

# Improving screening strategies for migrants in primary care

<b>Submission date</b> 11/06/2019	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 26/06/2019	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 08/07/2021	<b>Condition category</b> Other	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

Migrant health status may be improved if certain health conditions are identified early through a screening program. This is a study conducted in eight primary care centers (PCCs) located in four areas of Catalonia that evaluates the feasibility and cost-effectiveness of a screening program through a digital tool used by medical doctors during their daily consultation. The tool based on origin, age and sex, generates an alarm in the medical record system indicating the specific recommendations for each individual. The seven infectious diseases selected are HIV, hepatitis B, hepatitis C, tuberculosis, strongyloidiasis, schistosomiasis and Chagas disease. Female genital mutilation (FGM) and mental health are also included as they are associated with migration.

### Who can participate?

Migrant patients coming from endemic countries for any of the conditions included in the study

### What does the study involve?

Participating PCCs are randomly allocated to either use the digital tool or not. A training session concerning migrant screening strategies for each condition is done in all PCCs. The number of diagnoses of all the conditions are extracted from medical records.

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

The expected benefits are to increase the number of screened migrants and to improve their health and to increase the awareness of the primary care health professionals about the health needs of the migrant populations.

### Where is the study run from?

Eight primary care centers (PCCs) located in four areas of Catalonia (Spain)

### When is the study starting and how long is it expected to run for?

March 2017 to December 2019

### Who is funding the study?

Generalitat de Catalunya - Departament de Salut (Spain)

Who is the main contact?  
Dr Ana Requena-Méndez  
ana.requena@isglobal.org

## Contact information

**Type(s)**  
Scientific

**Contact name**  
Dr Ana Requena-Méndez

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## Additional identifiers

**EudraCT/CTIS number**  
Nil known

**IRAS number**

**ClinicalTrials.gov number**  
Nil known

**Secondary identifying numbers**  
SLT002/16/00455

## Study information

**Scientific Title**  
Cost-effectiveness of an alert software tool implemented in the medical record system of primary care centres to improve the screening procedure in migrants

**Acronym**  
CRIBMI

**Study objectives**  
The implementation of a decision support system (DSS) of primary care health professionals concerning disease-specific screening in migrant populations may improve the diagnostic yield of health professional and avoid potential complications of the diseases.

**Ethics approval required**  
Old ethics approval format

**Ethics approval(s)**

Approved 16/12/2016, Ethics committee of the Hospital Clínic of Barcelona (HCB/2016/0858) and the Jordi Gol i Gurina Foundation (SLT002/16/00455) (Hospital Clínic de Barcelona, Villarroel, 170 – 08036 Barcelona, Spain; Tel: +34 (0)93 227 54 00)

**Study design**

Cluster randomized study

**Primary study design**

Interventional

**Secondary study design**

Cluster randomised trial

**Study setting(s)**

GP practice

**Study type(s)**

Screening

**Participant information sheet****Health condition(s) or problem(s) studied**

HIV, hepatitis B and C, tuberculosis, strongyloidiasis, schistosomiasis, Chagas disease, female genital mutilation and mental health assessment

**Interventions**

The study takes place in 8 primary care centers (PCCs) located in four areas of Catalonia. In each area, a digital tool (providing recommendations for migrant screening purpose based on an individual risk assessment) will be randomly allocated to the medical record system of one PPC, and will be compared with other PPCs (control) where no digital tool will be implemented.

Intervention: Implementation of DSS tool in PCC providing individual risk assessment for 9 conditions that should be screened in each individual migrant based upon 3 variables (country of origin, sex and age)

Control: PCC without implementation of DSS

Intervention: 01/03/2018 - 31/12/2018

No follow-up

**Intervention Type**

Other

**Primary outcome measure**

Number of diagnoses of all aggregated conditions included in the study, extracted from medical records between March and December 2018:

**Secondary outcome measures**

Extracted from medical records between March and December 2018:

1. Number of HIV diagnoses
2. Number of strongyloidiasis diagnoses

3. Number of schistosomiasis diagnoses
4. Number of tuberculosis diagnoses
5. Number of Chagas disease diagnoses
6. Number of Hepatitis C diagnoses
7. Number of Hepatitis B diagnoses
8. Number of mental health diagnoses
9. Number of female genital mutilation diagnoses
10. Number of early diagnoses of HIV
11. Number of early diagnoses of hepatitis B and C and HIV

**Overall study start date**

01/03/2017

**Completion date**

31/12/2019

## Eligibility

**Key inclusion criteria**

Migrant patients coming from endemic countries for any of the conditions included in the study

**Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Both

**Target number of participants**

There are a total of 8 centres distributed in 4 areas (2 centres in each area). The targeted population are the migrants being attended in that primary care. The number of individuals varies in each area but are similar between PPCs from the same area. It varies between 2034 and 7481

**Total final enrolment**

14598

**Key exclusion criteria**

Does not meet inclusion criteria

**Date of first enrolment**

01/03/2018

**Date of final enrolment**

31/12/2018

## Locations

## **Countries of recruitment**

Spain

### **Study participating centre**

#### **CAPBSE**

Carrer Roselló 161

Barcelona

Spain

08036

### **Study participating centre**

#### **EAP Lleida 1**

Rambla Ferran

Lleida

Spain

25007

### **Study participating centre**

#### **EAP Manresa 2**

Plaça Catalunya

Manresa

Spain

08241

### **Study participating centre**

#### **EAP Manresa IV**

Sagrada Família

Manresa

Spain

08243

### **Study participating centre**

#### **CAP Sagrada Família**

Carrer Corsega 643

Barcelona

Spain

08025

### **Study participating centre**

**EAP Tortosa 1 (Est)**

Plaça Carrilet s/n  
Tortosa  
Spain  
43500

**Study participating centre****CAP Tortosa Oest (Baix Ebre)**

Avenida Colom 16-20  
Tortosa  
Spain  
43500

**Study participating centre****CAP Primer de Maig**

C/ De la Mercè, 5  
Lleida  
Spain  
25003

## Sponsor information

**Organisation**

Barcelona Institute for Global Health

**Sponsor details**

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**Sponsor type**

Research organisation

**Website**

[www.isglobal.org](http://www.isglobal.org)

**ROR**

<https://ror.org/03hjgt059>

# Funder(s)

## Funder type

Government

## Funder Name

Generalitat de Catalunya - Departament de Salut (PERIS SLT002/16/00455)

## Alternative Name(s)

Government of Catalonia

## Funding Body Type

Government organisation

## Funding Body Subtype

Local government

## Location

Spain

# Results and Publications

## Publication and dissemination plan

Two articles in peer-reviewed journals

## Intention to publish date

06/06/2020

## Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from Dr Ana Requena-Méndez (ana.requena@isglobal.org).

## IPD sharing plan summary

Available on request

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>		25/04/2019		Yes	No
<a href="#">Results article</a>		06/07/2021	08/07/2021	Yes	No