

Clinical Trial Protocol

Iranian Registry of Clinical Trials

10 Jun 2026

Comparison of standard and lateral methods of laryngeal mask airway insertion in pediatric airway management (Number of attempts to insert laryngeal mask, mucosal damage, duration of laryngeal mask insertion, airway pressure and chest movement)

Protocol summary

Mucosal damage, Airway pressure, Duration of laryngeal mask implantation, Chest movement

Study aim

Comparison of standard and lateral methods of laryngeal mask airway insertion in pediatric airway management (Number of attempts to insert laryngeal mask, mucosal damage, duration of laryngeal mask insertion, airway pressure and chest movement)

Design

In a concealed, randomized, double-blinded, controlled clinical trial with a parallel-group design of 68 patients, simple randomization took place (Box of numbers)

Settings and conduct

This study was performed in Shahid Motahari Hospital in Urmia to investigate the effect of laryngeal masks on airway management (Number of attempts to insert laryngeal mask, mucosal damage, duration of laryngeal mask insertion, airway pressure and chest movement) of patients undergoing elective inguinal hernia repair surgeries study as randomized double-blinded, controlled clinical trial patients and their parents were unaware of being in the intervention groups and a clinical evaluation was performed on the placement of patients in the study groups who were unaware

Participants/Inclusion and exclusion criteria

Inclusion criteria: Children between two and six years old, Candidate for elective hernia repair surgery with ASA1 and ASA2 under general anesthesia. Exclusion criteria: ASA3 patients and above and children with upper airway infections, mouth opening limitation, children with congenital heart disease, as well as patients undergoing emergency surgery who are at risk of aspiration of gastric contents.

Intervention groups

In the first group, the laryngeal mask was standardized, and in the second group, it was installed in lateral.

Main outcome variables

Number of attempts to implant a laryngeal mask,

General information

Reason for update

Acronym

IRCT registration information

IRCT registration number: **IRCT20170516033992N6**

Registration date: **2021-01-06, 1399/10/17**

Registration timing: **registered_while_recruiting**

Last update: **2021-01-06, 1399/10/17**

Update count: **0**

Registration date

2021-01-06, 1399/10/17

Registrant information

Name

Name of organization / entity

Country

Iran (Islamic Republic of)

Phone

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Email address

karami.t@umsu.ac.ir

Recruitment status

Recruitment complete

Funding source

Expected recruitment start date

2020-09-15, 1399/06/25

Expected recruitment end date

2021-03-15, 1399/12/25

Actual recruitment start date

empty

Actual recruitment end date

empty

Trial completion date

empty

Scientific title

Comparison of standard and lateral methods of laryngeal mask airway insertion in pediatric airway management (Number of attempts to insert laryngeal mask, mucosal damage, duration of laryngeal mask insertion, airway pressure and chest movement)

Public title

Comparison of laryngeal mask insertion in pediatric airway management

Purpose

Treatment

Inclusion/Exclusion criteria**Inclusion criteria:**

Patients candidates for selective inguinal hernia repair surgery ASA1 and ASA2 Obtaining informed consent

Exclusion criteria:

ASA3 and higher patients ??? Children with upper airway infections Limitation of mouth opening Children with congenital heart disease Patients undergoing emergency surgery who are at risk of aspiration of gastric contents

Age

From **2 years** old to **6 years** old

Gender

Both

Phase

3

Groups that have been masked

- Participant
- Outcome assessor

Sample size

Target sample size: **68**

Randomization (investigator's opinion)

Randomized

Randomization description

In this study, simple randomization took place in a way that numbers from 1 to 68 were written separately on paper pieces and put inside a blinded box. For each patient, a piece of paper was drawn out. If the number drawn for the patient was even it went to group A and if it was an odd number, patients were attributed to group B.

Blinding (investigator's opinion)

Double blinded

Blinding description

Patients and their parents were unaware of being in the intervention groups and the clinical evaluator was unaware of the placement of patients in the study groups.

Placebo

Not used

Assignment

Parallel

Other design features**Secondary Ids**

empty

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

Ethics committee of Urmia University of Medical Sciences

Street address

No30., Jihad Sq., Resalat St., Urmia University of Medical Sciences, Urmia, Iran

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Urmia

Province

West Azarbaijan

Postal code

5715833631

Approval date

2020-09-13, 1399/06/23

Ethics committee reference number

IR.UMSU.REC.1399.188

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

Inguinal hernia

ICD-10 code

K40

ICD-10 code description

Inguinal hernia

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

Chest movement

Timepoint

Through anesthesia procedure in the operation room

Method of measurement

Observation (No movement, Partially good, Adequately good)

2**Description**

Airway pressure

Timepoint

Through anesthesia procedure in the operation room

Method of measurement

Adjustable Pressure Limiting results

3**Description**

Time of Laryngeal mask insertion

Timepoint

Through anesthesia procedure in the operation room

Method of measurement

Clock

4**Description**

Mucous damage

Timepoint

After extracting the mask

Method of measurement

presence of blood on the mask

5**Description**

Times tried to put the laryngeal mask on

Timepoint

In time of getting the mask

Method of measurement

Observation

Secondary outcomes

empty

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

Intervention group: In the lateral method, the anesthetized patient's head is held with one hand, and the proximal part of the mask is inserted into the oral cavity with the same standard method so that the entire cuff is placed inside the mouth. Then rotate 45 degrees to the side so that only the side of the tongue is in contact with the side edge of the mask. Then use your thumb and forefinger to push the mask forward as much as possible to feel resistance to it. The mask is then rotated 45 degrees in the opposite direction of the previous rotation and placed in the midline position. Then, its cuff was filled to the standard size with a special manometer and its leakage was checked

Category

Treatment - Devices

2**Description**

Control group: In the standard method, the anesthetized patient's head is held with one hand, the proximal part of the laryngeal mask is inserted into the oral cavity with the same standard method so that all the cuffs are inside the mouth. Then, we insert the airway mask into the mouth by the head extension. Next, we push the laryngeal mask using thumb and forefinger forward as much as possible to feel resistance. The mask is then placed in the midline position, and the cuff is filled to the standard size with a special manometer and leaks are checked. In this method, we do not rotate the head 45 degrees and according to the usual procedure, the

laryngeal mask is inserted as routine.

Category

Treatment - Devices

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

Shahid Motahhari Hospital

Full name of responsible person

Tohid Karami

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

Oroumia University of Medical Sciences

Full name of responsible person

Iraj Mohebbi

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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

Oroumia 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**

Oroumia University of Medical Sciences

Full name of responsible person

Tohid Karami

Position

Assistant professor

Latest degree

Subspecialist

Other areas of specialty/work

Anesthesiology

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

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Full name of responsible person

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Position

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Latest degree

Subspecialist

Other areas of specialty/work

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

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Other areas of specialty/work

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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

Undecided - It is not yet known if there will be 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

Information can be provided without patients' names

When the data will become available and for how long

1 year after completion of the study

To whom data/document is available

Faculty researchers

Under which criteria data/document could be used

Just for research targets

From where data/document is obtainable

Sending an email to Dr. Tohid Karami by academic researchers for sending anonymous data that takes about 2 weeks karami.tohid@gmail.com

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

Just sending an email to DR. Tohid Karami

karami.tohid@gmail.com

Comments

