

Clinical Trial Protocol

Iranian Registry of Clinical Trials

22 Jul 2026

Evaluation of the effect of gabapentin against clonidine in reducing the dose of sedation in patients with mechanical artificial ventilation

Protocol summary

Study aim

Comparison of the effect of gabapentin with clonidine in reducing the dose of fentanyl for sedation in mechanically ventilated patients

Design

Sampling will be done by the available method, then according to the calculation, 30 people in each group will be randomly assigned to the class (for matching in terms of gender, age). For this purpose, during 6 months in Imam Hossein Hospital, Intensive Care Unit, all patients with endotracheal tubes who are under mechanical ventilation and have the conditions to enter the study are divided into three categories based on the table of random numbers. We group one group of gabapentin tablets three times a day and one group of clonidine tablets four times a day, and the third group is given midazolam, which is our control group, we gavage and fentanyl is prescribed in all three groups. The amount of fentanyl required to achieve sedation in the range of 3 to 4 cryptographic points is recorded in three groups and finally compared.

Settings and conduct

The study is a clinical trial and will be performed in the intensive care unit of Imam Hossein Hospital.

Participants/Inclusion and exclusion criteria

Age over 18 years and patients connected to mechanical ventilation

Intervention groups

We give a group of gabapentin 300 mg tablets three times a day and a group of 0.1 mg clonidine tablets four times a day, and the third group is given midazolam micro 20 to 100 kg per kilogram, which is our control group. Fentanyl is administered as PRN in all three groups at 25 to 200 micrograms per hour of infusion. The amount of fentanyl required to achieve sedation in the range of 3 to 4 cryptographic points is recorded in three groups and finally compared.

Main outcome variables

Adjusting Opioid use

General information

Reason for update

Acronym

IRCT registration information

IRCT registration number: **IRCT20210405050848N2**

Registration date: **2021-06-13, 1400/03/23**

Registration timing: **prospective**

Last update: **2021-06-13, 1400/03/23**

Update count: **0**

Registration date

2021-06-13, 1400/03/23

Registrant information

Name

Jafar Vakili

Name of organization / entity

Country

Iran (Islamic Republic of)

Phone

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Email address

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Recruitment status

Recruitment complete

Funding source

Expected recruitment start date

2021-07-23, 1400/05/01

Expected recruitment end date

2022-01-21, 1400/11/01

Actual recruitment start date

empty

Actual recruitment end date

empty

Trial completion date

empty

Scientific title

Evaluation of the effect of gabapentin against clonidine in reducing the dose of sedation in patients with mechanical artificial ventilation

Public title

Adjusting opioide use

Purpose

Treatment

Inclusion/Exclusion criteria**Inclusion criteria:**

Age over 18 years Patients connected to a mechanical ventilator

Exclusion criteria:

History of Clonidine allergy History of Gabapentine allergy

Age

From **18 years** old

Gender

Both

Phase

3

Groups that have been masked

- Participant
- Investigator

Sample size

Target sample size: **90**

Randomization (investigator's opinion)

Randomized

Randomization description

After the entry of participants according to the inclusion criteria, the pre-test will be performed using a cryptographic evaluation checklist, then randomly assigned by the head nurse based on blocking. Given that 90 people must be included in the study and there will be three groups (gabapentin, clonidine and control), taking into account all possible possibilities, the number of blocks will be calculated (it is necessary to explain that the number of blocks of the compound formula : $C(n, r) = \frac{C_r^n}{n} = \frac{n!}{r!(n-r)!}$ will be obtained).

Blinding (investigator's opinion)

Double blinded

Blinding description

The study is double-blind. The medicine is prescribed by a doctor and injected by a nurse and recorded in a checklist. The patient and the researcher have no role in randomly assigning the samples to the intervention or control group, and the intervention will be performed and the results will be recorded by the relevant nurse. The samples will be analyzed by a doctor. The interpretation of the data will be done by the researcher and will be decided based on the interpreted results.

Placebo

Not used

Assignment

Parallel

Other design features**Secondary Ids**

empty

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

Ethics committee of Shahid beheshti University of Medical Sciences

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th Floor, Bldg No.2 Shahid Beheshti University of Medical Sciences, Arabi Ave, Daneshjoo Blvd, Velenjak, Tehran, Iran

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1985717443

Approval date

2021-05-11, 1400/02/21

Ethics committee reference number

IR.SBMU.RETECH.REC.1400.018

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

Adjust opioid use

ICD-10 code

Opioid ove

ICD-10 code description

Opioid overdose

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

Sedation of patients connected to a mechanical ventilator

Timepoint

Before and after medication

Method of measurement

Ramsay score

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

Adjustment Opioid use

Timepoint

Before and after medication

Method of measurement

Ramsay score

Intervention groups

1

Description

Intervention group: Gabapentin 300 mg tablets are gavaged three times a day. Fentanyl ampoules are also given as a PRN at 25 to 200 micro / hour infusion. We record the need for fentanyl to achieve sedation in the range of 3 to 4 groups and finally compare.

Category

Treatment - Drugs

2

Description

Intervention group: Clonidine 0.1 mg of clonidine tablets four times a day. Fentanyl ampoules are also given as a PRN at 25 to 200 micro / hour infusion. We record the need for fentanyl to achieve sedation in the range of 3 to 4 groups and finally compare.

Category

Treatment - Drugs

3

Description

Control group: The ampole of midazolam is injected at 20 to 100 microbes per kilogram. Fentanyl ampoles are also given as a PRN at 25 to 200 micro / hour infusion. We record the need for fentanyl to achieve sedation in the range of 3 to 4 groups and finally compare.

Category

Treatment - Drugs

Recruitment centers

1

Recruitment center

Name of recruitment center

Emam Hosein Hospital

Full name of responsible person

Jafar Vakili

Street address

Emam Hossein Hosp. Madani St. Tehran Iran

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Sponsors / Funding sources

1

Sponsor

Name of organization / entity

Shahid Beheshti University of Medical Sciences

Full name of responsible person

Dr Afshin Zargi

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7th Floor, Bldg No.2 Shahid Beheshti University of Medical Sciences, Arabi Ave, Daneshjoo Blvd, Velenjak, Tehran, Iran.

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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

Shahid Beheshti 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

Shahid Beheshti University of Medical Sciences

Full name of responsible person

Jafar Vakili

Position

Fellowship of ICU

Latest degree

Subspecialist

Other areas of specialty/work

Anesthesiology

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Person responsible for scientific inquiries

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Latest degree

Subspecialist

Other areas of specialty/work

Biochemistry

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Person responsible for updating data

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Position

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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

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