RaCeR 2- Comparing different approaches to physiotherapy following surgery to repair the rotator cuff of the shoulder

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered		
13/03/2023		[X] Protocol		
Registration date	Overall study status Ongoing Condition category Musculoskeletal Diseases	Statistical analysis plan		
23/03/2023		Results		
Last Edited		Individual participant data		
18/12/2025		[X] Record updated in last year		

Plain English summary of protocol

Background and study aims

Tears of the tendons of the shoulder (rotator cuff) are a significant cause of shoulder pain. In 2018/2019, almost 9,000 surgical repairs were undertaken in the NHS costing up to £56.7 million in direct NHS treatment costs alone. Despite the high number of operations and surgical advancements, rehabilitation after rotator cuff repair has not advanced for over 20 years. The traditional cautious approach, where patients use a shoulder sling for about 1 month, might be contributing to sub-optimal outcomes. It is remiss that we still do not have a better understanding of the optimal approach that maximises outcomes, including early and safe return to usual activities. The study aims to investigate the effect of standard rehabilitation (4 weeks in a sling) or patient-directed rehabilitation (patients can choose to remove the sling when they feel able to).

Who can participate?

Adults over 18 years, due to have arthroscopic rotator cuff surgery.

What does the study involve?

Following surgery, participants will be randomised to standard rehabilitation (4 weeks in a sling) or patient-directed rehabilitation (patients can choose to remove the sling when they feel able to). Patients will be followed up remotely via completion of questionnaires (choosing to complete these by post or online) at 12 weeks, 6 months and 12 months post randomisation. They will also document their sling use by completing a diary for 4 weeks following surgery. At 12 months, we will invite patients to attend for an ultrasound of their rotator cuff to assess for re-tear. The study also includes the "Quintet Recruitment Intervention" (QRI) which is a well-established study that is often embedded within large trials to monitor recruitment. This involves recording discussions about the study and offering advice and training to recruiters at site.

The study will be a host trial for a SWAT (Study Within a Trial) to explore participant characteristics and their choice of paper vs online questionnaire completion.

What are the possible benefits and risks of participating?

The study will help us improve our approach to physiotherapy treatment after surgery to repair the rotator cuff of the shoulder. There are no anticipated risks of participating; taking part in this study requires time to complete the questionnaires and to attend the hospital for the ultrasound scan at twelve months.

Where is the study run from? University Hospitals of Derby and Burton NHS Foundation Trust (UK)

When is the study starting and how long is it expected to run for? September 2022 to April 2027

Who is funding the study? National Institute for Health and Care Research (NIHR) (UK).

Who is the main contact? Uhdb.racer2@nhs.net

Contact information

Type(s)

Public, Scientific, Principal investigator

Contact name

Prof Chris Littlewood

Contact details

PO34 Blatchford Building University of Salford Salford United Kingdom M6 6PU

Uhdb.racer2@nhs.net

Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

Integrated Research Application System (IRAS)

318438

ClinicalTrials.gov (NCT)

Nil known

Central Portfolio Management System (CPMS)

55415

National Institute for Health and Care Research (NIHR)

Study information

Scientific Title

Clinical and cost-effectiveness of individualised (early) patient-directed rehabilitation versus standard rehabilitation after surgical repair of the rotator cuff of the shoulder: a multi-centre, randomised controlled trial with integrated Quintet Recruitment Intervention

Acronym

RaCeR 2

Study objectives

Individualised (early) patient-directed rehabilitation (EPDR) will be superior in terms of shoulder pain and disability compared to standard (delayed) rehabilitation after surgical repair of the rotator cuff of the shoulder.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 13/04/2023, London - Stanmore Research Ethics Committee (Level 3, Block B, Whitefriars, Lewins Mead, Bristol, BS1 2NT, UK; +44 2071048387; stanmore.rec@hra.nhs.uk), ref: 23/LO/0195

Study design

Interventional randomized controlled trial with embedded qualitative study within a trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Rehabilitation after surgical repair of the rotator cuff of the shoulder

Interventions

Current interventions as of 22/08/2024:

The study is an open-label randomised controlled trial comparing standard rehabilitation following rotator cuff repair surgery to individualised (early) patient directed rehabilitation. In standard rehabilitation, patients are required to keep their arm in a sling for 4 weeks, whereas for patient-directed rehabilitation, they may remove their sling and move their arm as they feel able, usually before 4 weeks.

Patients undergoing arthroscopic repair for a full-thickness rotator cuff tear, will be approached to take part in the study before their surgery. They will be asked to complete a baseline questionnaire pre-surgery and will be randomised once arthroscopic surgery has been completed. For the first 4 weeks following surgery, they will be asked to complete a diary

documenting their sling use (i.e. time out of sling). At 12 weeks, 6 months and 12 months, they will complete follow-up questionnaires to inform the study outcomes which will be inputted onto Dacima, the electronic data capture system. Participants will have a choice to complete these electronically via an email/text link, or postally via paper questionnaires. This will be coordinated centrally by Derby Clinical Trial Support Unit (DCTSU). At 12 months, participants will return for an ultrasound scan of their shoulder to assess repair integrity.

