A randomised controlled trial comparing three methods of teaching home spirometry in adult patients with respiratory symptoms

Submission date	Recruitment status No longer recruiting	Prospectively registered		
13/04/2023		☐ Protocol		
Registration date	Overall study status Completed Condition category	Statistical analysis plan		
18/05/2023		Results		
Last Edited		Individual participant data		
15/07/2025	Respiratory	[X] Record updated in last year		

Plain English summary of protocol

Background and study aims

Spirometry is an important test in the assessment and monitoring of patients with respiratory symptoms. It measures how much air you can get in and out of your lungs and the total volume of air that you can get in and out. Due to the COVID-19 pandemic access to spirometry has become more limited meaning that patients are having to wait longer to have this test. The aim of this study is to investigate whether patients can perform spirometry measurements at home and which method of teaching patients to perform the test works best.

Who can participate?

Patients aged 18 years or over who require spirometry as part of their standard of care

What does the study involve?

Participants will be allocated to one of three different groups:

Group 1 - Face to Face Teaching

The participant will attend the hospital for their spirometry appointment. At this appointment, they will also be taught how to use the home spirometry equipment and app. The participant will then take the equipment home and perform spirometry measurements.

Group 2 - Virtual Teaching

Participants will be sent the home spirometry equipment and the Spirobank Smart Spirometer Home Spirometry Patient Information Leaflet in the post. They will then have a virtual appointment with a member of the Respiratory Physiology team. At this appointment participants will be taught how to use the home spirometry equipment and app. The participant will then take the equipment home and perform spirometry measurements.

Participants will then attend the hospital for their spirometry appointment.

Group 3 - Self-Directed Learning

Participants will be sent the home spirometry equipment and the Spirobank Smart Spirometer Home Spirometry Patient Information Leaflet in the post. They will also be sent a link to a video demonstrating how to use the equipment. The participant will then take the equipment home and perform spirometry measurements. Participants will then attend the hospital for their spirometry appointment.

After performing home spirometry measurements, participants will email their results to the hospital. Participants will also be asked to complete a questionnaire, which asks questions about how they found using the home spirometry equipment.

What are the possible benefits and risks of participating?

There are no direct benefits to participants in the short term. However in the longer term if successful participants may be able to continue performing spirometry at home which may reduce the number of times that they need to attend appointments at the hospital. They may also gain more information about their respiratory health which might be useful. Before taking part all participants will be screened to make sure the breathing tests will not pose a risk to them. In some circumstances such as if participants have recently undergone surgery the spirometry test should not be performed and therefore participants would not be able to participate in this study. The breathing tests may cause participants to feel slightly lightheaded or breathless, this is normal and should resolve after a few minutes.

Where is the study run from? Southmead Hospital (UK)

When is the study starting and how long is it expected to run for? September 2020 to June 2023

Who is funding the study? Southmead Hospital Charity (UK)

Who is the main contact?
Dr Caitlin Morgan, caitlin.morgan@nbt.nhs.uk

Contact information

Type(s)

Public

Contact name

Dr Caitlin Morgan

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Additional identifiers

EudraCT/CTIS number

IRAS number

287426

ClinicalTrials.gov number

Nil known

Secondary identifying numbers

IRAS 287426

Study information

Scientific Title

REmote teACHing of home SPIROmetry in patients with respiratory symptoms

Acronym

REACH SPIRO

Study objectives

Remote teaching of home spirometry (using the Spirobank Smart spirometer) produces consistent and acceptable lung function measurements when compared to face-to-face teaching on the same device and when compared to the gold standard (lab-based hospital spirometry).

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 07/05/2021, Office for Research Ethics Committees Northern Ireland (ORECNI), Customer Care & Performance Directorate, Lissue Industrial Estate West, 5 Rathdown Walk, Moira Road, Lisburn, BT28 2RF, UK; +44 (0)28 95361407; RECA@hscni.net), ref: 21/NI/0063

Study design

Randomized controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Home, Hospital

Study type(s)

Diagnostic

Participant information sheet

Not available in web format, please use contact details to request a participant information sheet

Health condition(s) or problem(s) studied

Respiratory disease

Interventions

Single-centre unblinded randomized controlled trial of remote versus face-to-face teaching of home spirometry on the Spirobank smartmeter in patients presenting with respiratory symptoms. Participants will be randomized in a 1:1:1 ratio. The group allocated indicates which method of teaching that participant receives. Following consent patients were randomised using a secure web-based system (REDCap). It is not practical to conceal which arm a patient was randomised to from the perspective of the participant or the researcher.

