Proactive care of Older People undergoing Surgery: Geriatric-Surgical Support Team

Submission date	Recruitment status	Prospectively registered		
11/04/2005	No longer recruiting	[_] Protocol		
Registration date	Overall study status	[] Statistical analysis plan		
20/06/2005	Completed	[X] Results		
Last Edited 13/09/2017	Condition category Surgery	[] Individual participant data		
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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 G021011

Study information

Scientific Title

Proactive care of Older People undergoing Surgery: Geriatric-Surgical Support Team - a randomised controlled trial

Acronym

POPS

Study objectives

Functional status, pain control, and quality of life is commonly improved in older people following elective orthopaedic surgery. However, older people with comorbidities are more likely to have prolonged hospital stay and readmissions relating to post-operative problems such as delirium, prolonged immobility, and complex discharges.

1. Proactive multidisciplinary geriatric intervention (as compared with usual care) will reduce:

- a. Post-operative length of stay
- b. Hospital readmission within 28 days
- c. Post-operative delirium in at risk older people undergoing elective surgery

2. Proactive multidisciplinary geriatric intervention will cost-effectively improve post-operative clinical (illness events), functional (dependency) and psychological (anxiety and depression) outcomes in at risk older patients undergoing elective surgery

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) Other

Study type(s) Treatment

Participant information sheet

Health condition(s) or problem(s) studied Orthopaedic surgery

Interventions

We are evaluating a multidisciplinary Comprehensive Geriatric Assessment (CGA) team (geriatrician, specialist nurse, physiotherapist, occupational therapist [OT], social worker) whose aim is to reduce post-operative problems in at risk older surgical patients through proactive assessment and treatment. The aim of this randomised controlled trial (RCT) is to evaluate the clinical impact and cost-effectiveness of this approach.

Control: Usual care

Intervention Type Procedure/Surgery

Phase Not Specified

Primary outcome measure

Primary outcome at 1 month post-operatively will be hospital length of stay.

Secondary outcome measures

Secondary outcomes include post-operative medical complications, mobility, mood, quality of life, and resource use.

Overall study start date

01/01/2004

Completion date

31/01/2006

Eligibility

Key inclusion criteria

Patients aged 65+ on the elective orthopaedic waiting list will be screened by postal questionnaire for medical, functional, psychosocial risk factors, and those at risk who consent to participate will be randomised 3 months prior to surgery to receive either the intervention or 'usual care'.

Participant type(s) Patient

Age group Senior

Sex Both

Target number of participants 126

Key exclusion criteria

 Patients aged 65 years and over awaiting elective surgery without evidence-based risk factors from screening (postal questionnaire)
People who refuse consent

Date of first enrolment 01/01/2004

Date of final enrolment 31/01/2006

Locations

Countries of recruitment England

United Kingdom

Study participating centre 9th Floor North Wing London United Kingdom SE1 7EH

Sponsor information

Organisation Guy's and St Thomas' Charity (UK)

Sponsor details

Guy's Hospital Counting House Thomas Street London United Kingdom SE1 9RT

charitablefoundation@gstt.nhs.uk

Sponsor type Charity

ROR https://ror.org/02p7svq74

Funder(s)

Funder type Charity

Funder Name

Guy's and St Thomas' Charitable Foundation. Registered Charity number 251983 (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>	result of cohort study	01/03/2007		Yes	No