A randomised controlled trial to evaluate the cost effectiveness of prescribing high concentration fluoride toothpaste to prevent tooth decay in older adults

Submission date 01/06/2017	Recruitment status No longer recruiting	[X] Prospectively registered [X] Protocol
Registration date 02/06/2017	Overall study status Completed	 Statistical analysis plan Results
Last Edited 03/08/2022	Condition category Oral Health	 Individual participant data Record updated in last year

Plain English summary of protocol

Background and study aims:

Since the 1970s fluoride toothpaste has been widely used to prevent tooth decay. People who grew up before the 1970s did not have the benefits of fluoride toothpaste and so have lots of fillings and an increased risk of further tooth decay. There has been a huge increase in the number of older people keeping their teeth. In England in 2009 only 6% of people aged over 65 years had no teeth, compared to 28% in 1978. There is a concern that unless there is effective prevention of decay in older people, many will require complex dental treatment which may not be affordable. Standard fluoride toothpaste, available to buy on the high street, tends to contain around 1400 parts per million (ppm) of fluoride. High dose fluoride toothpaste, containing 5000ppm fluoride, is available by prescription from doctors/dentists. It is thought to be better than standard fluoride toothpaste at preventing tooth decay in people at high risk. In England in 2014 prescriptions of high concentration fluoride toothpaste cost £17 million and these costs are increasing. There is a lack of evidence to demonstrate that this use of resources benefits patients and is cost-effective for the NHS. The aim of this study is to evaluate the costs and effectiveness of high dose fluoride toothpaste prescribed in general dental practice to older individuals who have a high-risk of tooth decay.

Who can participate?

People aged 50 and over who have a high-risk of developing decay, based on their recent dental history and the opinion of their dentist.

What does the study involve?

Participants are randomly allocated to one of two groups. Those in the first group receive prescriptions for 5000ppm fluoride toothpaste from their dentist. Those in the second group receive usual care (any advice will be to use 1350-1500ppm toothpaste, available from pharmacies and supermarkets). Information about whether or not participants get fillings or extractions due to tooth decay is collected from participants' dentists over a 3-year period. In addition, in a sub-group of patients in Scotland more precise measurements are undertaken to

understand how much tooth decay develops in the 5000 ppm and usual care groups over the 3-years.

What are the possible benefits and risks of participating? There are no notable benefits involved with participating. Risks for patents participating are very low, in some rare cases (less than 1 in 1000 people treated) allergic (hypersensitivity) reactions can occur, causing rash, itching swelling and redness.

Where is the study run from?

The study is run from the Centre for Healthcare Randomised Trials in Aberdeen and takes place in at least 60 NHS dental practices in Northern Ireland, Scotland and Greater Manchester (UK)

When is study starting and how long is it expected to run for? May 2017 to December 2023

Who is funding the study? National Institute for Health Research, Health Technology Assessment Programme (UK)

Who is the main contact? Professor Janet Clarkson, j.e.clarkson@dundee.ac.uk

Study website https://w3.abdn.ac.uk/hsru/REFLECT/Public/Public/index.cshtml

Contact information

Type(s) Public

Contact name Prof Janet Clarkson

ORCID ID http://orcid.org/0000-0001-5940-2926

Contact details

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Additional identifiers

EudraCT/CTIS number 2017-002402-13

IRAS number

ClinicalTrials.gov number Nil known

Secondary identifying numbers HTA 16/23/01

Study information

Scientific Title

A Randomised controlled trial to Evaluate the effectiveness and cost benefit of prescribing high dose FLuoride toothpaste in preventing and treating dEntal Caries in high-risk older adulTs

Acronym

REFleCt

Study objectives

5000 parts per million fluoride toothpaste prescribed by General Dental Practitioners is effective in reducing the need for dental treatment due to dental caries in patients aged 50 years and over attending dental practices who have a high-risk of developing caries.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 17/11/2017, North East - Newcastle & North Tyneside 1 Research Ethics Committee (NHSBT Newcastle Blood Donor Centre, Holland Drive, Newcastle upon Tyne, NE2 4NQ, UK; +44 (0)2071048103;

nrescommittee.northeast-newcastleandnorthtyneside1@nhs.net), REC ref: 17/NE/0329

Study design

Pragmatic open label randomised controlled trial

Primary study design Interventional

Secondary study design Randomised controlled trial

Study setting(s) Other

Study type(s) Prevention

Participant information sheet

Not available in web format, please use contact details to request a participant information sheet