Group 1 - Face to Face Teaching

The participant will attend the hospital for their spirometry appointment. At this appointment, they will also be taught how to use the home spirometry equipment and app. The participant will then take the equipment home and perform spirometry measurements.

Group 2 - Virtual Teaching

Participants will be sent the home spirometry equipment and the Spirobank Smart Spirometer Home Spirometry Patient Information Leaflet in the post. They will then have a virtual appointment with a member of the Respiratory Physiology team. At this appointment participants will be taught how to use the home spirometry equipment and app. The participant will then take the equipment home and perform spirometry measurements. Participants will then attend the hospital for their spirometry appointment.

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After performing home spirometry measurements, participants will email their results to the hospital. Participants will also be asked to complete a questionnaire, which asks questions about how they found using the home spirometry equipment.

Intervention Type

Mixed

Primary outcome measure

Accuracy and acceptability of measurements produced by remote teaching of home spirometry (MIR Spirobank smartmeter) compared to face-to-face teaching and in-hospital spirometry (the gold standard). One or more home spirometry measurements of Forced Expiratory Volume in 1 second (FEV1), Forced Vital Capacity (FVC), FEV1/FVC and Peak Expiratory Flow Rate (PEFR) and forced expiratory flow (FEF) will be compared between each randomised group and hospital spirometry. Home spirometry recordings are submitted within 6 weeks of hospital spirometry.

Secondary outcome measures

1. Feasibility of bronchodilator reversibility performed at home, assessed using home spirometry measurements of FEV1, FVC, PEFR and FEF with subsequent measurements after a short-acting bronchodilator and hospital spirometry. Home spirometry recordings are submitted within 6 weeks of hospital spirometry.

- 2. Patient acceptability of performing home spirometry, assessed by qualitative analysis of feedback questionnaires following the completion of home and hospital spirometry
- 3. Factors that affect patient willingness, adherence and quality of home spirometry, assessed by qualitative analysis of feedback questionnaires following completion of home and hospital spirometry
- 4. Disease-specific effects in ILD and airway disease patients assessed using home and hospital spirometry measurements of FEV1, FVC, PEFR and FEF spirometry. Home spirometry recordings are submitted within 6 weeks of hospital spirometry

Overall study start date

24/09/2020

Completion date

01/06/2023

Eligibility

Key inclusion criteria

- 1. Require spirometry as part of their routine clinical care
- 2. The participant has the required technology (smartphone or tablet and an internet connection) to enable the use of the home spirometry device
- 3. Able to give informed consent

Participant type(s)

Patient

Age group

Adult

Sex

Both

Target number of participants

100

Total final enrolment

106

Key exclusion criteria

- 1. Age < 18 years
- 2. Spirometry contraindicated

Date of first enrolment

13/07/2021

Date of final enrolment

24/05/2022

Locations

Countries of recruitment

England

United Kingdom

Study participating centre North Bristol NHS Trust

Southmead Hospital Southmead Road Westbury-on-trym Bristol United Kingdom BS10 5NB

Sponsor information

Organisation

North Bristol NHS Trust

Sponsor details

Learning and Research Building Southmead Hospital Bristol England United Kingdom BS10 5NB +44 (0)7739708065 researchsponsor@nbt.nhs.uk

Sponsor type

Hospital/treatment centre

Website

https://www.nbt.nhs.uk/research-innovation

ROR

https://ror.org/036x6gt55

Funder(s)

Funder type

Charity

Funder Name

Southmead Hospital Charity

Results and Publications

Publication and dissemination plan

- 1. Abstract submitted for ERS Congress 2023
- 2. Planned publication in a high-impact peer-reviewed journal

Intention to publish date

01/08/2025

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?
HRA research summary			28/06/2023	No	No