

Clinical Trial Protocol

Iranian Registry of Clinical Trials

07 Jul 2026

Comparing the efficacy of dexmedetomidin and ketamin infusion in reducing pain following preoperative propofol injection

Protocol summary

Study aim

Effect of premedication with dexmedetomidin and ketamin will be evaluated on post injectional pain of propofol before surgery.

Design

A total of 100 patients will be selected based on studies and statistical calculations that meet the inclusion criteria after surgery and each patient is discharged from anesthesia, they are divided into two groups of intervention and control. The intervention group will receive dexmedetomidin and the control group will receive ketamin. The study is a randomized, double-blind, placebo-controlled clinical trial.

Settings and conduct

Patients will be randomly divided into two groups according to the random number table. control group will receive 0.5 mg/kg ketamin diluted in 20cc normal saline and intervention group will receive the same dose with dexmedetomidin within 10 minutes by infusion. Both ketamin and dexmedetomidine every morning prior to surgery according to the number of operations will be prepared by executor of plan. There will be two kind of envelopes. Envelope A contains syringe containing ketamine and envelope B contains syringe containing dexmedetomidin. Each patient according to whether they are A or B code, will receive these envelopes by anesthesiologist who is unaware of the type of medicine. In this study patient and anesthesiologist are blinded.

Participants/Inclusion and exclusion criteria

Entrance: Patients under elective surgery I and II ASA Class. between 15 to 65 years old Exit: Patients with cardiovascular, hepatic, renal disease; need for RSI of anesthesia using sedative drugs in the last 24 hours.

Intervention groups

control group will receive 0.5 mg/kg ketamin diluted in 20cc normal saline and intervention group will receive the same dose with dexmedetomidin within 10 minutes by infusion.

Main outcome variables

Effect of premedication with dexmedetomidin and ketamin on post injectional pain of propofol.

General information

Reason for update

Acronym

IRCT registration information

IRCT registration number: **IRCT20150125020795N8**

Registration date: **2019-12-05, 1398/09/14**

Registration timing: **registered_while_recruiting**

Last update: **2019-12-05, 1398/09/14**

Update count: **0**

Registration date

2019-12-05, 1398/09/14

Registrant information

Name

Samad Golzari

Name of organization / entity

Tabriz University of Medical Sciences

Country

Iran (Islamic Republic of)

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+98 41 3556 6183

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golzaris@tbzmed.ac.ir

Recruitment status

Recruitment complete

Funding source

Expected recruitment start date

2019-10-15, 1398/07/23

Expected recruitment end date

2020-04-11, 1399/01/23

Actual recruitment start date

empty

Actual recruitment end date

empty

Trial completion date

empty

Scientific title

Comparing the efficacy of dexmedetomidin and ketamin infusion in reducing pain following preoperative propofol injection

Public title

Effect of Premedication with dexmedetomidin and ketamin in Severity of Pain after Infusion of Propofol.

Purpose

Treatment

Inclusion/Exclusion criteria**Inclusion criteria:**

All of Patients who Being a Candidate for Elective Surgery and Based on ASA Classification are 1 or 2 ASA Class

Exclusion criteria:

Patients with Cardiovascular, Hepatic and Kidney Disease. Need for Rapid Sequence Induction of Anesthesia. Patients with Psychiatric Disorders. Patients under Prescription of Sedative Drugs in the last 24 hours.

Age

From **15 years** old to **65 years** old

Gender

Both

Phase

N/A

Groups that have been masked

- Participant
- Care provider

Sample size

Target sample size: **100**

Randomization (investigator's opinion)

Randomized

Randomization description

In this study we use balanced randomization that at first four blocks with 9 combination will be formed and blocks will be numbered from 1to9. Compared to the simple randomization method, in this method the size of equilibrium of intervention and placebo groups will be established both during and at the end of study(randomization method is pre and post accidental blocks and will be done by randlist software)

Blinding (investigator's opinion)

Double blinded

Blinding description

The anesthesiologist who has responsible for the patients management of anesthesia will administer the medicine(s) via coded syringes had been prepared previously and will not aware of the injected drug(dexmedetomidin or ketamin), and anesthesia nurse who is responsible for collection of patients information and study variables and is unaware of the administered drug will record the check- list during surgery and in the recovery.Also the patient is unaware of the injected medicine.

Placebo

Not used

Assignment

Parallel

Other design features**Secondary Ids**

empty

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

Ethics committee of Tabriz University of Medical Sciences

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Faculty of Medicine, Golgasht Street

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Tabriz

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East Azarbaijan

Postal code

5166614766

Approval date

2019-10-15, 1398/07/23

Ethics committee reference number

IR.TBZMED.REC.1398.712

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

Post Injectional Pain of Propofol

ICD-10 code

T88.59

ICD-10 code description

Other complications of anesthesia

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

Post injectional pain of propofol

Timepoint

Amount of pain evaluate on 5, 10, 15 and 20 seconds after injection of propofol.

Method of measurement

Four Numerical Verbal Rating Scale

Secondary outcomes

empty

Intervention groups**1****Description**

intervention group will receive 0.5 mg/kg dexmedetomidin diluted in 20cc normal saline within 10 minutes intravenously.

Category

Treatment - Drugs

2**Description**

control group will receive 0.5 mg/kg ketamin diluted in 20cc normal saline within 10 minutes intravenously.

Category

Treatment - Drugs

Recruitment centers**1****Recruitment center****Name of recruitment center**

Emam Reza hospital

Full name of responsible person

Samad Eslaam Jamal Golzari

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Sponsors / Funding sources**1****Sponsor****Name of organization / entity**

Tabriz University of Medical Sciences

Full name of responsible person

Dr Abolghasem Joyban

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Vice chancellor for research, Daneshgah street, Tabriz

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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

Tabriz 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**

Tabriz University of Medical Sciences

Full name of responsible person

Samad Eslam Jamal Golzari

Position

Consultant

Latest degree

Specialist

Other areas of specialty/work

Anesthesiology

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

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

Undecided - It is not yet known if there will be 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

All collected deidentified IPD, IPD collected for the primary outcome measure are to be shared

When the data will become available and for how long

Starting 6 months after publication .

To whom data/document is available

Documents will be available for people working in academic institutions and also people working in businesses.

Under which criteria data/document could be used

There will be no specific limitations to the utilization of the data .

From where data/document is obtainable

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

Correspondence through email only .

Comments