We have chosen the validated, self-reported SPADI measure for shoulder pain and disability as we found this to be more responsive than the Oxford Shoulder Score (OSS) in our RaCeR pilot trial. The EQ-5D-5L is a widely used, validated measure of health-related quality of life.

The study will take place across 24 sites (with scope to increase this if necessary) across the UK to recruit (and randomise) 638 patients in 24 months. Each patient will participate in the study for 12 months following randomisation.

An internal pilot phase encompasses the first 6 months of recruitment and will monitor the rate of recruitment, overall and per-site, as well as the number of sites open. At the end of this pilot phase, we will assess study progress according to these criteria and act accordingly.

Previous interventions:

The study is an open-label randomised controlled trial comparing standard rehabilitation following rotator cuff repair surgery to individualised (early) patient directed rehabilitation. In standard rehabilitation, patients are required to keep their arm in a sling for 4 weeks, whereas for patient-directed rehabilitation, they may remove their sling and move their arm as they feel able, usually before 4 weeks.

Patients undergoing arthroscopic repair for a full-thickness rotator cuff tear, will be approached to take part in the study before their surgery. They will be asked to complete a baseline questionnaire pre-surgery and will be randomised once arthroscopic surgery has been completed. For the first 4 weeks following surgery, they will be asked to complete a diary documenting their sling use (i.e. time out of sling). At 12 weeks, 6 months and 12 months, they will complete follow-up questionnaires to inform the study outcomes. Participants will have a choice to complete these electronically via an email/text link, or postally via paper questionnaires. This will be coordinated centrally by Derby Clinical Trial Support Unit (DCTSU). At 12 months, participants will return for an ultrasound scan of their shoulder to assess repair integrity.

We have chosen the validated, self-reported SPADI measure for shoulder pain and disability as we found this to be more responsive than the Oxford Shoulder Score (OSS) in our RaCeR pilot trial. The EQ-5D-5L is a widely used, validated measure of health-related quality of life.

The study will take place across 24 sites (with scope to increase this if necessary) across the UK to recruit (and randomise) 638 patients in 24 months. Each patient will participate in the study for 12 months following randomisation.

An internal pilot phase encompasses the first 6 months of recruitment and will monitor the rate of recruitment, overall and per-site, as well as the number of sites open. At the end of this pilot phase, we will assess study progress according to these criteria and act accordingly.

Intervention Type

Other

Primary outcome(s)

Shoulder pain and disability will be measured at 12 weeks post-randomisation using the Shoulder Pain and Disability Index (SPADI) validated questionnaire

Key secondary outcome(s))

- 1. Shoulder pain and disability at 6 and 12 months post-randomisation will be measured using the total SPADI score
- 2. Health-related quality of life at 12 weeks, 6 and 12 months post-randomisation will be measured using the EQ-5D-5L
- 3. Time to return to usual activities, including work and driving, will be measured via self-report questionnaire at 12 weeks, 6 and 12 months
- 4. Healthcare resource use at 12 weeks, 6 and 12 months will be measured via self-report questionnaire.
- 5. Rotator cuff repair integrity (evidence of full-thickness re-tear; yes/ no) at 12 months will be assessed via diagnostic ultrasound scan
- 6. Number and nature of adverse events at 12 weeks, 6 and 12 months will be measured via self-report questionnaire and clinician report.
- 7. Self-report time out of sling, measured in hours, over 4 weeks post-surgery via self-report diary.

Completion date

30/04/2027

Eligibility

Key inclusion criteria

- 1. Adults awaiting arthroscopic surgical repair of a full thickness tear of their shoulder rotator cuff, of any size
- 2. Able to return (remote or in-person consultation) to the recruiting centre or affiliated site for rehabilitation supported by a physiotherapist trained to deliver the study interventions

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Total final enrolment

0

Key exclusion criteria

- 1. No full thickness tear at surgery and/or arthroscopic repair not undertaken
- 2. Unable to provide informed consent
- 3. Patients taking part in another research study that mandates the post-operative rehabilitation pathway.

