

# Usefulness of a three-step guideline to reduce length of hospital stay for patients with community-acquired pneumonia: a randomised controlled trial

**Submission date**

18/04/2006

**Recruitment status**

No longer recruiting

☐ Prospectively registered

☐ Protocol

**Registration date**

17/05/2006

**Overall study status**

Completed

☐ Statistical analysis plan

☒ Results

**Last Edited**

06/01/2021

**Condition category**

Infections and Infestations

☐ Individual participant data

**Plain English summary of protocol**

Not provided at time of registration

## Contact information

**Type(s)**

Scientific

**Contact name**

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**Contact details**

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## Additional identifiers

EudraCT/CTIS number

IRAS number

**ClinicalTrials.gov number**

**Secondary identifying numbers**

FIS 040139

## **Study information**

### **Scientific Title**

Usefulness of a three-step guideline to reduce length of hospital stay for patients with community-acquired pneumonia: a randomised controlled trial

### **Study objectives**

The implementation of a three-step guideline would be effective and safe in reducing length of stay for hospitalized patients with community-acquired pneumonia

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Approved by the Ethics Committee of the University of Bellvitge (Comite Etic d'Investigació de l'Hospital Universitari de Bellvitge), July 2004, reference number: 05/FIS-008

### **Study design**

Randomised controlled trial

### **Primary study design**

Interventional

### **Secondary study design**

Randomised controlled trial

### **Study setting(s)**

Not specified

### **Study type(s)**

Treatment

### **Participant information sheet**

### **Health condition(s) or problem(s) studied**

Community-acquired pneumonia

### **Interventions**

Patients will be randomly assigned to one of two groups:

1. Use of a three-step guideline, including early mobilization, and pre-defined criteria for switch antibiotic therapy and hospital discharge
2. Control group (conventional management)

### **Intervention Type**

Other

**Phase**

Not Specified

**Primary outcome measure**

Length of hospital stay

**Secondary outcome measures**

1. Time to switch
2. Readmission (<30 days)
3. Overall mortality (<30 days)
4. Satisfaction with care

**Overall study start date**

24/04/2006

**Completion date**

31/12/2007

## Eligibility

**Key inclusion criteria**

Immunocompetent adults (aged >18 years) who have received a diagnosis of community-acquired pneumonia in the emergency department and are admitted to the hospital

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Sex**

Both

**Target number of participants**

376

**Total final enrolment**

401

**Key exclusion criteria**

1. Severe immunosuppression (neutropenia, transplantation, human immunodeficiency virus [HIV] infection)
2. Imminent death
3. Intensive care unit (ICU) admission
4. Shock
5. Complicated pleural effusion
6. Aspiration pneumonia

- 7. Social problem (homelessness)
- 8. Not able to drink and eat
- 9. Absence of written informed consent

**Date of first enrolment**

24/04/2006

**Date of final enrolment**

31/12/2007

## **Locations**

**Countries of recruitment**

Spain

**Study participating centre****Infectious Disease Service**

Barcelona

Spain

08907

## **Sponsor information**

**Organisation**

Spanish National Health Service (Fondo de Investigación Sanitaria)

**Sponsor details**

Sinesio Delgado 4

Madrid

Spain

28029

**Sponsor type**

Government

## **Funder(s)**

**Funder type**

Government

**Funder Name**

Investigation of Sanitary Funding (Fondo de Investigación Sanitaria) IDIBELL

# Results and Publications

## Publication and dissemination plan

Not provided at time of registration

## Intention to publish date

## Individual participant data (IPD) sharing plan

## IPD sharing plan summary

Not provided at time of registration

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	25/06/2012		Yes	No