Pretreatment rehabilitation of swallowing difficulties in people with head and neck cancer

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered		
03/03/2022		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
04/03/2022	Completed	[X] Results		
Last Edited	Condition category	Individual participant data		
01/10/2025	Cancer			

Plain English summary of protocol

Background and study aims

People with cancer in the mouth or throat (head and neck cancer) usually have difficulty in swallowing food and drink at some stage before, during and/or after cancer treatment. Dysphagia (difficulty in swallowing) may persist for months or years after treatment due to side-effects of surgery and chemo/radiotherapy.

The aim of this research is to determine whether a pre-treatment swallowing intervention package improves patients' ability to eat and drink thus increasing their quality of life. The SIP SMART prehabilitation intervention comprises multiple components including: tailored information, educational counseling, personalized exercises, and specific strategies to help engage with advice and exercises.

This is a pilot study in which a small-scale version of the anticipated large clinical trial will be tested at six NHS hospitals randomised into two groups.

Who can participate?

Patients aged 18 years or older, newly diagnosed with head and neck cancer will be approached to take part.

What does the study involve?

Participation will not affect cancer treatment. One group will receive the routine "usual care" which involves meeting with the speech and language therapist (SLT) for general advice and provision of a generic swallowing exercises leaflet. The intervention group will receive the new prehabilitation package incorporating the components mentioned above. The SLTs at the intervention hospitals will all receive training in the prehabilitation package. This pilot study will provide important information about whether hospitals can recruit a sufficient number of patients to the trial, and about whether patients remain in the study long enough (six months after completion of treatment) to collect all necessary outcome measures. Other factors that may affect results in a large trial will also be explored. This includes whether SLTs deliver the intervention as planned and what patients feel about the intervention and their engagement with it.

What are the possible benefits and risks of participating?

Benefits: We cannot promise that this study will help you but the information we get from this study will help improve the treatment for people with head and neck cancer. This study is incorporated into the pathway of care for patients having treatment for head and neck cancer. Patients who participate in trials benefit from close monitoring by the research team in addition to the clinical team. It is not clear at this stage whether the pre-treatment intervention will prove more beneficial than the current usual care. The information gathered from this study will help towards answering this question.

Risks: Your surgeon or oncologist will discuss with you the specific side effects of surgery and or chemotherapy and radiotherapy depending on your specific treatment. The current SIP SMART intervention is designed to reduce one of the most significant effects of cancer treatment to the head and neck, that is difficulty in eating, drinking and/or swallowing food and liquid. SIP SMART is non-invasive and we found no serious side effects for this intervention during the preliminary study. Participation will require some of your time, for example in completing questionnaires and adhering to the exercises.

Where is the study run from? University College London (UK)

When is the study starting and how long is it expected to run for? November 2020 to July 2024

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

Who is the main contact?

Dr Roganie Govander, roganie.govender@nhs.net

https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-trial-looking-at-swallowing-exercises-for-people-with-a-head-and-neck-cancer-sip-smart-2

Contact information

Type(s)

Scientific

Contact name

Dr Roganie Govender

ORCID ID

https://orcid.org/0000-0003-2249-434X

Contact details

University College London Hospital & University College London Head & Neck Academic Centre Ground Floor Central 250 Euston Road London United Kingdom NW1 2PQ +44 2034472156 roganie.govender@nhs.net

Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

Integrated Research Application System (IRAS)

305731

ClinicalTrials.gov (NCT)

Nil known

Protocol serial number

145979, CPMS 52016, NIHR300427, IRAS 305731

Study information

Scientific Title

Prehabilitation of swallowing difficulties in people with head and neck cancer: A pilot cluster randomised trial and process evaluation

Acronym

SIP SMART 2

Study objectives

People newly diagnosed with head and neck cancer who participate in a complex pre-habilitation behaviour change intervention tailored to educate, counsel and facilitate swallowing exercises over and above routine usual care will achieve better dysphagia related quality of life at six months, compared with usual care.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 01/03/2022, London Bridge Research Ethics Committee (2 Redman Place, Stratford, London, E20 1JQ, UK; +44 20 7104 8202; Juliana.araujo@hra.nhs.uk), ref: 22/LO/0150

Study design

Interventional pilot cluster randomized trial

Primary study design

Interventional

Study type(s)

Other

Health condition(s) or problem(s) studied

Head and neck cancer

Interventions

Standard care group: Patients recruited at sites randomised to usual care will receive the standard of care offered by the SLT service prior to their upcoming cancer treatment. Usual care may include information about the upcoming treatment and its impact on swallowing as well as the provision of a generic swallowing exercise leaflet. Patients will be asked to complete all study related questionnaires at baseline, one, three and 6 months after treatment completion.

Intervention Group: Patients in the intervention group will receive the SIP SMART intervention. The intervention takes place over two 45-minute consultations that may follow each other on the same day or with a day or two between them depending on patient preference. The new intervention will be delivered by SLTs who have completed a bespoke 2-day training course in behavioural counselling delivered by externally commissioned trainers with experience in behaviour change interventions in healthcare. Further detail about the intervention content is provided in an intervention manual available to trained clinicians at the intervention sites.