Health condition(s) or problem(s) studied

Dental Caries

Interventions

Current intervention as of 15/07/2022:

Eligible and consenting participants will be randomised to one of the two intervention groups using the web-based application, both hosted by the CTU. The randomisation algorithm will use recruitment site, residential setting (own home/care home), exemption from dental treatment charges (yes/no) and age (50-65 years/over 65 years) as minimisation covariates to allocate treatment to intervention and control groups in a 1:1 ratio. A random element will be incorporated into the randomisation algorithm. The PI at site, or individual with delegated authority, will access the telephone or web-based system. Patient screening identification, initials and recruiting site (the stratifying variable) will be entered into the web-based system, which will return the allocation status. Participants will be informed of their allocated treatment group following randomisation.

Intervention: Prescription of 5000 parts per million (ppm) fluoride toothpaste. The amount and frequency of the toothpaste will be prescribed by the participant's dentist according to their clinical judgement of their patient's needs. Participants will redeem prescriptions from community pharmacists.

Comparator: Usual care. Any advice given by the GDP will be to use standard, off-the-shelf, fluoride toothpaste (1350-1500 ppm). The content and frequency of advice will be provided by the participant's dentist according to their clinical judgement of their patient's needs.

The total duration of both treatment and follow-up study arms will be 3 years.

Previous intervention:

Intervention: Prescription of 5000 parts per million (ppm) fluoride toothpaste. The amount and frequency of the toothpaste will be prescribed by the participant's dentist according to their clinical judgement of their patient's needs. Participants will redeem prescriptions from community pharmacists. Compliance will be assessed by self report questionnaires and by reference to national datasets

Eligible and consenting participants will be randomised to one of the two intervention groups using the proven 24-hour telephone Interactive Voice Response randomisation application or via the web-based application, both hosted by the CTU. The randomisation algorithm will use recruitment site, residential setting (own home/care home), exemption from dental treatment charges (yes/no) and age (50-65 years/over 65 years) as minimisation covariates to allocate treatment to intervention and control groups in a 1:1 ratio. A random element will be incorporated into the randomisation algorithm. The PI at site, or individual with delegated authority, will access the telephone or web-based system. Patient screening identification, initials and recruiting site (the stratifying variable) will be entered into the voice-activated or web-based system, which will return the allocation status. Participants will be informed of their allocated treatment group following randomisation.

Comparator: Usual care. Any advice given by the GDP will be to use standard, off-the-shelf, fluoride toothpaste (1350-1500 ppm). The content and frequency of advice will be provided by the participant's dentist according to their clinical judgement of their patient's needs. Compliance will be assessed by self report questionnaires.

The total duration of both treatment and follow-up study arms will be 3 years.

Intervention Type

Drug

Phase Phase III/IV

Drug/device/biological/vaccine name(s)

5000 ppm fluoride toothpaste

Primary outcome measure

Current primary outcome measure as of 15/07/2022:

Restoration or extraction or endodontic treatment due to dental caries (dichotomous outcome yes/no) will be recorded at scheduled and unscheduled dental visits on the Case Report Form (CRF) completed by PIs at each site on a rolling basis during the 3-year follow-up period

Previous primary outcome measure:

Restoration or extraction due to dental caries (dichotomous outcome yes/no) will be recorded at scheduled and unscheduled dental visits on the Case Report Form (CRF) completed by PIs at each site on a rolling basis during the 3 year follow up period.

Secondary outcome measures

Current secondary outcome measures as of 15/07/2022: Clinical:

1. Coronal and root caries increment, including dentist replacement fillings for caries, at tooth surface (DMFS) level is assessed using the ICDAS method to assess caries as it provides flexibility to analyse and present caries data at different diagnostic thresholds at baseline and 3 year (+/- 3 months) follow-up. This will also be used for collecting early caries lesion progression data (DMFS measured in Scottish practices only).

2. Early caries lesion progression data is measured using ICDAS (in Scottish practices only) at baseline and 3 year (+/- 3 months) follow-up

3. Bleeding on probing (BoP) will be recorded by the independent clinical examiners (in Scottish practices only) at baseline and 3 year (+/- 3 months) follow-up

Patient:

1. Oral health status using OHIP14, a measure of oral health-related Quality of Life (QoL), collected at baseline and annual follow up over the 3 year follow up period through patient administered questionnaires

2. The EQ-5D-5L profile measure of generic health status will be collected at baseline and annual follow up through patient questionnaires over the 3 year follow up period

3. Episodes of dental pain (number and an assessment of severity using a visual analogue scale) will be recorded at scheduled and unscheduled dental visits on the CRF. In addition questions about dental pain experience will be included in annual questionnaires sent to participants.

