# SEDRIC Structured EDucation for Rehabilitation in Intermittent Claudication

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered		
28/02/2013		Protocol		
Registration date	Overall study status Completed	Statistical analysis plan		
28/02/2013		[X] Results		
<b>Last Edited</b> 16/05/2016	Condition category Circulatory System	[] Individual participant data		

### Plain English summary of protocol

Background and study aims

Some people experience a cramp-like leg pain during walking that is relieved only by rest. This is called intermittent claudication and it is a common symptom of peripheral arterial disease. Patients with intermittent claudication struggle to walk, which in turn lowers their quality of life. Medically supervised walking programmes have been shown to improve walking ability and quality of life, but more patients could potentially benefit from physical activity that is self-managed and performed in the community setting. However, little is known about the usefulness of education programmes that promote self-managed physical activity in these patients. This research project aims to develop and test a practical education programme for promoting walking activity in patients with intermittent claudication. We will collect scientific data on the programme's usefulness.

#### Who can participate?

Men and women aged 18-90 years with intermittent claudication.

#### What does the study involve?

Twenty five patients with intermittent claudication will be interviewed to inform the development of the education programme. At least 12 patients will test the programme to see if any changes are needed. Once we are satisfied with the design of the programme, we will assess the usefulness of the programme in a further 30 patients, who will be randomly assigned to receive either the education programme or usual care.

### What are the possible benefits and risks of participating?

Possible benefits of the programme include an increased understanding about peripheral arterial disease. They will also receive support in developing goals and action plans for walking more often, which if adhered to, may result in improved walking capacity and quality of life. All participants will also receive a medical "check-up" from a Consultant Vascular Surgeon during the eligibility screening. Results from this research will help us plan a much larger trial across several UK institutions. During exertion, there is an increased risk of untoward cardiovascular events such as heart attack. The likelihood of this happening, however, is small. We will minimise the risk of this by only recruiting patients who do not have unstable cardiovascular conditions, by using 12-lead ECG monitoring before, during and after the test, and by ensuring that all tests

are supervised by a clinician and a clinical exercise physiologist. We will make it possible for patients to see a Consultant Vascular Surgeon at any point during the trial, if they or the study team have any medical concerns.

Where is the study run from? Sheffield Hallam University (UK)

When is the study starting and how long is it expected to run for? March 2013 to August 2013

Who is funding the study? Bupa Foundation

Who is the main contact? Dr Garry Tew g.tew@shu.ac.uk

# Contact information

## Type(s)

Scientific

#### Contact name

Dr Garry Tew

#### Contact details

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# Additional identifiers

ClinicalTrials.gov (NCT) NCT01776710

Protocol serial number 13928

# Study information

#### Scientific Title

Development and piloting of a pragmatic structured education programme that promotes walking in patients with intermittent claudication

#### **Acronym**

**SEDRIC** 

#### **Study objectives**

Some people experience a cramp-like leg pain during walking that is relieved only by rest. This is called intermittent claudication and it is a common symptom of peripheral arterial disease. Patients with intermittent claudication struggle to walk, which in turn lowers their quality of life. Medically supervised walking programmes have been shown to improve walking ability and quality of life, but more patients could potentially benefit from physical activity that is self-managed and performed in the community setting. However, little is known about the usefulness of education programmes that promote self-managed physical activity in these patients. This research project aims to develop and test a practical education programme for promoting walking activity in patients with intermittent claudication. We will collect scientific data on the programme's usefulness.

Twenty five patients with intermittent claudication will be interviewed to inform the development of the education programme. At least 12 patients will test the programme to see if any changes are needed. Once we are satisfied with the design of the programme, we will assess the usefulness of the programme in 18 patients. In total, 30 patient volunteers will be randomly assigned to receive either the education programme or usual care.

Possible benefits of the programme to be explored include increased daily steps/physical activity, and improved walking capacity and quality of life. Patients will be followed up until 6 weeks after being allocated to intervention or control groups. Encouraging results from this research will help us plan a much larger trial across several UK institutions.