Date of first enrolment

01/06/2023

Date of final enrolment

10/11/2025

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

University Hospitals of Derby and Burton NHS Foundation Trust

Royal Derby Hospital Uttoxeter Road Derby England DE22 3NE

Study participating centre Royal Orthopaedic Hospital

The Woodlands Bristol Road South Northfield Birmingham England B31 2AP

Study participating centre Airedale General Hospital

Skipton Road Steeton Keighley England BD20 6TD

Study participating centre University Hospitals of Leicester NHS Trust

Leicester Royal Infirmary Infirmary Square Leicester England LE1 5WW

Study participating centre Calderdale and Huddersfield NHS Foundation Trust

Trust Headquarters Acre Street Lindley Huddersfield England HD3 3EA

Study participating centre North Cumbria Integrated Care NHS Foundation Trust

Pillars Building Cumberland Infirmary Infirmary Street Carlisle England CA2 7HY

Study participating centre

East Suffolk and North Essex NHS Foundation Trust

Ipswich Hospital Heath Road Ipswich England IP4 5PD

Study participating centre Sherwood Forest Hospitals NHS Foundation Trust

Kings Mill Hospital Mansfield Road Sutton-in-ashfield England NG17 4JL

Study participating centre University Hospitals of North Midlands NHS Trust

Newcastle Road Stoke-on-trent England ST4 6QG

Study participating centre East Kent Hospitals University NHS Foundation Trust

Kent & Canterbury Hospital Ethelbert Road Canterbury England CT1 3NG

Study participating centre

Kingston Hospital
Galsworthy Road
Kingston upon Thames
England
KT2 7QB

Study participating centre Chesterfield Royal Hospital NHS Foundation Trust

Chesterfield Road Calow Chesterfield England S44 5BL

Study participating centre

Warrington and Halton Teaching Hospitals NHS Foundation Trust

Warrington Hospital Lovely Lane Warrington England WA5 1QG

Study participating centre

James Paget University Hospital

Lowestoft Road Gorleston Great Yarmouth England NR31 6LA

Study participating centre

Nottingham University Hospitals NHS Trust - Queen's Medical Centre Campus

Nottingham University Hospital Derby Road Nottingham England NG7 2UH

Study participating centre Harrogate & District NHS Foundation Trust

Strayside Wing Harrogate District Hospital Lancaster Park Road Harrogate England HG2 7SX

Study participating centre Homerton Healthcare NHS Foundation Trust

Homerton Row London England E9 6SR

Study participating centre Barts Health NHS Trust

The Royal London Hospital 80 Newark Street London England E1 2ES

Study participating centre

Royal Devon University Healthcare NHS Foundation Trust

Royal Devon University NHS Ft Barrack Road Exeter England EX2 5DW

Study participating centre Gloucestershire Hospitals NHS Foundation Trust

Cheltenham General Hospital Sandford Road Cheltenham England GL53 7AN

Study participating centre

University Hospitals Coventry and Warwickshire NHS Trust

Walsgrave General Hospital Clifford Bridge Road Coventry England CV2 2DX

Study participating centre

The Newcastle upon Tyne Hospitals NHS Foundation Trust

Freeman Hospital
Freeman Road
High Heaton
Newcastle upon Tyne
England
NE7 7DN

Study participating centre Royal Berkshire NHS Foundation Trust

Royal Berkshire Hospital London Road Reading England RG1 5AN

St George's University Hospitals NHS Foundation Trust

St. Georges Hospital Cranmer Terrace London England SW17 0RE

Study participating centre Mid Yorkshire Teaching NHS Trust

Pinderfields Hospital
Aberford Road
Wakefield
England
WF1 4DG

Study participating centre Aneurin Bevan U Hb Cds

Grange House Llanfrechfa Grange Cwmbran Wales NP44 8YN

Study participating centre The Rotherham NHS Foundation Trust

Moorgate Road Rotherham England S60 2UD

Study participating centre East and North Hertfordshire NHS Trust

Lister Hospital Coreys Mill Lane Stevenage England SG1 4AB

Study participating centre NHS Grampian Summerfield House 2 Eday Road Aberdeen Scotland AB15 6RE

Study participating centre Hywel Dda Health Board

Unit 5
Heol Cropin
Dafen Industrial Estate, Dafen
Llanelli
Wales
SA14 8QW

Sponsor information

Organisation

University Hospitals of Derby and Burton NHS Foundation Trust

ROR

https://ror.org/04w8sxm43

Funder(s)

Funder type

Government

Funder Name

NIHR Evaluation, Trials and Studies Co-ordinating Centre (NETSCC)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Data sharing statement to be made available at a later date

Study outputs

Date Peer Patient-

Output type	Details	created	added	reviewed?	facing?
Protocol article	Protocol for the economic evaluation	20/06/2025	24/06 /2025	Yes	No
Protocol article	Protocol for the Quintet Recruitment Intervention	05/04/2024	30/06 /2025	Yes	No
HRA research summary			20/09 /2023	No	No
Protocol file	version 2.2	14/04/2023	31/07 /2023	No	No
Protocol file	version 2.4	09/05/2024	22/08 /2024	No	No
Protocol file	version 3.0	05/03/2025	03/04 /2025	No	No
Protocol file	version 3.1	11/08/2025	18/12 /2025	No	No
Study website		11/11/2025	11/11 /2025	No	Yes