4. Oral health behaviour, including self-reported brushing/other sources of fluoride. Evaluated at baseline and through annual questionnaires sent to participants over the 3-year follow-up period of the trial

Economic:

1. Provision of NHS dental treatments will be collected using the CRF completed at each visit and by routinely collected data held by the Information Services Division (ISD) of NHS National Services Scotland, Business Services Authority (BSA, England) and Business Services Organisation (BSO, Northern Ireland)

2. All remaining resource use data will be use data collected using the CRF and annual patientreported questionnaires over the 3-year follow-up period

3. A discrete choice experiment (DCE) with an online representative sample of the UK general population (aged 50 and over) will be undertaken to elicit willingness to pay (WTP) for high fluoride toothpaste and associated patient-relevant outcomes.

4. The "within trial" economic analyses will assess and report on the costs and outcomes of high fluoride vs. standard treatment up to 3 years post-randomisation

Previous secondary outcome measures: Clinical:

1. Caries increment , including dentist replacement fillings for caries, at tooth surface (DMFS) level is assessed using the ICDAS method to assess caries as it provides flexibility to analyse and present caries data at different diagnostic thresholds at baseline and 3 year (+/- 3 months) follow-up. This will also be used for collecting early caries lesion progression data (DMFS measured in Scottish practices only).

2. Early caries lesion progression data is measured using ICDAS (in Scottish practices only) at baseline and 3 year (+/- 3 months) follow-up

3. Bleeding on probing (BoP) will be recorded by the independent clinical examiners (in Scottish practices only) at baseline and 3 year (+/- 3 months) follow-up

Patient:

1. Oral health status using OHIP14, a measure of oral health-related Quality of Life (QoL), collected at baseline and annual follow up over the 3 year follow up period through patient administered questionnaires

2. The EQ-5D-5L profile measure of generic health status will be collected at baseline and annual follow up through patient questionnaires over the 3 year follow up period

Episodes of dental pain (number and an assessment of severity using a visual analogue scale) will be recorded at scheduled and unscheduled dental visits on the CRF. In addition questions about dental pain experience will be included in annual questionnaires sent to participants.
 Oral health behaviour, including self-reported brushing/other sources of fluoride. Evaluated at baseline and through annual questionnaires sent by mail to the home address of participants over the 3 year follow up period of the trial

Economic:

1. Provision of NHS dental treatments will be collected using the CRF completed at each visit and by routinely collected data held by the Information Services Division (ISD) of NHS National Services Scotland, Business Services Authority (BSA, England) and Business Services Organisation (BSO, Northern Ireland)

2. All remaining resource use data will be use data will be collected using the CRF and annual mailed questionnaires over the 3 year follow up period

3. A discrete choice experiment (DCE) with an online representative sample of the UK general population (aged 50 and over) will be undertaken to elicit willingness to pay (WTP) for high fluoride toothpaste and associated patient relevant outcomes.

4. The "within trial" economic analyses will assess and report on the costs and outcomes of high fluoride vs. standard treatment up to 3 years post-randomisation

Overall study start date

12/05/2017

Completion date 31/12/2023

Eligibility

Key inclusion criteria

Current inclusion criteria as of 15/07/2022:

1. Patients attending dental practices participating in the trial

2. Aged 50 years or older

3. Diagnosis of active coronal caries (into dentine) in the last 12 months which may/may not have been treated, or any root caries; and\or other risk factors as determined by their GDP

4. Living in any residential setting

5. Receive their dental care in part or fully as an NHS patient

6. Patients whose GDP decides prescription of high concentration fluoride toothpaste is appropriate

Previous inclusion criteria:

1. Patients attending dental practices participating in the trial

2. Aged 50 years of age or older

3. Diagnosis of active coronal caries (into dentine) in the last 12 months which may/may not have been treated, or any root caries; and\or other risk factors as determined by their GDP 4. Living in any residential setting

Participant type(s)

