The effect of case conferences between general practitioners and palliative care specialist teams on the quality of life of dying people

Submission date	Recruitment status No longer recruiting	Prospectively registered	
14/12/2006		☐ Protocol	
Registration date	Overall study status Completed	Statistical analysis plan	
19/01/2007		[X] Results	
Last Edited 05/09/2008	Condition category Signs and Symptoms	[] Individual participant data	

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

N/A

Study information

Scientific Title

Study objectives

For patients with life limiting disease, formal case conferences held between patients General Practitioners (GPs) and their palliative care team will improve Quality of Life (QoL) for patients and their carers.

Ethics approval required

Old ethics approval format

Ethics approval(s)

- 1. University of Queensland Human Research Ethics Committee (approval number B/311/Soc & PrevMed/00/PhD)
- 2. Mater Adult Hospital Research Ethics Committee (ref no: 369A)
- 3. Townsville Health service District Institutional Ethics Committee
- 4. Princess Alexandra Research Ethics Committee (ref: 179/01)

Study design

Mulit-site single blind randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

GP practice

Study type(s)

Quality of life

Participant information sheet

Health condition(s) or problem(s) studied

Palliative care

Interventions

Case conference held betwen the patient's GP and the specialist palliative care team, held by tele-conference, within three weeks of referral.

The control group receives usual care- ie communication between GPs and the specialist team was by normal means.

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

Global quality of life measures at three weeks post intervention

Secondary outcome measures

- 1. Subscale measures of quality of life scales
- 2. Process evaluation of GP-specialist case conferences

note: Two a priori analyses planned. The first is using the intervention as a fixed time point, evaluating the effect from the time of the intervention. The second is using date of death as fixed time point, and evaluating intervention from time of death, independent of the intervention

Overall study start date

01/07/2001

Completion date

31/05/2003

Eligibility

Key inclusion criteria

- 1. Adult Patients requiring palliaitve care, and their carergivers who are referred to a participating specialist palliative care service
- 2. Aged over 18
- 3. Life expectancy of at least one month
- 4. Not confused or too unwell to be approached
- 5. Could read and speak English
- 6. Had a current GP

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Not Specified

Target number of participants

220

Key exclusion criteria

- 1. Life expectancy less than one month
- 2. Confused
- 3. Too unwell to be approached
- 4. Could not read or speak English
- 5. Did not have a current GP

Date of first enrolment

01/07/2001

Date of final enrolment

31/05/2003

Locations

Countries of recruitment

Australia

Study participating centre Edith Cavell Building

Herston Australia 4006

Sponsor information

Organisation

University of Queensland Medical School (Australia)

Sponsor details

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Sponsor type

University/education

Website

http://www.som.uq.edu.au/research/person.asp?pid=20148

ROR

https://ror.org/00rqy9422

Funder(s)

Funder type

Government

Funder Name

Australian Government Department of Health and Ageing, National Health Development Fund (Australia)

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?
Results article	Participation and effectiveness results:	15/07/2002	Yes	No
Thesis results		01/06/2004	No	No
Abstract results	Lessons from case conferences:	01/05/2005	No	No
Other publications	Methodology comparison:	01/12/2005	Yes	No
Results article	Quality of life results:	01/12/2008	Yes	No