

Strategies to increase cervical screening uptake at first invitation

Submission date 04/08/2011	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 08/08/2011	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 25/10/2022	Condition category Cancer	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

<https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-study-looking-at-ways-increasing-number-of-young-women-who-take-up-offer-of-cervical-screening-strategic>

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

Protocol serial number

HTA 09/164/01

Study information

Scientific Title

STRATEGies to increase Cervical screening uptake at first invitation: a cluster randomised trial

Acronym

STRATEGIC

Study objectives

How effective, and cost effective, are complex interventions designed to increase receptivity to, and uptake of, cervical screening in women aged 25 who are receiving their first invitation to the NHS Cervical Screening Programme?

More details can be found at: <http://www.nets.nihr.ac.uk/projects/hta/0916401>

Protocol can be found at: http://www.nets.nihr.ac.uk/__data/assets/pdf_file/0005/55193/PRO-09-164-01.pdf

Ethics approval required

Old ethics approval format

Ethics approval(s)

REC within Greater Manchester via IRAS - approval pending as of 05/08/2011

Study design

Cluster randomised trial

Primary study design

Intentional

Study type(s)

Screening

Health condition(s) or problem(s) studied

Cervical cancer

Interventions

1. Pre-leaflet arm (Phase 1) - Surgeries will be cluster randomised with women either receiving the pre-leaflet in combination with a standard invitation letter or the standard invitation letter alone.
2. Internet booking arm (Phase 1, Manchester only) - Surgeries will be cluster randomised to women either receiving a standard invitation and reminder letter which gives them the opportunity to book online or the standard invitation and reminder letter alone.
3. Self-sampling arm (Phase 2) - Surgeries will be cluster randomised to women receiving the offer of a self-sampling test compared with standard practice of a reminder letter.
4. Nurse navigator arm (Phase 2) - Surgeries will be cluster randomised to women receiving the offer of speaking to a specialist nurse compared with standard practice of a reminder letter.
5. Timed appointment arm (Phase 2) - Surgeries will be cluster randomised to women receiving a timed appointment from their general practitioner (GP) compared with standard practice of a reminder letter.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

1. The uptake of cervical screening:
 - 1.1. In response to the pre-leaflet (phase 1)
 - 1.2. In response to the offer of each of the interventions (nurse navigator, self-sampling, timed appointments) (phase 2)
2. The uptake of internet booking (phase 1)

Measured at 3, 12 and 30 months after the date the woman become eligible for cervical screening (i.e. her 25th or 20th birthday).

Key secondary outcome(s)

1. The differences between outcomes in Aberdeen between vaccinated and unvaccinated women
2. The differences between Aberdeen and Manchester
3. Cost-effectiveness of the interventions, individually and as packages of interventions

Completion date

31/10/2015

Eligibility

Key inclusion criteria

Women aged 25 in Manchester and 20 in Aberdeen who are due to receive their first invitation for cervical screening

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

Female

Total final enrolment

10126

Key exclusion criteria

1. Women who are not aged 25 (20 in Aberdeen) and receiving their first invitation for screening will not be eligible to participate
2. Women who are pregnant
3. Women who do not have a cervix
4. Women who have made an informed decision not to participate in the cervical screening programme

Date of first enrolment

01/11/2011

Date of final enrolment

31/10/2015

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

University of Manchester

Manchester

United Kingdom

M13 9WL

Sponsor information

Organisation

University of Manchester (UK)

ROR

<https://ror.org/027m9bs27>

Funder(s)

Funder type

Government

Funder Name

Health Technology Assessment Programme

Alternative Name(s)

NIHR Health Technology Assessment Programme, Health Technology Assessment (HTA), HTA

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

Not provided at time of registration

IPD sharing plan summary

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/09/2016		Yes	No
Results article	results	01/06/2018	27/08/2019	Yes	No
Plain English results			25/10/2022	No	Yes