

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

01 Jul 2026

### Comparison of double tourniquet of arm and forearm in terms of the onset and duration of analgesia and pain of the tourniquet and the return of sensation and movement In the distal upper extremity surgery

#### Protocol summary

##### Study aim

Comparison of double tourniquet of arm and forearm in terms of the onset and duration of analgesia and pain of the tourniquet and the return of sensation and movement In the distal upper extremity surgery

##### Design

This study is clinical trial and double blind.70 patients candidate for orthopedic surgeries distal upper extremity Valiasr Hospital in Arak will inter this study.We will divide patients in 2 groups by simple randomization.Groups are parallel.

##### Settings and conduct

This study is clinical trial and double blind.70 patients candidate for orthopedic surgeries distal upper extremity Valiasr Hospital in Arak will inter this study.Outcome assessor and analyzer and participant don't aware from grouping.We check blood pressure, heart rate, oxygen saturation, pain, duration of sensory and motor block and use narcotic.

##### Participants/Inclusion and exclusion criteria

Inclusion criteria: Both of gender, age 50 to 20 years ,ASA class 1 and 2 , duration of surgery is within 40 to 90 minutes , no pregnancy ,absence of Raynaud's disease and scleroderma ,lack of peripheral vascular disease, absence of methemoglobinemia and sickle cell disease ,lack of underlying illness ,no addiction ,lack of epilepsy ,lake of kidney failure Exclusion criteria:Patient dissatisfaction ,hemoglobin is less than 10 , consumers of calcium channel blockers or beta-blockers

##### Intervention groups

We will inject 40 milliliter of Lidocaine 0.5% plus 1microgram in kilogram Dexmedetomidin in the double-arm tourniquet arm. We will inject 20 milliliter of Lidocaine 0.5% plus 0.5 microgram in kilogram Dexmedetomidin in double tourniquet forearm.We inject through the dorsal vein of the organ that Surgery is performed on it.

##### Main outcome variables

blood pressure, heart rate, oxygen saturation, pain, duration of sensory and motor block , amount of narcotic use

#### General information

##### Reason for update

##### Acronym

##### IRCT registration information

IRCT registration number: **IRCT20141209020258N119**  
Registration date: **2019-08-16, 1398/05/25**  
Registration timing: **registered\_while\_recruiting**

Last update: **2019-08-16, 1398/05/25**

Update count: **0**

##### Registration date

2019-08-16, 1398/05/25

##### Registrant information

##### Name

Fariba Farokhi

##### Name of organization / entity

Arak University of Medical Sciences

##### Country

Iran (Islamic Republic of)

##### Phone

+98 86 3222 2003

##### Email address

f.farokhi@arakmu.ac.ir

##### Recruitment status

**Recruitment complete**

##### Funding source

##### Expected recruitment start date

2019-04-09, 1398/01/20

##### Expected recruitment end date

2020-04-08, 1399/01/20

**Actual recruitment start date**

empty

**Actual recruitment end date**

empty

**Trial completion date**

empty

**Scientific title**

Comparison of double tourniquet of arm and forearm in terms of the onset and duration of analgesia and pain of the tourniquet and the return of sensation and movement In the distal upper extremity surgery

**Public title**

Comparison of two kind of tourniquet in terms of the onset and duration of analgesia and pain of the tourniquet and the return of sensation and movement In the distal upper extremity surgery

**Purpose**

Treatment

**Inclusion/Exclusion criteria****Inclusion criteria:**

Both gender Age 50 to 20 years ASA class 1 and 2  
Duration of surgery is within 40 to 90 minutes No pregnancy Absence of Raynaud's disease and scleroderma Lack of peripheral vascular disease Absence of methemoglobinemia and sickle cell disease Lack of underlying illness No addiction Lack of epilepsy Lack of Kidney failure Distal upper extremity fracture

**Exclusion criteria:**

Patient dissatisfaction Hemoglobin is less than 10  
Consumers of calcium channel blockers or beta-blockers

**Age**From **20 years** old to **50 years** old**Gender**

Both

**Phase**

2-3

**Groups that have been masked**

- Participant
- Outcome assessor
- Data analyser

**Sample size**Target sample size: **70****Randomization (investigator's opinion)**

Randomized

**Randomization description**

Simple individual randomization with randomization with envelopes in two groups A and B. In this method, we selected a number of cards or letters as an intervention and the same number of cards for the control group, then the cards were merged. One card was taken out and its allocation was registered and the card was returned to the other cards after leaving. Then the cards are merged again and we remove another card. This process continues to reach a random sequence according to sample size.

**Blinding (investigator's opinion)**

Double blinded

**Blinding description**

This study is double blind. Researcher who complete

questionnaire and analyzer and participant are blind (double blind). Outcome assessor and analyzer and participant don't aware from grouping. The person evaluating the outcome is unaware of the grouping. Groups A and B are available to analyzer and outcome assessor.

