

Does the incentive spirometer decrease post-operative pulmonary complications and shorten hospital stay?

Submission date 29/09/2006	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 29/09/2006	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
Last Edited 27/04/2018	Condition category Surgery	<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

Study information

Scientific Title

Does the incentive spirometer decrease post-operative pulmonary complications and shorten hospital stay? A randomised controlled trial

Study objectives

Does incentive spirometry in addition to standard physiotherapy decrease the incidence of post-operative pulmonary complications and shorten length of stay on High Dependency and total length of stay in hospital compared with traditional physiotherapy offered to post-operative patients who have undergone major abdominal surgery?

Ethics approval required

Old ethics approval format

Ethics approval(s)

Dudley Local Ethics Committee (UK), 03/08/2005, REC ref: 05/Q2702/30.

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

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

Health condition(s) or problem(s) studied

Surgery: Abdominal

Interventions

360 patients undergoing major abdominal surgery, randomised to:

1. Traditional physiotherapy (180 patients)
2. Use of incentive spirometer and traditional physiotherapy (180 patients)

Intervention Type

Procedure/Surgery

Phase

Not Specified

Primary outcome measure

1. Length of stay on the High Dependency Unit
2. Length of hospital stay
3. Post operative pulmonary complications as judged by predefined criteria
4. Standard physiological observations
5. Antibiotic usage and indication for use
6. Chest x-ray findings
7. Number of physiotherapy contacts and time spent with each patient

Secondary outcome measures

No secondary outcome measures

Overall study start date

11/08/2005

Completion date

31/07/2009

Eligibility**Key inclusion criteria**

All patients on surgical high dependency ward following abdominal surgery and able to understand and use the incentive spirometer

Participant type(s)

Patient

Age group

Adult

Sex

Both

Target number of participants

360

Key exclusion criteria

Patients who cannot understand and use the incentive spirometer

Date of first enrolment

11/08/2005

Date of final enrolment

31/07/2009

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Russells Hall Hospital

Dudley

United Kingdom

DY1 2HQ

Sponsor information

Organisation

Record Provided by the NHSTCT Register - 2006 Update - Department of Health

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.dh.gov.uk/Home/fs/en>

Funder(s)

Funder type

Government

Funder Name

The Dudley Group of Hospitals NHS Trust (UK), NHS R&D Support Funding

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