

# ALLograft INformation EXchange (ALLINEX): Standard care versus standard care plus access to the ALLINEX website

<b>Submission date</b> 16/03/2012	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 16/03/2012	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 17/08/2015	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

<http://cancerhelp.cancerresearchuk.org/trials/a-study-looking-support-website-people-who-have-had-stem-cell-transplant-allinex>

## Contact information

### Type(s)

Scientific

### Contact name

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## Additional identifiers

### Protocol serial number

11496

## Study information

**Scientific Title**

ALlograft INformation EXchange (ALLINEX) - phase three: A randomised pilot study of standard care versus standard care plus access to the ALLINEX website

**Acronym**

ALLINEX

**Study objectives**

Survival for adult patients receiving allogeneic Haemopoietic Stem Cell Transplant (HSCT) is improving but many will experience challenges particularly associated with chronic Graft versus Host Disease (cGvHD). Allogeneic HSCT patients are followed up in tertiary care, being seen less frequently as they recover. Although recommendations have been made for assessment and support for HSCT patients on follow up, some patients do not access the care they want or need. There has been an increase in the use of technologies in providing support in health care. Allogeneic HSCT patients tend to be under the age of 65 years and therefore are likely to be users of the internet. This is a group of patients who might benefit from a specifically designed website for use as an adjunct to their standard follow up care. Such a website could include information endorsed by their clinical team, the means to contact their clinical team and the facility for them to chat to each other via a secure forum.

The aim of this study is to assess the acceptability and feasibility of introducing a specifically designed website for use in the allogeneic adult HSCT service as an adjunct to standard care.

In this pilot we will aim to recruit sufficient participants to allow for a minimum of 20 patients in each arm to complete the study to fulfil minimum requirements of a total of 30 participants recommended by Browne for randomised pilot studies. We will aim to recruit more than this minimum to provide the best estimate for primary outcome for a larger trial.

More details can be found at <http://public.ukcrn.org.uk/search/StudyDetail.aspx?StudyID=11496>

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

NRES Committee East Midlands - Nottingham 1 First MREC approval date 08/11/2011, ref: 11/EM/0407

**Study design**

Randomised; Interventional; Design type: Not specified

**Primary study design**

Intentional

**Study type(s)**

Quality of life

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

Topic: National Cancer Research Network; Subtopic: Haematological Oncology; Disease: All

**Interventions**

Intervention (access to website) plus standard care versus standard care.

Consenting patients will complete baseline measures prior to randomisation. Participation time is twelve weeks. Consultations with the clinician will be audio-recorded. Website activity will be tracked. At six weeks the intervention arm will complete a Patient Technology Acceptance Survey. After twelve weeks all will complete outcome measures and a use of service questionnaire. The intervention arm will complete a feedback questionnaire concerning the website. Clinicians will take part in a debriefing interview concerning use of the website as an adjunct to standard care. Contact between patients and clinicians will be reviewed during the study period.

**Intervention Type**

Other

**Phase**

Not Applicable

**Primary outcome(s)**

Feasibility and acceptability - Establish feasibility and acceptability of a specifically designed website as an adjunct to routine measured at 12 weeks

**Key secondary outcome(s))**

1. Patient behaviour - Demonstrate change in patient behaviour
2. Patient well-being - Enhancement of patient well-being compared to standard care group. Measured at 6 weeks

**Completion date**

29/06/2012

**Eligibility****Key inclusion criteria**

1. Having undergone allogeneic HSCT
2. Under specialist HSCT care
3. English literate
4. Aged 18 or over
5. Access to the internet

Target Gender: Male & Female ; Lower Age Limit 18 no age limit or unit specified

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Sex**

All

**Key exclusion criteria**

1. Unable to provide informed consent to participate
2. Have cognitive impairment or communication difficulties which are incompatible with the study
3. Participation in the study is judged to be inappropriate on clinical grounds

**Date of first enrolment**

18/01/2012

**Date of final enrolment**

29/06/2012

**Locations****Countries of recruitment**

United Kingdom

England

**Study participating centre**

St James's Institute of Oncology

Leeds

United Kingdom

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**Sponsor information****Organisation**

University of Leeds (UK)

**ROR**

<https://ror.org/024mrx33>

**Funder(s)****Funder type**

Charity

**Funder Name**

Macmillan Cancer Support (UK)

# Results and Publications

## Individual participant data (IPD) sharing plan

### IPD sharing plan summary

Not expected to be made available

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/05/2014		Yes	No
<a href="#">Results article</a>	results	01/05/2016		Yes	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes