Primary registry and trial identifying number	ClinicalTrials.gov; NTC05293041
Date of registration in primary registry	Nov 15, 2021
Secondary identifying numbers	EudraCT 2021-001806-32
Source(s) of monetary or material support	Department of Anaesthesia and Intensive Care, Sahlgrenska University Hospital. Gothenburg University, and the Sahlgrenska University Hospital (ALF-LUA), Gothenburg Medical Society (GLS-974156, GLS-961705), Sahlgrenska University Funds (SU-961353), Anna-Lisa Bror Björnsson Foundation, Tore Nilson's Foundation, The Foundation for Transplantation and Cancer Research
Primary sponsor	Region Vastra Gotaland,
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Public title	Argipressin for prevention of blood loss during liver resection
Scientific title	Influence of Argipressin on blood loss during hepatic resection; a double-blinded, randomized placebo-controlled trial.
Countries of recruitment	Sweden
Health condition(s) or problem(s) studied	Hepatic resection, colorectal cancer, hepatocellular cancer, gallbladder cancer, Klatskin tumour, liver metastasis, inflammation, transfusion
Intervention(s)	Active comparator: Empressin® 0.8 U/ml, 0.045 U/kg/h (0.056 ml/kg/h) Placebo comparator: Normal Saline (NaCl 9 mg/ml)
Key inclusion and exclusion criteria	*Ages eligible for study*: ≥18 years *Sexes eligible for study*: both *Accepts healthy volunteers*: No *Inclusion criteria*: patient ≥18 years, ASA class I-III, scheduled for open or

	laparoscopic hepatic resection, signed informed consent *Exclusion criteria*: -Participant does not understand the given information, and/ or cannot give written informed consent. -Simultaneous operation of tumor with other localization, or surgery for superficial single hepatic tumor less than 2 cm, expected to be of short duration and with minimal blood loss. -Terminal kidney failure (estimated preoperative GFR< 15 ml/min). Pregnancy or lactation. -Known allergy to Empressin®. -Patient included in other interventional study, interacting with the endpoints in the present study, or previous randomization in this study. -Hyponatremia (S-Na < 130 mmol/L) -Patient considered ineligible for other surgical or medical reason. -Present infection. Patients with systemic inflammatory disease, inflammatory bowel disease or preoperative corticosteroid treatment will not be eligible for the subgroups where cytokines and interleukins are investigated.
Study type	Interventional Allocation: randomized Intervention model: 2 parallell arms Masking: Double blinded (subject, caregiver, investigator, outcomes assessor) Primary purpose: morbidity reduction Phase: IV
Date of first enrolment	March, 2022
Target sample size	248 patients
Recruitment status	recruiting
Primary outcome(s) Key secondary outcomes	*Primary outcome*: Blood loss (ml) at the end of surgery *Secondary outcomes*: Transfusion needs during surgery and postoperative day 1, 2 (laparoscopic surgery) or 5 (open surgery).

	Laboratory inflammatory response after hepatic resection. Change in organ damage markers