## Ethics approval required

Old ethics approval format

# Ethics approval(s)

NRES Committee Yorkshire & The Humber Sheffield, 25/01/2013, ref: 13/YH/0004

# Study design

Interventional and Observational; Design type: Treatment, Qualitative

# Primary study design

Interventional

# Study type(s)

Treatment

## Health condition(s) or problem(s) studied

Topic: Cardiovascular; Subtopic: Cardiovascular (all Subtopics); Disease: Cardiovascular

#### **Interventions**

Structured education programme, The structured education intervention will comprise a 3-hour education workshop delivered by two trained facilitators and a follow-up telephone call 2 weeks later. The aims of the education programme are to enhance patients' understanding of peripheral arterial disease and intermittent claudication, and to support patients in increasing their daily walking activity. Key behaviour change techniques that will be incorporated will include goal setting, action planning, barrier identification/problem.

#### Intervention Type

Other

#### Phase

Not Applicable

#### Primary outcome(s)

Feasibility (recruitment, retention, compliance, acceptability) Timepoint(s): Baseline and 6 weeks

#### Key secondary outcome(s))

- 1. Claudication onset and maximum walking distances on 6-minute corridor walk test; Timepoint (s): Baseline and 6 weeks
- 2. Claudication onset and maximum walking distances on incremental treadmill walking test; Timepoint(s): Baseline and 6 weeks
- 3. Daily steps and physical activity; Timepoint(s): Baseline and 6 weeks
- 4. Health-related quality of life; Timepoint(s): Baseline and 6 weeks
- 5. Psychological constructs representing the key mediators of behaviour change; Timepoint(s): Baseline and 6 weeks 6. Self-reported ambulatory ability; Timepoint(s): Baseline and 6 weeks

#### Completion date

25/04/2014

# Eligibility

#### Key inclusion criteria

- 1. Men and women aged 18-90 years with intermittent claudication due to peripheral arterial disease
- 2. Stable disease for >3 months
- 3. Able to provide consent
- 4. Able to read and speak English to a level allowing satisfactory completion of written questionnaires and to participate in the education intervention

#### Participant type(s)

Patient

#### Healthy volunteers allowed

No

#### Age group

Adult

#### Lower age limit

18 years

#### Upper age limit

90 years

#### Sex

All

#### Key exclusion criteria

- 1. Previous endovascular/surgical interventions
- 2. Scheduled endovascular/surgical intervention
- 3. Critical limb ischaemia
- 4. Those whose function is uniquely impaired, e.g. wheelchair-bound patients and patients with lower-extremity amputation(s).
- 5. Presence of contraindications to exercise or co-morbidities that limit exercise performance to a greater extent than the intermittent claudication (e.g. severe arthritis)
- 6. Major surgery, myocardial infarction or stroke/TIA in the previous 6 months
- 7. Patients who already perform greater than 30 min of structured exercise three times weekly (self-reported)

# Date of first enrolment

25/04/2013

#### Date of final enrolment

25/04/2014

# Locations

#### Countries of recruitment

United Kingdom

England

Study participating centre Sheffield Hallam University

Sheffield United Kingdom S10 2BP

# Sponsor information

## Organisation

Sheffield Hallam University (UK)

#### **ROR**

https://ror.org/019wt1929

# Funder(s)

# Funder type

Charity

#### Funder Name

Bupa Foundation (UK)

# Alternative Name(s)

## **Funding Body Type**

Private sector organisation

# Funding Body Subtype

Trusts, charities, foundations (both public and private)

#### Location

United Kingdom

# **Results and Publications**

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not provided at time of registration

# **Study outputs**

Output type	<b>Details</b> results	Date created Date added Peer reviewed? Patient-facing?			
Results article		01/08/2015		Yes	No
HRA research summary			28/06/2023		No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes