Dispatcher resuscitation terminology study

Submission date	Recruitment status No longer recruiting	Prospectively registered		
07/08/2017		[X] Protocol		
Registration date	Overall study status	Statistical analysis plan		
08/08/2017	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
14/08/2019	Other			

Plain English summary of protocol

Background and study aims

Each year, about 30,000 people in the UK suffer an out-of-hospital cardiac arrest. A cardiac arrest occurs when the heart suddenly stops beating properly. Immediate treatment is essential to prevent death. Patients have the best chance of survival when they receive cardiopulmonary resuscitation (CPR) before the ambulance arrives. The ambulance service can coach people to do this over the phone. At the moment, it is not known which way is the best way to instruct people over the phone to ensure they deliver high-quality CPR. Across international CPR guidelines, there is variation in the wording used to describe how best to perform CPR. The aim of this study is to identify the best way to instruct people how to deliver CPR.

Who can participate?
Adults aged over 18 without recent CPR training

What does the study involve?

Participants perform CPR on a manikin based on instructions similar to those given when the ambulance service instruct people over the phone. They are randomly allocated to one of three groups, which each receive a slightly different instruction regarding how hard to press on the chest (push at least 5cm, push approximately 5cm, or push hard and fast). Participants are asked to deliver CPR to a manikin based on these instructions for two minutes and the quality of CPR delivered to the manikin is measured.

What are the possible benefits and risks of participating?

Findings from this study will inform the wording used in international resuscitation guidelines. There are no significant direct benefits or risks associated with taking part in this study. Participants who agree to take part are offered the opportunity to attend a CPR course. Some participants may experience discomfort in the arms or knees, but this discomfort is short-lived.

Where is the study run from? Warwick Medical School (UK)

When is the study starting and how long is it expected to run for? December 2016 to April 2018

Who is funding the study? Resuscitation Council (UK)

Who is the main contact? Dr Keith Couper

Contact information

Type(s)

Scientific

Contact name

Dr Keith Couper

ORCID ID

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers 35062

Study information

Scientific Title

In adults delivering CPR, does the use of a specific terminology to instruct cardiopulmonary resuscitation delivery CPR instructions affect CPR quality? A randomised controlled manikin trial

Acronym

DIRECT

Study objectives

Each year, approximately 30,000 people in the UK suffer an out-of-hospital cardiac arrest. A cardiac arrest occurs when the heart suddenly stops beating properly. Immediate treatment is essential to prevent death. Patients have the best chance of survival when they receive cardiopulmonary resuscitation before the ambulance arrives. In people that have not been

trained to do this, the ambulance service can coach people to do this over the phone. At the moment, it is not known which is the best way to instruct people over the phone to ensure they deliver high-quality CPR. Across international CPR guidelines, there is variation in the wording used to describe how best to perform CPR. The aim of this randomised controlled manikin trial is to identify the best way to instruct people how to deliver CPR.

Ethics approval required

Old ethics approval format

Ethics approval(s)

West Midlands - Edgbaston Research Ethics Committee, 04/07/2017, ref: 17/WM/0234

Study design

Randomised; Interventional; Design type: Treatment, Process of Care, Psychological & Behavioural, Physical

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 to request a patient information sheet

Health condition(s) or problem(s) studied

Specialty: Critical care, Primary sub-specialty: Critical Care; UKCRC code/ Disease: Generic Health Relevance/ No specific disease

Interventions

Adults without recent CPR training will be invited to take part. They will perform CPR on a manikin, based on instructions similar to those given when the ambulance service instruct people over the phone. They will be randomised using an internet-based randomisation system (1:1:1 ratio) into three groups, which will each receive a slightly different instruction regarding how hard to press on the chest:

Arm 1: chest compression instruction to push "at least 5cm"

Arm 2: chest compression instruction to push "approximately 5cm"

Arm 3: chest compression instruction to push "hard and fast"

They will be asked to deliver CPR to a manikin based on these instructions for two minutes. There will be no follow-up. The quality of CPR delivered to the manikin will be measured.

Intervention Type

Other

Primary outcome measure

Mean chest compression depth, measured using a CPR quality meter during the CPR quality assessment

Secondary outcome measures

Measured using a CPR quality meter during the CPR quality assessment:

- 1. Chest compression rate (min-1)
- 2. Chest compression count
- 3. % of chest compessions in target rate range (100-120 compressions per minute)
- 4. % of chest compressions in target depth range (50-60mm)
- 5. % delivery of good quality CPR

Overall study start date

22/12/2016

Completion date

30/04/2018

Eligibility

Kev inclusion criteria

- 1. Provision of written informed consent
- 2. Aged over 18 years

Participant type(s)

Healthy volunteer

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

Planned Sample Size: 330; UK Sample Size: 330

Total final enrolment

330

Key exclusion criteria

- 1. Physical disability that prevents delivery of CPR for 2 minutes while kneeling on the floor
- 2. Previous participation in DIRECT study
- 3. Received practical CPR training in the last 2 years
- 4. Non-English speaking (to ensure that the information is standardised between groups)
- 5. NHS employee working in a clinical role

Date of first enrolment 31/07/2017

Date of final enrolment 31/12/2017

Locations

Countries of recruitment

England

United Kingdom

Study participating centre Warwick Medical School United Kingdom CV4 7AL

Sponsor information

Organisation

Heart of England NHS Foundation Trust

Sponsor details

Birmingham Heartlands Hospital Bordesley Green East Birmingham England United Kingdom B9 5ST

Sponsor type

Hospital/treatment centre

Funder(s)

Funder type

Government

Funder Name

Resuscitation Council (UK)

Results and Publications

Publication and dissemination plan

Planned publication in a high-impact peer reviewed journal in October 2018.

Intention to publish date

01/10/2018

Individual participant data (IPD) sharing plan

The data sharing plans for the current study are unknown and will be made 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?
Protocol file	version V1.0	25/05/2017	02/04/2019	No	No
Results article	results	01/09/2019	14/08/2019	Yes	No
HRA research summary			28/06/2023	No	No