DIAMOND-Lewy: A pilot study of care provided by NHS services

Submission date	Recruitment status	Prospectively registered		
15/12/2016	No longer recruiting	[X] Protocol		
Registration date 20/01/2017	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited 13/02/2024	Condition category Nervous System Diseases	Individual participant data		
13/02/2024	Nei vous system Diseases			

Plain English summary of protocol

Background and study aims

Dementia is a common condition in the aging population. People with dementia have difficulties with mental processes such as memory, language, reasoning and identifying people and objects, which become progressively worse over time. Dementia with Lewy Bodies (LBD) and Parkinson's disease Dementia (PDD) together are known as Lewy Body Dementia (LBD). They share common clinical features and biology, and also respond to similar approaches to management. Currently there is evidence that LBD is often not recognised or managed properly, even in specialist hospital services. The signs and symptoms of LBD can be very hard to detect. Ensuring appropriate management of dementia is central to improving care for patients. At the moment there is no simple tool that includes the full range of LBD symptoms, and no real evidence based management care pathway. Currently there is not enough information to say if any one method used by doctors is better than the others for effective patient management. This study is looking at a newly developed management toolkit, which has been designed to help services to better manage LBD patients. The aim of this study is to compare usual management methods and the new management toolkit in order to evaluate the effect of the toolkit on patient symptoms, outcomes, quality of life and carer stress.

Who can participate?
Patients aged 60 years and over with LBS

What does the study involve?

Participating services are randomly allocated to one of two groups. Services in the first group continue to manage their patients in the usual way, which may vary from service to service. Services in the second group are provided with the management toolkit and encouraged to use this as and when appropriate with all of their patients. The management toolkit is a recommended guideline and can be used according to clinician judgment, either on a single visit or on multiple visits. In both groups, patients and carers attend hour and a half-long visits at the start of the study and then after three and six months. Each visit involves the patient completing a number of questionnaires with a qualified assessor. The carer/informant then seperately completes a number of questionnaires relating to both themselves and the patient.

What are the possible benefits and risks of participating? There are no direct benefits or risks involved to those participating.

Where is the study run from? 21 NHS dementia services in East Anglia and the North East of England (UK)

When is the study starting and how long is it expected to run for? September 2015 to February 2019

Who is funding the study? National Institute for Health Research (UK)

Who is the main contact? Ms Sarah Dunn sarah.dunn2@newcastle.ac.uk

Study website

http://research.ncl.ac.uk/diamondlewy/

Contact information

Type(s)

Public

Contact name

Ms Sarah Dunn

Contact details

Newcastle Clinical Trials Unit 1-4 Claremont Terrace Newcastle University Newcastle upon Tyne United Kingdom NE2 4AE +44 191 208 2521 sarah.dunn2@newcastle.ac.uk

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers 30476

Study information

Scientific Title

Improving the diagnosis and management of neurodegenerative dementia of Lewy body type in the NHS.

Work Package 5A and 5B: A pilot cluster randomised study of the management toolkit in the NHS secondary care services

Acronym

DIAMOND-Lewy

Study objectives

The aim of this study is to see if a newly developed management toolkit will result in symptom improvement, increased quality of life and decreased carer stress in patients with Lewy Body Dementia (LBD).

Ethics approval required

Old ethics approval format

Ethics approval(s)

West Midlands – Coventry and Warwickshire REC, 17/02/2016, ref: 16/WM/0025

Study design

Randomised; Interventional; Design type: Process of Care, Management of Care

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied

Specialty: Dementias and neurodegeneration, Primary sub-specialty: Dementia; UKCRC code/ Disease: Neurological/ Other degenerative diseases of the nervous system

Interventions

Services are randomised to receive either the management toolkit (interventional sites) or to continue their usual management of the patients (control sites). The management toolkit is a recommended guideline and will be used according to clinician judgment in the intervention arm. It could be used at a single visit only, or over multiple visits/patient contacts across several months. The management toolkit will be used as part of routine practice and will remain with sites after the end of the study. Additional study visits will be conducted at baseline, 3 months

and 6 months, and clinicians in the intervention arm will be asked to complete a clinician toolkit use questionnaire.

The patient and carer will take part in 3 visits (baseline, 3 and 6 months) which will take place at their home over a 6 month period. Each visit will take approximately 1 hour 30 minutes. Each visit involves the patient completing a number of questionnaires with a qualified assessor. The carer/informant will separately complete a number of questionnaires relating to both themselves and the patient. If both the patient and carer can be present, 2 members of the team will conduct the visit when possible. The final study visit will be done at 6 months (+/- 2 weeks) after the baseline visit. This will be the end of the study for patients and carers/informants.

Intervention Type

Other

Primary outcome measure

- 1. Feasibility of use of the intervention is assessed by Clinician Toolkit Feedback Questionnaire at approximately 6 months after service has been randomised and at the end of the trial.
- 2. Impact of the assessment and management toolkit on patient management, health outcomes, and its impact on informants/carers is assessed by this is assessed through collection of outcome measured at baseline, 3 and 6 months
- 3. Cost-effectiveness of the new assessment and management toolkit for LBD with usual care is assessed by this is assessed by the Use of services and costs Questionnaire at Baseline, 3 months and 6 months and Time and Travel Questionnaire at 6 months as listed below

