#### Timepoint

Before the operation and 3 months after the operation

#### Method of measurement

Specular microscope

## Intervention groups

### 1

#### Description

Patients who received epinephrine without preservative with a concentration of 1.1000

#### Category

Treatment - Surgery

### 2

#### Description

Intervention group: Patients who received epinephrine without preservative with a concentration of 1.100000.

#### Category

Treatment - Surgery

### 3

#### Description

Control group: Patients received balanced salt serum (BSS) as placebo

#### Category

Treatment - Surgery

## Recruitment centers

### 1

#### Recruitment center

##### Name of recruitment center

Khalili Hospital

##### Full name of responsible person

Shahram Bamdad

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Khalili Hospital, Khalili Street, Shiraz  
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## Sponsors / Funding sources

### 1

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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**  
Shiraz University of Medical Sciences  
**Proportion provided by this source**  
100  
**Public or private sector**  
Public  
**Domestic or foreign origin**  
Domestic  
**Category of foreign source of funding**  
*empty*  
**Country of origin**  
**Type of organization providing the funding**  
Academic

## Person responsible for general inquiries

#### Contact

**Name of organization / entity**  
Shiraz University of Medical Sciences  
**Full name of responsible person**  
Doctor Shahram Bamdad  
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Assistant Professor of the Eye  
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**Other areas of specialty/work**  
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## Person responsible for scientific inquiries

#### Contact

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## Person responsible for updating data

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**Sharing plan**

**Deidentified Individual Participant Data Set (IPD)**

Yes - There is a plan to make this available

**Study Protocol**

No - There is not a plan to make this available

**Statistical Analysis Plan**

No - There is not a plan to make this available

**Informed Consent Form**

No - There is not a plan to make this available

**Clinical Study Report**

No - There is not a plan to make this available

**Analytic Code**

No - There is not a plan to make this available

**Data Dictionary**

No - There is not a plan to make this available

**Title and more details about the data/document**

We have no plans at this time

**When the data will become available and for how long**

We have no plans at this time

**To whom data/document is available**

We have no plans at this time

**Under which criteria data/document could be used**

We have no plans at this time

**From where data/document is obtainable**

We have no plans at this time

**What processes are involved for a request to access data/document**

We have no plans at this time

**Comments**