**Placebo**

Not used

**Assignment**

Parallel

**Other design features****Secondary Ids**

empty

**Ethics committees****1****Ethics committee****Name of ethics committee**

Ethics committee of Arak University of Medical Sciences

**Street address**

Ethics committee, Research center, Payambar Azam complex, Basij square, Sardasht, Arak

**City**

Arak

**Province**

Markazi

**Postal code**

3848176941

**Approval date**

2019-04-07, 1398/01/18

**Ethics committee reference number**

IR.ARAKMU.REC.1398.007

**Health conditions studied****1****Description of health condition studied**

Distal upper extremity fracture

**ICD-10 code**

S52

**ICD-10 code description**

Fracture of forearm

**Primary outcomes****1****Description**

Mean arterial blood pressure

**Timepoint**

Before intervention, 5, 10, 15, 20 minutes and then every 10 minutes to end of surgery and after emptying the tourniquet and recovery

**Method of measurement**

Barometer

## 2

### **Description**

Heart rate

### **Timepoint**

Before intervention, 5, 10, 15, 20 minutes and then every 10 minutes to end of surgery and after emptying the tourniquet and recovery

### **Method of measurement**

Count

## 3

### **Description**

Percent of oxygen saturation

### **Timepoint**

Before intervention, 5, 10, 15, 20 minutes and then every 10 minutes to end of surgery and after emptying the tourniquet and recovery

### **Method of measurement**

Pulse oximetry

## 4

### **Description**

Duration of motor block

### **Timepoint**

Every 5 minute

### **Method of measurement**

Minute

## 5

### **Description**

Duration of sensory block

### **Timepoint**

Every 1minute

### **Method of measurement**

Minute

## 6

### **Description**

Mean use of narcotic

### **Timepoint**

24 hour after surgery

### **Method of measurement**

Milligram

## 7

### **Description**

Pain

### **Timepoint**

After filling the tourniquet, at the time of 15, 30 and 45 and every 15 minutes until the end of surgery

### **Method of measurement**

Visual Analogue Scale Questionnaire

## **Secondary outcomes**

empty

## **Intervention groups**

### 1

#### **Description**

Intervention group: We will inject 40 milliliter of Lidocaine 0.5% (Daropakhsh Co) plus 1microgram in kilogram Dexmedetomidin (Exir Co) in the double-arm tourniquet arm.A double-cuff tourniquet will be placed on the proximal arm, and the patient's blood pressure will be measured before the inflation of the tourniquet. After exsanguination with an esmarch bandage, the cuff will be inflated to a pressure 150 mmHg above the systolic blood pressure.

#### **Category**

Treatment - Other

### 2

#### **Description**

Intervention group: We will inject 20 milliliter of Lidocaine 0.5% (Daropakhsh Co) plus 0.5 microgram in kilogram Dexmedetomidin (Exir Co) in double tourniquet forearm.It inject through the dorsal vein of the organ that Surgery is performed on it.A double-cuff tourniquet will be placed on the proximal arm, and the patient's blood pressure will be measured before the inflation of the tourniquet. After exsanguination with an esmarch bandage, the cuff will be inflated to a pressure 150 mmHg above the systolic blood pressure.

#### **Category**

Treatment - Other

## **Recruitment centers**

### 1

#### **Recruitment center**

##### **Name of recruitment center**

Valiasr hospital

##### **Full name of responsible person**

Dr Hesamodin Modir

##### **Street address**

Valiasr hospital, Valiasr squire

##### **City**

Arak

##### **Province**

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##### **Postal code**

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##### **Phone**

+98 86 3222 2003

##### **Email**

modir.he@gmail.com

## **Sponsors / Funding sources**

### 1

#### **Sponsor**

##### **Name of organization / entity**

Arak University of Medical Sciences

**Full name of responsible person**

Dr Mohammad Arjmandzadegan

**Street address**

Research Center, Payambar Azam Complex, Basij square, Sardasht, Arak

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**Email**

arjmandzadegan@arakmu.ac.ir

**Grant name****Grant code / Reference number****Is the source of funding the same sponsor organization/entity?**

Yes

**Title of funding source**

Arak 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**

Arak University of Medical Sciences

**Full name of responsible person**

Dr Esmaeel Moshiri

**Position**

Associate professor

**Latest degree**

Specialist

**Other areas of specialty/work**

Anesthesiology

**Street address**

Shahid Shirodi street, Valiasr square, Valiasr hospital

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**Email**

modir.he@gmail.com

**Web page address****Person responsible for scientific inquiries****Contact****Name of organization / entity**

Arak University of Medical Sciences

**Full name of responsible person**

Dr Hesamedin Modir

**Position**

Associate professor

**Latest degree**

Specialist

**Other areas of specialty/work**

Anesthesiology

**Street address**

Valiasr Hospital, Valiasr square, Shahid Shirodi street

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**Province**

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modir.he@gmail.com

**Person responsible for updating data****Contact****Name of organization / entity**

Arak University of Medical Sciences

**Full name of responsible person**

Amirreza Modir

**Position**

Medicine student

**Latest degree**

A Level or less

**Other areas of specialty/work**

General Practitioner

**Street address**

Payambar Azam Complex, Basij square, Sardasht, Arak

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**Province**

Markazi

**Postal code**

3848176941

**Phone**

+98 86 3222 2003

**Email**

modir@gmail.com

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

Yes - There is a plan to make this available

**Study Protocol**

Yes - There is a plan to make this available  
**Statistical Analysis Plan**  
Yes - There is a plan to make this available  
**Informed Consent Form**  
Yes - There is a plan to make this available  
**Clinical Study Report**  
Yes - There is a plan to make this available  
**Analytic Code**  
Yes - There is a plan to make this available  
**Data Dictionary**  
Yes - There is a plan to make this available  
**Title and more details about the data/document**  
When we publish article in journal

**When the data will become available and for how long**  
After the article is published  
**To whom data/document is available**  
researcher in university  
**Under which criteria data/document could be used**  
If there are additional questions  
**From where data/document is obtainable**  
Dr Modir  
**What processes are involved for a request to access data/document**  
They have to write letters to the professors and the university  
**Comments**