A randomised controlled trial of physiotherapy in the early period after partial meniscectomy surgery

Submission date	Recruitment status No longer recruiting	Prospectively registered		
23/01/2004		☐ Protocol		
Registration date	Overall study status	Statistical analysis plan		
23/01/2004	Completed	[X] Results		
Last Edited	Condition category	[] Individual participant data		
07/01/2010	Surgery			

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

RDC01629

Study information

Scientific Title

Study objectives

Knee partial menisectomy is one of the most common orthopaedic surgeries. Post-surgical care may or may not include physiotherapy, depending on the surgeon, despite the lack of reports in the literature of clinical trials determining if physiotherapy is effective in cutting costs and restoring function in these patients. The purpose of this research is to determine whether a course of physiotherapy should be included in the early period after knee arthroscopic partial menisectomy surgery. This analysis will be performed by assessing the cost effectiveness of physiotherapy and the degree to which normal function is restored in the knee after surgery.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Musculoskeletal injury; meniscectomy

Interventions

- 1. Physiotherapy three times a week for 6 weeks post-surgery
- 2. No treatment

Intervention Type

Procedure/Surgery

Phase

Not Specified

Primary outcome measure

- 1. Knee function and overall health will be measured over time to determine how these change as a result of treatment. Specifically, these variables will be assessed over time:
- 1.1. Function of the knee (i.e. motion in the sagittal plane) during level walking and stair climbing
- 1.2. Scores on the Flandry knee self-assessment questionnaire
- 1.3. Scores on the SF-36 from the health assessment questionnaire
- 1.4. Scores on the EuroQol from the health assessment questionnaire
- 2. In addition, the following will be assessment:
- 1.1. Time from surgery to return to work
- 1.2. Estimated level of knee physical stress in job and possible change from pre- to post-surgery
- 1.3. Total cost of physiotherapy versus non-treatment
- 1.4. Cost effectiveness of physiotherapy versus non-treatment (cost per QALY gain)

Secondary outcome measures

Not provided at time of registration

Overall study start date

01/05/1999

Completion date

01/05/2001

Eligibility

Key inclusion criteria

Patients recently having undergone knee meniscectomy

Participant type(s)

Patient

Age group

Not Specified

Sex

Not Specified

Target number of participants

Not provided at time of registration

Key exclusion criteria

Does not match inclusion criteria

Date of first enrolment

01/05/1999

Date of final enrolment

01/05/2001

Locations

Countries of recruitment

England

United Kingdom

Study participating centre King's College London London United Kingdom SE1 1UL

Sponsor information

Organisation

NHS R&D Regional Programme Register - Department of Health (UK)

Sponsor details

The Department of Health Richmond House 79 Whitehall London United Kingdom SW1A 2NL +44 (0)20 7307 2622 dhmail@doh.gsi.org.uk

Sponsor type

Government

Website

http://www.doh.gov.uk

Funder(s)

Funder type

Government

Funder Name

NHS Executive London (UK)

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?
Results article	results	01/06/2003		Yes	No