A Randomised Controlled Trial (RCT) to evaluate the acceptability and cost-implications of Using Multimedia to Educate Patients with asthma on Inhaler Administration.

| Submission date 23/01/2004 | Recruitment status No longer recruiting | Prospectively registered Protocol |
|-------------------------------------|---|---|
| Registration date 23/01/2004 | Overall study status Completed | [] Statistical analysis plan [X] Results |
| Last Edited 25/02/2010 | Condition category Respiratory | Individual participant data |

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

Study information

Scientific Title

Study objectives

There is now a vast range of inhaler devices available for the management of asthma. Clear explanation must be offered to new users of such devices, as well as attempts made to improve inhaler technique in experienced users. These activities can be very time consuming for the health professionals concerned. A further problem is encountered when attempting to demonstrate the use of such devices to those with a poor understanding of English. One solution is the use of multimedia computer systems which have the advantage over video in being far more flexible and allowing patient interaction. King's College London have produced a touch screen multimedia system which counsels patients, in their selected language, using a combination of video, text, graphics and audio presentations. This multi-centre randomised trial builds on previous feasibility studies.

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

Health condition(s) or problem(s) studied

Respiratory tract diseases: Asthma

Interventions

 English and non-English speaking patients are given information on inhalers using conventional methods in combination with the multimedia system
 Patients are given information on inhalers using conventional methods only.

Intervention Type

Other

Phase Not Specified

Primary outcome measure

Comparison of inhaler administration technique between groups, acceptability of multimedia, satisfaction with information provision and self-reported asthma diary. Cost implications of each intervention will be compared.

Secondary outcome measures Not provided at time of registration

Overall study start date 01/10/1998

Completion date 31/05/2000

Eligibility

Key inclusion criteria Not provided at time of registration

Participant type(s) Patient

Age group Not Specified

Sex Not Specified

Target number of participants Added 25/02/10: 174

Key exclusion criteria Not provided at time of registration

Date of first enrolment 01/10/1998

Date of final enrolment 31/05/2000

Locations

Countries of recruitment

England

United Kingdom

Study participating centre King's College London London United Kingdom SW3 6LX

Sponsor information

Organisation

Record Provided by the NHS R&D 'Time-Limited' National Programme Register - Department of Health (UK)

Sponsor details

The Department of Health Richmond House 79 Whitehall London United Kingdom SW1A 2NL

Sponsor type

Government

Website http://www.doh.gov.uk

Funder(s)

Funder type Government

Funder Name NHS Asthma National Research and Development Programme (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? |
|------------------------|---------|--------------|------------|----------------|-----------------|
| <u>Results article</u> | results | 01/04/2006 | | Yes | No |