

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

10 Jun 2026

### Comparison the efficacy and safety of needle aspiration and intercostals tube draining, in management of neonatal pneumothorax that receiving assisted ventilation

#### Protocol summary

##### Study aim

To compare the efficacy and safety of needle aspiration and chest tube drainage in the management of neonatal pneumothorax

##### Design

clinical trial with Intervention and control groups and with a parallel design of 116 patients, enrolled in 2019, permuted block randomization, without blinding

##### Settings and conduct

116 neonates with pneumothorax were selected in 3 hospital(Ali Asghar children's hospital, Akbarabadi hospital and Mahdiyeh hospital). Patients were randomly divided into intervention (needle aspiration method) and control (Chest tube method) groups. After pneumothorax discharge, parameters such as gestational age, birth weight, type of delivery, gender, Apgar score, treatment rate, mortality rate, need for invasive and noninvasive ventilation, blood culture and CRP results, duration of antibiotic use and length of hospitalization, and pneumothorax involvement side were compared in both groups

##### Participants/Inclusion and exclusion criteria

Inclusion criteria: Parent's Consent, neonates with respiratory support (including endotracheal tube or CPAP or requires more than 40% oxygen) and chest pneumothorax were diagnosed by a physician who were hospitalized in NICU ward , aged lower than 28 day  
Exclusion criteria: No parent's Consent, congenital anomaly, lung hypoplasia, peters syndrome, congenital heart disease, pleural effusion, Tension pneumothorax or emergency draining before x-ray.

##### Intervention groups

In this study, patients were divided 2 group: group 1(intervention): in this group draining of pneumothorax was performed with needle aspiration method group2 (control ): in this group draining of pneumothorax was performed with chest tube

#### Main outcome variables

Successful treatment rate , Complications related to the procedures

#### General information

##### Reason for update

##### Acronym

##### IRCT registration information

IRCT registration number: **IRCT20190810044491N1**

Registration date: **2019-09-08, 1398/06/17**

Registration timing: **retrospective**

Last update: **2019-09-08, 1398/06/17**

Update count: **0**

##### Registration date

2019-09-08, 1398/06/17

##### Registrant information

##### Name

Zinat Shakeri

##### Name of organization / entity

##### Country

Iran (Islamic Republic of)

##### Phone

+98 21 2304 6253

##### Email address

shakeri.z@iums.ac.ir

##### Recruitment status

**Recruitment complete**

##### Funding source

##### Expected recruitment start date

2019-02-20, 1397/12/01

##### Expected recruitment end date

2019-08-23, 1398/06/01

##### Actual recruitment start date

2019-02-20, 1397/12/01

**Actual recruitment end date**

2019-08-23, 1398/06/01

**Trial completion date**

2019-08-23, 1398/06/01

**Scientific title**

Comparison the efficacy and safety of needle aspiration and intercostals tube draining, in management of neonatal pneumothorax that receiving assisted ventilation

**Public title**

Comparing Efficacy of Chest Tube drainage and Needle Aspiration for Pneumothorax Treatment in neonates

**Purpose**

Treatment

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

Parent's consent to participate in the study Aged lower than 28 day Neonates with respiratory support (including endotracheal tube or CPAP or requires more than 40% oxygen) and chest pneumothorax were diagnosed by a physician who were hospitalized in NICU ward

**Exclusion criteria:**

No parent's consent Tension pneumothorax or emergency draining before x-ray Lung hypoplasia Congenital heart disease Meconium Aspiration Syndrome (MAS) Congenital Anomalies peters syndrome pleural effusion

**Age**

From **1 day** old to **28 days** old

**Gender**

Both

**Phase**

N/A

**Groups that have been masked**

*No information*

**Sample size**

Target sample size: **116**

Actual sample size reached: **116**

**Randomization (investigator's opinion)**

Randomized

**Randomization description**

In this study was used permuted block randomization. Pateints assigned 2 groups: group A (chest tube method) and group B (Needle Aspiration). Two possible combinations were created for groups AB and BA. Then one of these compounds was randomly selected. This process was repeated several times to obtain the required sample size.

