

A study to improve the care pathways for people, 60 years and over, in South Asia with a broken hip

Submission date 12/06/2024	Recruitment status Recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 11/07/2024	Overall study status Ongoing	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 31/10/2025	Condition category Injury, Occupational Diseases, Poisoning	<input type="checkbox"/> Individual participant data <input checked="" type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

A broken hip (hip fracture) is a serious injury that requires surgery to repair or replace the broken bone followed by a long period in hospital to recover. Older adults are more likely to break their hip as their bones are weakened by a health condition known as osteoporosis. Around a quarter of patients with hip fractures die within a year and those that survive have a permanent loss of quality of life. Looking after older, often frail, patients following a hip fracture requires healthcare professionals from many different backgrounds. These include surgeons, doctors specialising in looking after older patients, nurses and therapists. In the UK, a collaborative approach between all healthcare professionals in taking care of these patients has reduced the number of people dying after hip fracture and improved their quality of life. It has also reduced healthcare costs. Asia is particularly affected by rapidly ageing populations. The number of people experiencing hip fractures is expected to increase from 1.1 million now to 2.6 million in 2050. This study is about testing the benefits of such 'multi-disciplinary' care in low- and middle-income countries (LMIC) in Asia. The HIPCARE study will test a multi-disciplinary care approach in five LMICs: India, Nepal, Philippines, Thailand, and Vietnam. It will focus on three key markers of good quality care for patients with a hip fracture: 1. Reducing delays to surgery, 2. Reducing the time taken for patients to start walking after surgery and 3. speeding up general medical assessment. The study will see if hospitals that have training and support to help with multi-disciplinary care can improve patient's quality of life compared with hospitals that continue with their usual patient care pathways.

Who can participate?

Patients at participating hospitals aged 60 years and over who are having surgery for a hip fracture

What does the study involve?

Hospitals that take part will randomly allocate participants to continue with their usual care pathways or be given additional training and support with multi-disciplinary care. Patients who consent to will receive the standard care in their hospital. They will answer a set of questions about daily life before their injury. Information about the treatment and care they receive in

hospital will be taken from their medical notes. After 4 months, participants will be contacted and asked a set of questions about their daily lives, as well as some additional questions about their care and treatment expenses. Some participants may be invited to talk to a researcher with other participants in a focus group, in more detail about their injury and taking part in the study.

What are the potential benefits and risks of participating?

There are no specific risks or benefits to taking part in the study as participants will be following the treatment and care plan of their hospital. By helping us to have a better understanding of treatment and recovery after hip fracture, the service may be improved for other patients in the future.

Where is the study run from?

The University of Oxford (UK)

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

November 2022 to October 2026

Who is funding the study?

National Institute for Health and Care Research (NIHR), Research on Interventions for Global Health Transformation

Who is the main contact?

UK central trial team: hipcare@ndorms.ox.ac.uk

Contact information

Type(s)

Principal investigator

Contact name

Prof Matthew Costa

Contact details

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Public, Scientific

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Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

ClinicalTrials.gov (NCT)

Nil known

Protocol serial number

NIHR203194

Study information

Scientific Title

A cluster randomised controlled trial with embedded process evaluation to investigate the clinical and cost effectiveness of multidisciplinary care in the management of patients with a fracture of the hip

Acronym

HIPCARE

Study objectives

To determine if quality of life for patients in low- and middle-income Countries in Asia after hip fracture can be improved with the introduction of multi-disciplinary care training and support, and whether it reduces healthcare costs, compared with usual care.

Ethics approval required

Ethics approval required

Ethics approval(s)

approved 13/07/2023, Oxford Tropical Research Ethics Committee (Research Services, Research Governance, Ethics & Assurance Boundary Brook House, Churchill Drive, Oxford, OX3 7GB, United Kingdom; +44 (0)1865 282106; oxtrec@admin.ox.ac.uk), ref: 520-23

Study design

Multicentre interventional cluster randomized controlled trial

Primary study design

Interventional

Study type(s)

Quality of life

Health condition(s) or problem(s) studied

Hip fracture

Interventions

Hospitals will be randomised to the HIPCARE intervention or usual care, via a centralised computer-based process stratified by country and will be carried out in advance of the start of recruitment.

Intervention arm:

The hospitals allocated to the HIPCARE intervention will be given additional funds to allocate the time of a senior clinician to act as an Intervention Champion. The local Principal Investigator and the Intervention Champion will establish a multi-disciplinary HIPCARE Working Group. HIPCARE intervention hospitals will be provided with a multi-disciplinary training package with online support. This will be focussed on: 1. Reducing delays to surgery, 2. Reducing the time taken for patients to start walking after surgery and 3. speeding up general medical assessment.

Control arm:

Patients will be treated as per the pre-trial pathways for hip fracture patients.

Intervention Type

Mixed

Primary outcome(s)

Health-related quality of life measured using EuroQol-5D-5L at baseline and 120 days post-surgery

Key secondary outcome(s)

1. Mortality, measured using death notification data up to 120 days post-surgery
2. Mobility, measured using the Modified New Mobility Score (mNMS) at baseline and 120 days post-surgery
3. Residential status measured using a bespoke questionnaire at baseline and 120 days post-surgery
4. Complication rate measured using medical records and a bespoke questionnaire at 120 days post-surgery
5. Healthcare and broader resource implications measured using medical records and bespoke questionnaire at baseline and 120 days post-surgery
6. Estimated cost-effectiveness of the trial treatments measured using medical records, bespoke questionnaire, and the Euroqol-5D-5L at 120 days post-surgery

Completion date

31/10/2026

Eligibility**Key inclusion criteria**

Patients aged 60 years or over having surgery for a hip fracture.

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Mixed

Lower age limit

60 years

Sex

All

Key exclusion criteria

The participant or a carer cannot complete follow-up at 120 days

Date of first enrolment

06/11/2024

Date of final enrolment

31/08/2026

Locations**Countries of recruitment**

India

Nepal

Philippines

Thailand

Viet Nam

Study participating centre

University of the Philippines Manila

8/F RCB

Philippine General Hospital

Taft Avenue

Ermita

Manila

Philippines

N/A

Study participating centre**Mahidol University, Faculty of Medicine Ramathibodi Hospital**

999 Phuttamonthon 4 Rd

Salaya

Nakhon Pathom 73170

Thailand

N/A

Study participating centre**Kathmandu Medical College Public Limited**

Baburam Acharya Sadak 184

Sinamangal

Kathmandu

Nepal

N/A

Study participating centre**The Hanoi University of Public Health**

1A Duc Thang

North Tu Liem

Ha Noi

Viet Nam

N/A

Study participating centre**George Institute Services India Private Limited**

409 Elegance Tower Plot

No. 8 Jasola District Centre

New Delhi

India

110025

Sponsor information**Organisation**

University of Oxford

ROR<https://ror.org/052gg0110>

Funder(s)

Funder type

Government

Funder Name

Research on Interventions for Global Health Transformation (RIGHT) programme

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from the Lead Investigator (Prof Matt Costa, hipcare@ndorms.ox.ac.uk). Each request will be reviewed and decided upon on a case-by-case basis. Participants will be informed via the Participant Information Sheet (and will consent to the contents of this PIS) of the possibility of de-identified datasets being made available following appropriate requests.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Study website	Study website	11/11/2025	11/11/2025	No	Yes