Patient

Age group

Senior

Sex Both

Target number of participants 1174

Total final enrolment 1161

Key exclusion criteria

Current exclusion criteria as of 15/07/2022: 1. Currently prescribed (by GDP or GP) high concentration fluoride toothpaste (for GDPs, prescription must have been issued at last examination visit) 2. Unable to provide informed consent 3. Hypersensitivity for sodium fluoride and/or other ingredients used in 5000ppm toothpaste 4. Are living in the same household as someone already recruited to REFLECT, or someone who is routinely using a high concentration fluoride toothpaste

Previous exclusion criteria:

1. Currently prescribed high concentration fluoride toothpaste

2. Unable to provide informed consent

Date of first enrolment 10/02/2018

Date of final enrolment 13/03/2020

Locations

Countries of recruitment England

Northern Ireland

Scotland

United Kingdom

Study participating centre

Centre for Healthcare Randomised Trials (CHaRT) Health Services Research Unit University of Aberdeen 3rd Floor, Health Sciences Building Foresterhill Aberdeen United Kingdom AB25 2ZD

Study participating centre North Street Dental Care 42 North Street Lurgan Craigavon United Kingdom

BT67 9AH

Study participating centre Brownlow Family Dental Care

5 Legahory Centre Craigavon United Kingdom BT65 5BE

Study participating centre DJ Maguire & associates 83a Bridge Street Portadown United Kingdom BT63 5AA

Study participating centre Bell & Thom Dental Surgery 17/19 Main Street Portglenone

Ballymena United Kingdom BT44 8AA

Study participating centre Bishop Street Dentalcare 21 Bishop Street Within

Derry/Londonderry United Kingdom BT48 6PR

Study participating centre

The Grange Dental Care 2 Crevenagh Rd

Omagh United Kingdom BT79 0AL

Study participating centre

Newcastle family Dental Care Iveagh Court 2 Railway Street Newcastle United Kingdom BT33 0SP

Study participating centre Main Street Dental Care 45A Main Street Thornliebank United Kingdom G46 7SF

Study participating centre Kelvingrove Dental Care Ltd 1180 Argyle Street Glasgow United Kingdom G3 8TE

Study participating centre Lossiemouth Dental Practice 2 Clifton Road Lossiemouth United Kingdom IV31 6DJ

Study participating centre Bute Dental Surgery 14-16 West Princes Street Rothesay United Kingdom PA20 9AF

Study participating centre Montrose Dental Practice Montrose United Kingdom

Discovery Dental Care

1 West Bell Street Dundee United Kingdom DD1 1EX

Study participating centre One Dental 1 Queen St Derry/Londonderry United Kingdom BT48 7EF

Study participating centre Haugh Dental Care Newcastle St. Kilkeel Newry United Kingdom BT34 4AF

Study participating centre L.C. Milton BDS 1356 Barrhead Road Glasgow United Kingdom G53 7DE

Study participating centre Quinndental 53 Main Street Randalstown

Antrim United Kingdom BT41 3BB

Study participating centre

Salisbury Villa Dental Surgery 1 Salisbury Terrace Teignmouth United Kingdom TQ14 8JG Study participating centre Chudleigh Dental Practice 21 Old Exeter Street Chudleigh Newton Abbot United Kingdom TQ13 0LD

Study participating centre Nethergate Dental Practice 86 Nethergate Dundee United Kingdom DD1 4EL

Study participating centre Camlough Dental Practice 27 Main Street Camlough Newry United Kingdom BT35 7JG

Study participating centre Blairgowrie Dental Care 64 High Street Blairgowrie United Kingdom PH10 6DF

Study participating centre Livingston Dental Healthcare 38 Hamilton Road Bangor United Kingdom BT20 4LE

Cardonald Dental Practice

5 Lamington Road Cardonald Glasgow United Kingdom G52 2SF

Study participating centre The Glens Dental Practice

2 Gortaclee Rd Cushendall Ballymena United Kingdom BT44 0TE

Study participating centre Dental bees 1 St Andrew Street

Castle Douglas United Kingdom DG7 1DE

Study participating centre Tannochside Dental Centre 499 Old Edinburgh Tannochside Glasgow United Kingdom G71 6PL

Study participating centre

Harpers Dental Practice 32 Bradford St Haulgh Bolton United Kingdom BL2 1JJ

Study participating centre Craigentinny Dental Care 57 Duddingston Crescent Edinburgh United Kingdom EH15 3AY

Study participating centre Stevenston Cross Dental 14 Fullarton Place Stevenston United Kingdom KA20 3EH

