

# A feasibility trial of community-based pulmonary rehabilitation for adults with chronic obstructive pulmonary disease (COPD) in India

<b>Submission date</b> 05/10/2021	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
<b>Registration date</b> 05/10/2021	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 30/04/2024	<b>Condition category</b> Respiratory	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

India has the largest number of chronic obstructive pulmonary disease (COPD) cases in the world and ranks second in COPD mortality worldwide. COPD is a long-term inflammatory lung disease that causes difficulty breathing, cough, mucus (sputum) production and wheezing. It's often caused by long-term exposure to cigarette smoke. Since COPD is a progressive, non-curable condition, rehabilitation of the patient becomes the most plausible therapeutic intervention.

International guidelines recommend that pulmonary rehabilitation (PR) should be offered to adults living with COPD. PR reverses the disability associated with Chronic Respiratory Diseases (CRDs), which is supported by the highest level of evidence. The World Health Organization makes the case for the fundamental role of accessible and affordable rehabilitation and acknowledges an unmet need that is profound in low- and middle-income countries (LMICs) where demand greatly outweighs capacity.

### Who can participate?

Adults aged between 18 and 65 years with a diagnosis of COPD and functional limitation due to breathlessness.

### What does the study involve?

Eligible study participants will participate in a six-week, twice-weekly, supervised community-based pulmonary rehabilitation (PR) programme. Assessment of participants' lung function, exercise tolerance, and health status will be conducted. In addition, semi-structured in-depth interviews with participants will be conducted after their participation in the PR programme.

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

Participation will help inform the design of a culturally appropriate pulmonary rehabilitation (PR) programme for people with COPD in Jodhpur (India). Risks from participation are not anticipated.

Where is the study run from?

Indian Council of Medical Research – National Institute for Implementation Research on Non-Communicable Diseases (India)

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

October 2021 to March 2023

Who is funding the study?

National Institute for Health Research (NIHR) Global Health Research Group on Respiratory Rehabilitation (Global RECHARGE) (UK)

Who is the main contact?

Dr Arun Kumar Sharma

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### **Study website**

<https://www.globalrecharge.org.uk/>

## **Contact information**

### **Type(s)**

Scientific

### **Contact name**

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### **Contact details**

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# Additional identifiers

## EudraCT/CTIS number

Nil known

## IRAS number

## ClinicalTrials.gov number

Nil known

## Secondary identifying numbers

Nil known

# Study information

## Scientific Title

A single-arm feasibility trial of community-based pulmonary rehabilitation for adults with COPD in the slum areas of Jodhpur, Rajasthan

## Study objectives

1. Determine the feasibility of conducting community-based PR for people living with COPD in residents of slum areas in Jodhpur, Rajasthan
2. Assess the acceptability of community-based PR among Indian adults living with COPD and healthcare staff involved in its delivery
3. Describe any changes in the health of the adults living with COPD following completion of PR
4. Assess the feasibility of a future trial and estimate the required sample size

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

1. Approved 09/08/2021, Institutional Ethics Committee & Health Research (ICMR-NIIRNCD Jodhpur (Rajasthan), India; +91 (0)11-27298472; membersecyniirncd@gmail.com), ref: IEC-ICMR NIIRNCD/2021/25/11
2. Approved 10/11/2021, University of Leicester Ethics Committee (The University of Leicester, University Road, Leicester, LE1 7RH, United Kingdom; +44 (0)1162522522; ethicsapp@leicester.ac.uk), ref: 32024
3. Approved 26/10/2021, Institutional Human Ethics Committee & Health (Room no 116, first floor, Medical College, All India Institute of Medical Science, Basni, Phase-II, Jodhpur, Rajasthan-342005; +91 (0)291-2012984 ext: 3109; ethicscommitteeaiimsjd@gmail.com), ref: ECR/866/Inst/RJ/2016/RR-19

## Study design

Single-centre mixed-methods single-arm non-randomized cohort feasibility study

## Primary study design

Interventional

## Secondary study design

Non randomised study

**Study setting(s)**

Community

**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**

Chronic Obstructive Pulmonary Disease (COPD)