Intervention Type

Behavioural

Primary outcome(s)

Recruitment/retention will be measured by:

- 1. Proportion of hospitals invited who agree to participate in the RCT (test of sampling, recruitment and retention approaches for hospital sites) pre-trial logs.
- 2. Proportion of people with head and neck cancer approached in both trial arms who agree to provide outcome data for research evaluation based on screening logs.
- 3. The proportion of patients in the intervention and control groups for whom it is possible to collect follow-up data to the point of assessing the primary outcome (clinical effectiveness as determined by the MDADI score) and data relevant for an economic evaluation (cost effectiveness) data completeness at 6-month follow-up.
- 4. Proportion of missing data on each outcome at all data points measured in both arms data completeness at baseline, one month, three months and six month time-points.
- 5. Proportion of patients who report satisfactory adherence to the intervention as measured by a study customised adherence questionnaire at one, three and 6 months.
- 6. Acceptability will be assessed via process evaluation of factors related to context and implementation at pre-trial, during trial and post-trial that may impact the future main trial. This will involve focus group discussions and one-to-one interviews with patients and staff.

Key secondary outcome(s))

- 1. Dysphagia related QOL will be measured by the MDADI at baseline, one, three and six months.
- 2. Clinical assessment of swallow function will be measured using the water swallow test, maximal inter-incisor jaw opening and the head and neck performance status scale for normalcy of diet and public eating at baseline, one, three and six months.
- 3. Health related quality of life will be assessed using the Functional Assessment of Cancer Therapy (FACT_HN) at baseline, one, three and six months.
- 4. Change in nutritional parameters including weight and feeding tube status at baseline, one, three and six months will also provide proxy indicators for swallowing function.

Economic outcomes:

- 5. Costs associated with the intervention and usual care using NHS treatment tariffs
- 6. Health care utilisation costs, time and travel and productivity losses using the UK Cancer costs Questionnaire (UKCC Version3)
- 7. Incremental cost per change in MDADI score between 1 month post treatment and 6 months.

Completion date

30/07/2024

Eligibility

Key inclusion criteria

- 1. Adults over the age of 18 years.
- 2. Both males and females.
- 3. Clinical and Radiological diagnosis of new stage III/IV tumour of the head and neck (oral cavity, oropharynx, nasopharynx, hypopharynx, mandible, maxilla, unknown primary with planned bilateral neck radiation)
- 4. Discussed at the multidisciplinary team (MDT) meeting and planned for treatment with curative intent via surgery, radiotherapy, chemoradiotherapy or combinations thereof.
- 5. Able to provide informed consent.
- 6. Patients who do not have English as their first language but for whom appropriate translation services as per local hospital practice is in place.

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

- 1. Patients with a previous diagnosis of head and neck cancer.
- 2. Patients who have not consented prior to cancer treatment, or those receiving palliation.
- 3. Patients who are to be treated solely by non-standard treatment such as photodynamic therapy, brachytherapy or chemotherapy alone.
- 4. Patients who are planned for a total laryngectomy or long-term tracheostomy.
- 5. Patients who are vulnerable and/or have significant co-morbidities as determined by the clinical team and/or with a score of 4 on the WHO performance status scale.
- 6. Patients who have long-term medical history of neurological conditions resulting in known preexisting dysphagia.
- 7. Patients with brain tumours and other primary sites not within head and neck.
- 8. Patients who are unable to provide informed consent

Date of first enrolment

18/07/2022

Date of final enrolment

30/09/2023

Locations

Countries of recruitment

United Kingdom

Study participating centre Uclh

250 Euston Road London United Kingdom NW1 2PQ

Study participating centre Clatterbridge Cancer Centre

Clatterbridge Hospital Clatterbridge Road Wirral United Kingdom CH63 4JY

Study participating centre Sunderland Royal Hospital

Kayll Road Sunderland United Kingdom SR4 7TP

Study participating centre James Cook University Hospital

Marton Road Middlesbrough United Kingdom TS4 3BW

Study participating centre Luton and Dunstable University Hospital

Lewsey Road Luton United Kingdom LU4 0DZ

Study participating centre North Middlesex Hospital

Sterling Way London United Kingdom N18 1QX

Sponsor information

Organisation

University College London

ROR

https://ror.org/02jx3x895

Funder(s)

Funder type

Government

Funder Name

NIHR Academy

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

Individual participant data (IPD) sharing plan

The current data sharing plans for this study are unknown and will be available at a later date

IPD sharing plan summary

Data sharing statement to be made available at a later date

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient- facing?
Results article		25/09 /2025	01/10 /2025	Yes	No
HRA research summary			28/06 /2023	No	No
Other publications	Sub-study looking at allied health professional participation in the NIHR Associate Principal Investigator scheme	14/05 /2025	09/06 /2025	Yes	No
Participant information sheet	Participant information sheet	11/11 /2025	11/11 /2025	No	Yes
Poster results	BAHNO - British Association of Head & Neck Oncologists poster presentation	16/05 /2025	12/08 /2025	No	No