Study participating centre McNally Dental Care 248 Drumchapel Road Glasgow United Kingdom G15 6EG

Study participating centre Rankin Dental 30 Ellon Road Aberdeen United Kingdom AB23 8BX

Study participating centre Links Lodge Dental Practice 26 John Street Montrose United Kingdom DD10 8LZ

Study participating centre Castlebawn Dental Practice 32-34 Victoria Road Bangor

United Kingdom BT20 5EX

Study participating centre The Dental House

6-12 Derby Ln Old Swan Liverpool United Kingdom L13 3DL

Study participating centre Sheil Road Dental Practice

74 Sheil Road Liverpool United Kingdom L6 3AF

Study participating centre

Canmore Dental Practice 8 Abbey Park Place Dunfermline United Kingdom KY12 7PD

Study participating centre Hyland Dental Care 6 Park Road

Hamilton United Kingdom ML3 6PD

Study participating centre Canmore Dental Practice

126 Main Street Lochgelly United Kingdom KY5 9AA

Study participating centre

The Collegiate Dental Practice 76 Brideoak St Cheetham Hill Manchester United Kingdom M8 0AB

Study participating centre Clark & Watson Dental Practice 27 Newmarket Street Falkirk United Kingdom FK1 1JJ

Study participating centre Sankey St. Dental Practice 61a Sankey Street Warrington United Kingdom WA1 1SL

Study participating centre Delicate Dental 106 Main Street Lisnaskea

United Kingdom BT92 0JD

Study participating centre Dr Philip Chai K Wee 102a Cricklewood Broadway London United Kingdom NW2 3EJ

Study participating centre Abbey Dental Care

47 Causeyside St Paisley United Kingdom PA1 1YN

Montgomery Street Dental Care

96 Montgomery St Edinburgh United Kingdom EH7 5HE

Study participating centre Abbey Dental Clinic 620-630 Shore Road

Newtownabbey United Kingdom BT37 0ST

Study participating centre Tarbert Dental Harbour Street Tarbert United Kingdom PA29 6UB

Study participating centre Maryhill Smile Care 283 Maryhill Rd Glasgow United Kingdom G20 7YA

Study participating centre Truss Dental 85 East Road Irvine United Kingdom KA12 0AA

Study participating centre Ethos Dental Surgery 126 Wellington Road North Stockport United Kingdom SK4 2LL

Study participating centre Kirkmuirhill Dental Practice

14a Thornton Road Kirkmuirhill Lanark United Kingdom ML11 9QE

Study participating centre Simply Smiles Dental Surgery 35 Holden Rd Salford United Kingdom M7 4LR

Study participating centre Alyth Dental Care 20 Commercial Street Alyth

Blairgowrie United Kingdom PH11 8AF

Study participating centre Hafren House Dental Practice 1 Cressy Rd Alfreton United Kingdom DE55 7BR

Study participating centre Cottage Dental Practice 58 Moor Street Ormskirk United Kingdom L39 2AW

Glumangate Dental Practice

46 Glumangate Chesterfield United Kingdom S40 1TX

Study participating centre Pearl Dental 1242 London Road

Alvaston Derby United Kingdom DE24 8QH

Study participating centre Church Road Dental Practice

United Kingdom

Study participating centre Woodlands Dental Practice

United Kingdom

Sponsor information

Organisation Manchester University NHS Foundation Trust

Sponsor details

Research Office NOWGEN Building 29 Grafton Street Manchester England United Kingdom M13 9WU +44 161 276 4125 research.sponsor@mft.nhs.uk **Sponsor type** Hospital/treatment centre

Website https://mft.nhs.uk/

ROR https://ror.org/00he80998

Funder(s)

Funder type Government

Funder Name Health Technology Assessment Programme

Alternative Name(s) NIHR Health Technology Assessment Programme, HTA

Funding Body Type Government organisation

Funding Body Subtype National government

Location United Kingdom

Results and Publications

Publication and dissemination plan

Dissemination of the study findings will be via academic publications in high impact, peer reviewed journals, through presentations at national and international conferences and through press releases to mass media organisations.

Intention to publish date

31/12/2024

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study will be available upon request from the sponsor (research.sponsor@mft.nhs.uk).

IPD sharing plan summary Available on request

Study outputs Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<u>Protocol article</u>	protocol	24/05/2019	29/05/2019	Yes	No
HRA research summary			28/06/2023	No	No