

# The use of audio tapes in oral health promotion for an Urdu-speaking community

<b>Submission date</b> 23/01/2004	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 23/01/2004	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 11/06/2014	<b>Condition category</b> Oral Health	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
RBF 99X23

# Study information

## Scientific Title

## Study objectives

Primary research question: does the use of pre-recorded audio tapes encourage patients to complete their course of dental treatment?

## 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)

Not specified

## Study type(s)

Not Specified

## Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

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

Oral health

## Interventions

1. Exposure to audio tapes
2. Standard care

## Intervention Type

Other

## Phase

Not Applicable

## Primary outcome measure

The intervention will be considered effective if it reduces the failure rate by 20-40%. To have an 80% power of detecting such a difference as statistically significant at the 5% two-sided level

could required 107 children per group (214 in total). This service sees approximately 150 patients per month in this age group. Assuming 60% agree to take part, then to recruit 214 children will take approximately 3 months. The main outcome measure is the difference in the failure rate between the two groups (intervention and control); failures to attend for appointments will be compared by a Chi squared test. 95% confidence intervals for the differences in failures to attend for appointments between the two groups will also be calculated.

### **Secondary outcome measures**

Not provided at time of registration

### **Overall study start date**

27/09/1999

### **Completion date**

01/09/2001

## **Eligibility**

### **Key inclusion criteria**

The age group will be 6-10

Sample size: the main outcome for determining sample size is failure rate. The current failure rate is approximately 60%.

### **Participant type(s)**

Patient

### **Age group**

Child

### **Lower age limit**

6 Years

### **Upper age limit**

10 Years

### **Sex**

Both

### **Target number of participants**

214

### **Key exclusion criteria**

Not provided at time of registration

### **Date of first enrolment**

27/09/1999

### **Date of final enrolment**

01/09/2001

# Locations

## Countries of recruitment

England

United Kingdom

## Study participating centre

### Community Dental Service

Sheffield

United Kingdom

S10 3TH

# Sponsor information

## Organisation

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

## Sponsor details

The Department of Health

Richmond House

79 Whitehall

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## Sponsor type

Government

## Website

<http://www.doh.gov.uk>

# Funder(s)

## Funder type

Government

## Funder Name

NHS Executive Trent (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