

The DAPE study: the impact of dementia advisors on the quality of life of dementia sufferers

Submission date 08/08/2009	Recruitment status Stopped	<input type="checkbox"/> Prospectively registered
Registration date 14/10/2009	Overall study status Stopped	<input type="checkbox"/> Protocol
Last Edited 09/02/2010	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<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

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

Study information

Scientific Title

A randomised controlled trial to assess the impact that dementia advisors have on the quality of life of people with dementia

Acronym

DAPE

Study objectives

A dementia advisor program will improve the overall quality of life for individuals with dementia and carers as compare to information provision service without a dementia advisor.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Parallel group randomised pragmatic cluster controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Other

Study type(s)

Quality of life

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

Dementia

Interventions

As of 09/02/2010 the status of this record was updated as this trial never started due to pragmatic difficulties combining the delivery service and the research assessments.

The aim of the DAPE trial is to evaluate the impact on quality of life for a person with dementia of accessing a Dementia Adviser programme compared to a standardised information pack. The trial will also provide robust evidence on whether this dementia adviser model facilitates earlier diagnosis for people with dementia and improved access to services. These are key measures that have a long-term impact on the quality of life for a person with dementia. The third element

of this trial will be to provide evidence of the financial impact of the Dementia Adviser programme for the NHS, social services and society. These findings will be vital in influencing changes in policy and practice relating to services for people with dementia.

In order to meet the above detailed objectives a parallel group, randomised, pragmatic cluster trial will be conducted to evaluate the efficacy of the dementia advisor program in comparison to information provision alone. Twenty sites throughout England will be randomised to either receive the Dementia Advisor Service or to receive information provision alone. Consecutive people with dementia referred to each site will be invited to participate in the clinical trial until 35 participants have been enrolled into the study at that site. It is anticipated that it will take 3 - 4 months to recruit the 35 participants at each individual site.

Participating sites will be randomised by the trial statistics team. Each cluster (site) will be randomised to receive either;

1. The Dementia Advisor Service
2. Information only

Therefore all participants at a particular site will receive either 1 or 2 depending of which one they have been allocated to. The randomisation will be computer generated using stratified block randomisation (fixed blocks size of 2) using Stata v8 software.

Intervention Type

Other

Phase

Not Applicable

Primary outcome measure

Dementia Quality of Life (DEMQOL), which is considered the most sensitive measure currently available to measure quality of life in people with dementia. Assessments will be done at baseline and 12 months.

Secondary outcome measures

Assessments will be done at baseline and 12 months:

1. The Quality of Life in Alzheimer's Disease (QOL-AD)
2. The Cornell Scale for Depression in Dementia (CSDD)
3. General Health Questionnaire-12 (GHQ-12)
4. Service Use and Cost Effectiveness: Modified Client Service Receipt Inventory

Overall study start date

15/09/2009

Completion date

15/09/2013

Reason abandoned (if study stopped)

Objectives no longer viable

Eligibility

Key inclusion criteria

1. Individuals with a diagnosis of dementia made by their primary care physician or a specialist clinician (no age range although most participants will be over 60 years, either sex)
2. Individuals referred for a specialist assessment with a likely diagnosis of dementia
3. Individuals referred to the Dementia Advisor Programme

Participant type(s)

Patient

Age group

Other

Sex

Both

Target number of participants

700

Key exclusion criteria

1. Individuals who do not have significant cognitive impairment
2. Individuals with a diagnosis of mild cognitive impairment given by either their primary care physician or specialist clinician
3. Individuals who are not likely to receive a diagnosis of dementia within the next 6 months

Date of first enrolment

15/09/2009

Date of final enrolment

15/09/2013

Locations**Countries of recruitment**

England

United Kingdom

Study participating centre

Kings College London

London

United Kingdom

SE1 1UL

Sponsor information**Organisation**

King's College London (UK)

Sponsor details

c/o Keith Brennan
Room 1.8, Hodgkin Building
Guy's Campus
London
England
United Kingdom
SE1 1UL

Sponsor type

University/education

Website

<http://www.kcl.ac.uk/>

ROR

<https://ror.org/0220mzb33>

Funder(s)

Funder type

Charity

Funder Name

Alzheimer's Society (UK)

Alternative Name(s)

alzheimerssoc

Funding Body Type

Private sector organisation

Funding Body Subtype

Associations and societies (private and public)

Location

United Kingdom

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