**Blinding (investigator's opinion)**

Not blinded

**Blinding description****Placebo**

Not used

**Assignment**

Parallel

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

empty

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

Ethics committee of Iran University of Medical Sciences

**Street address**

No. 193, Modares Highway, Vahid Dastgerdy st, Aliasghar Children Hospital

**City**

Tehran

**Province**

Tehran

**Postal code**

1919816766

**Approval date**

2019-02-19, 1397/11/30

**Ethics committee reference number**

IR.IUMS.FMD.REC.1398.083

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

Pneumothorax, Chest Tube, Needle Aspiration,

**ICD-10 code**

J93

**ICD-10 code description**

Pneumothorax

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

Successful treatment rate

**Timepoint**

Before and after draining of pneumothorax

**Method of measurement**

X-ray and physical examination (neonatologist)

**Secondary outcomes****1****Description**

Complications related to the procedures (mortality rate, need for invasive and noninvasive ventilation, blood culture and CRP results, duration of antibiotic use and length of hospitalization, )

**Timepoint**

After draining of pneumothorax

**Method of measurement**

Physical examination and laboratory test

**Intervention groups**

## 1

### Description

Intervention group (needle aspiration method): In this group (48 neonates), The thoracentesis was done by aspiration of air using a 10 to 20 cc syringes with a 23 to 25-gauge or 18 to 24 angiocath from the second or third intercostal space and precisely at the top of the rib (to prevent blood vessel damage) in the midclavicular line.

### Category

Treatment - Surgery

## 2

### Description

Control group(chest tube method): in this group (68 neonates), Thoracostomy was performed using the chest tube technique by insertion of 10-12F tubes after prep & drep and local anesthesia. A small incision was made at the mid-axillary line of the sixth intercostal space

### Category

Treatment - Surgery

## Recruitment centers

### 1

#### Recruitment center

**Name of recruitment center**

Ali Asghar Children's Hospital

**Full name of responsible person**

Zinat Shakeri

**Street address**

Modares highway, Vahid Dastgerdy st, Aliasghar Children's Hospital

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### 2

#### Recruitment center

**Name of recruitment center**

Akbar Abadi Hospital

**Full name of responsible person**

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**Street address**

Molavi st, Bagh Ferdos st, Akbar Abadi hospital

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### 3

#### Recruitment center

**Name of recruitment center**

Mahdiyeh Hospital

**Full name of responsible person**

Zinat shakeri

**Street address**

Shahid Rajabnia st, Shishegar alley, Fadayian Islam st, Shosh sq, Mahdiyeh hospital

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## Sponsors / Funding sources

### 1

#### Sponsor

**Name of organization / entity**

Iran University of Medical Sciences

**Full name of responsible person**

Abas motevalian

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

No

**Title of funding source**

Iran 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**

Iran University of Medical Sciences

**Full name of responsible person**

Zinat Shakery

**Position**

Fellow

**Latest degree**

Specialist

**Other areas of specialty/work**

Pediatrics

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**Latest degree**

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**Other areas of specialty/work**

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

No - There is not a plan to make this available

**Justification/reason for indecision/not sharing IPD**

There is no more information.

**Study Protocol**Undecided - It is not yet known if there will be a plan to  
make this available**Statistical Analysis Plan**

No - There is not a plan to make this available

**Informed Consent Form**

Yes - There is a plan to make this available

**Clinical Study Report**

Not applicable

**Analytic Code**

Not applicable

**Data Dictionary**

Not applicable

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

Not applicable

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

Not applicable

**To whom data/document is available**

Not applicable

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

Not applicable

**From where data/document is obtainable**

Not applicable

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

Not applicable

**Comments**