# Can we introduce evidence based prescribing of complementary drug therapies into primary care? A randomised controlled trial.

Recruitment status	Prospectively registered
No longer recruiting	☐ Protocol
Overall study status	Statistical analysis plan
Completed	Results
Condition category	Individual participant data
Musculoskeletal Diseases	Record updated in last year
	No longer recruiting  Overall study status  Completed  Condition category

# Plain English summary of protocol

Not provided at time of registration

# Contact information

## Type(s)

Scientific

#### Contact name

Prof Maria Paola Dey

#### Contact details

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# Additional identifiers

Protocol serial number N/A

# Study information

Scientific Title

## **Study objectives**

To determine the impact of dissemination to GPs of a recommendation about glucosamine sulphate for knee osteoarthritis, endorsed by Bury PCT Medicines Subgroup on:

- 1. The frequency with which glucosamine sulphate is prescribed in primary care
- 2. The appropriateness of prescribing
- 3. The frequency with which non-steroidal anti-inflammatory drug (NSAID)/COX2 inhibitors are prescribed
- 4. The frequency of serious NSAID associated gastrointestinal effects

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Approved by the Oldham research ethics committee (ref: 03/OL/105) Last amendment 13/06/2004.

## Study design

Cluster randomised controlled trial

## Primary study design

Interventional

## Study type(s)

Treatment

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

Osteoarthritis

#### **Interventions**

Dissemination of a recommendation for the prescribing of glucosamine for knee osteoarthritis endosed by the Bury PCT Medicines Management Subgroup and accompanied by a letter of support signed by the Director of Public Health, Bury PCT.

## Intervention Type

Drug

#### Phase

**Not Specified** 

# Drug/device/biological/vaccine name(s)

Glucosamine sulphate

## Primary outcome(s)

Change in the mean number of prescriptions for glucosamine sulphate 500 mg per general practitioner over study period.

# Key secondary outcome(s))

- 1. Change in cost to the NHS of prescriptions for glucosamine per general practitioner over study period
- 2. Proportion of GP prescribing glucosamine sulphate 500 mg during study period

- 3. If sufficient change in prescribing observed, number of admissions for gastrointestinal bleeding
- 4. Change in mean number of prescriptions of NSAID and COX2

## Completion date

01/07/2005

# Eligibility

# Key inclusion criteria

General practitioners in Bury PCT

# Participant type(s)

**Patient** 

# Healthy volunteers allowed

No

## Age group

Adult

#### Sex

All

## Key exclusion criteria

General practitioners on the local medicines management subgroup and the other GPs in their practices

### Date of first enrolment

26/06/2004

## Date of final enrolment

01/07/2005

# Locations

#### Countries of recruitment

**United Kingdom** 

England

# Study participating centre Department of Public Health

Bury United Kingdom BL9 0EN

# Sponsor information

# Organisation

Bury Primary Care Trust (UK)

# Funder(s)

# Funder type

Government

## **Funder Name**

Bury Primary Care Trust (UK)

# **Results and Publications**

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not provided at time of registration