**Interventions**

In addition to usual care, participants in the intervention arm will receive pulmonary rehabilitation (PR). PR will comprise the core elements of an evidence-based rehabilitation, a programme of exercises and health education will consist of a six-week programme offered to a group of up to 12 participants, with sessions occurring twice weekly for at least 2 h (approximately 1 h for education and 1 h for exercise). All staff delivering PR will be trained and assisted by a medical doctor (M.B.B.S) and by a Medical Social Worker. The venue will have a maximum capacity of 6-8 patients per PR class and this will be continuously reviewed to ensure patient safety during COVID pandemic. The equipment required will be simple and include chairs, weights, and simple exercise equipment based on local availability and suitability.

**Intervention Type**

Behavioural

**Primary outcome measure**

Feasibility and the acceptability of the PR intervention measured using semi-structured in-depth interviews with participants at 6 weeks

**Secondary outcome measures**

1. Lung function measured using the following at baseline and 6 weeks:
  - 1.1. Spirometry to calculate pre- and post-bronchodilator forced expiratory volume in one second [FEV1], forced vital capacity [FVC], and FEV1/FVC ratio
  - 1.2. Questionnaires to calculate smoking status and number of COPD exacerbations in the last year
2. Health status measured using the following at baseline and 6 weeks:
  - 2.1. Participant perceived respiratory disability due to dyspnea using the Medical Research Council (MRC) dyspnea scale
  - 2.2. Health-related quality of life using the chronic obstructive pulmonary disease assessment test (CAT)
  - 2.3. Economic impact using the Work Productivity and Activity Impairment (WPAI) questionnaire
  - 2.4. Emotional health using the Hospital Anxiety and Depression Scale (HADS)
3. Physical fitness measured using the following at baseline and 6 weeks:
  - 3.1. Exercise capacity using the incremental shuttle walk test (ISWT) and the endurance shuttle walking test (ESWT)
  - 3.2. Lower extremity muscular strength using a five-repetition sit-to-stand test (5XSST)

**Overall study start date**

01/10/2021

**Completion date**

31/03/2023

## Eligibility

**Key inclusion criteria**

1. Aged 18 to 65 years
2. Spirometry confirmed diagnosis of chronic obstructive pulmonary disease (COPD)
3. Functional limitation due to breathlessness reaching a score of  $\geq 2$  on the Medical Research Council (MRC) dyspnea scale

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Upper age limit**

65 Years

**Sex**

Both

**Target number of participants**

40

**Total final enrolment**

9

**Key exclusion criteria**

1. Significant comorbidities such as cardiovascular, neurological, locomotor difficulties that preclude exercise, cognitive, malignant disease, or any other condition that would compromise participation in the rehabilitation programme
2. COVID-19 RT-PCR positive result within 3 days of assessment
3. Unable to provide informed consent.

**Date of first enrolment**

24/01/2022

**Date of final enrolment**

31/01/2023

## Locations

**Countries of recruitment**

India

**Study participating centre**

**Indian Council of Medical Research – National Institute for Implementation Research on Non-Communicable Diseases.**

New Pali Road

Air force Area

Jodhpur

India

342005

**Study participating centre**

**All India Institute of Medical Sciences (AIIMS)**

Basni Industrial Area

MIA 2nd Phase

Basni

Jodhpur

India

342005

## **Sponsor information**

**Organisation**

University of Leicester

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**Sponsor type**

University/education

**Website**

<http://www.le.ac.uk>

**ROR**

<https://ror.org/04h699437>

# Funder(s)

**Funder type**

Government

**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

**Publication and dissemination plan**

The results of the trial will be disseminated through oral presentations at local and international scientific conferences or seminars and publication in a peer-reviewed journal.

**Intention to publish date**

31/12/2024

**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?
<a href="#">Protocol file</a>	version 1	07/09/2020	01/03/2024	No	No