Secondary outcome measures

- 1. Symptom severity is measured using the reduced Neuropsychiatric Inventory (NPI) score; lower unified Parkinson's disease rating scale (UPDS) score; Dementia Cognitive Fluctuation Scale (DCFS-R), lower Cornell depression score, Galvin Lewy Body Composite Score and Geriatric Depression Scale at baseline, 3 and 6 months
- 2. Patient quality of life is measured using the patient EQ-5D-5L and carer proxy EQ-5D-5L; patient DEMQOL and carer DEMQOL-proxy scales at baseline, 3 and 6 months
- 3. Rates of cognitive decline is measured using the MMSE and MoCA scales at baseline, 3 and 6 months
- 4. Carer stress and quality of life is measured using the carer EQ-5D-5L; HADS; and Zarit burden scale at baseline, 3 and 6 months
- 5. Global outcome is measured using the Global outcome Scale at 3 months and 6months.
- 6. Heath economic measures are measured using the non-standardised questionnaires developed by the research team as follows: Time and Travel Questionnaire at 6 months and Use of services and costs Questionnaire at Baseline, 3 months and 6 months

Overall study start date

22/09/2015

Completion date

01/02/2019

Eligibility

Key inclusion criteria

1. A clinician diagnosis of LBD has been documented as the result of specialist service assessment (possible or probable diagnosis)

2. Consent can be obtained from the patient or, for those subjects lacking capacity, from a consultee

In addition to the above criteria:

WP5A: Patients aged 60 and over with at least 1 active clinical issue as determined by the treating clinical team.

WP5B: Patients aged 60 and over with a diagnosis of Parkinson's disease where a memory problem has developed.

Participant type(s)

Patient

Age group

Adult

Sex

Both

Target number of participants

Planned Sample Size: 120; UK Sample Size: 120

Total final enrolment

131

Kev exclusion criteria

- 1. Patients who have explicitly expressed a wish not to be approached to take part in research
- 2. Patients who have been approached to take part in this study previously (as part of another participating service)
- 3. Patients who have a severe or terminal illness and reduced life expectancy which compromises their ability to comply with the protocol
- 4. Insufficient English to allow completion of the study measures
- 5. Patients who are assessed as not able to complete the outcome measures for the study. Clinicians may choose not to use the management tool at some assessments if they feel it is not appropriate.

Date of first enrolment

22/04/2016

Date of final enrolment

31/12/2017

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Newtown Centre

Nursery Road Huntingdon United Kingdom PE29 3RJ

Study participating centre Peterborough Memory Clinic

Dementia Resource Centre 441 Lincoln Road Millfield Peterborough United Kingdom PE1 2PE

Study participating centre Specialist Dementia and Frailty Service

Western House Chapel Hill Stansted United Kingdom CM24 8AG

Study participating centre Cambridge Memory Clinic

Deighton Centre Ida Darwin Cambridge Road Fulbourn United Kingdom CB21 5EE

Study participating centre Julian Hospital

Bowthorpe Road Norwich United Kingdom NR23 TD

Study participating centre

Chatterton House

Goodwins Road King's Lynn United Kingdom PE30 5PD

Study participating centre Gateway House

Farrier Close Wymondham United Kingdom NR18 0WF

Study participating centre Wedgewood House

West Suffolk Hospital Hardwicke Lane Bury St Edmunds United Kingdom IP33 2QZ

Study participating centre Elderly Medicine Movement Disorder Clinic

Norfolk & Norwich University Hospitals NHS Foundation Trust Colney Lane Norwich United Kingdom NR4 7UY

Study participating centre West Suffolk Hospital

Hardwick Lane Bury St Edmunds United Kingdom IP33 2QZ

Study participating centre Tracey Ward Disability resource Centre Unit 4

Bunting Road
Bury St Edmunds

United Kingdom IP32 7BX

Study participating centre The Priory Memory Clinic

Hawkeys Lane North Shields United Kingdom NE29 0SF

Study participating centre Jubilee Day Hospital

Parkinson's Service North Tyneside General Hospital North Shields United Kingdom NE29 8NH

Study participating centre North Tyneside Hospital

MHSOP North Shields United Kingdom NE29 8NH

Study participating centre Northumberland Community Services

Older Persons Service Community Care Group Hexham General Hospital Hexham United Kingdom NE36 1QJ

Study participating centre Older People's Mental Health Services

West Wing St George's Park Morpeth United Kingdom NE61 2NU

Study participating centre Monkwearmouth Hospital

Memory Protection Service 1st Floor Newcastle Road Sunderland United Kingdom SR5 1NB

Study participating centre Castleside Day Unit

Centre for Health of the Elderly Campus for Ageing & Vitality Westgate Road Newcastle-Upon-Tyne United Kingdom NE4 6BE

Study participating centre CRESTA Clinic

Biomedical Research Building Campus for Ageing & Vitality Westgate Road Newcastle-Upon-Tyne United Kingdom NE4 6BE

Study participating centre Campus for Ageing and Vitality

Belsay Unit Westgate Road Newcastle upon Tyne United Kingdom NE4 6BE

Study participating centre Sunderland Royal Hospital Kayll Road

Sponsor information

Organisation

Northumberland, Tyne and Wear NHS Foundation Trust

Sponsor details

St. Nicholas Hospital Jubilee Road Gosforth Newcastle upon Tyne England United Kingdom NE3 3XT

Sponsor type

Hospital/treatment centre

ROR

https://ror.org/01ajv0n48

Funder(s)

Funder type

Government

Funder Name

National Institute for Health Research

Alternative Name(s)

National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Publication and dissemination plan

The plan will be to publish within 6 months of the end of trial date.

Intention to publish date

01/08/2019

Individual participant data (IPD) sharing plan

The datasets generated during the current study will be available upon reasonable request from john.obrien@newcastle.ac.uk following the final publication of study analyses. Subject level anonymised data are available, and subjects provided consent for data sharing.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/01/2021	23/09/2020	Yes	No
<u>Protocol file</u>	version 5	07/06/2018	26/08/2022	No	No
HRA research summary	Secondary analysis		28/06/2023	No	No
Other publications		17/08/2021	13/02/2024	Yes	No
Results article		01/07/2021	13/02/2024	Yes	No