A multi-centric trial of front-loaded smear microscopy in the diagnosis of tuberculosis

Submission date Recruitment status Prospectively registered 23/01/2008 No longer recruiting [] Protocol [] Statistical analysis plan Registration date Overall study status 08/04/2008 Completed [X] Results Individual participant data **Last Edited** Condition category 24/10/2016 Infections and Infestations

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

07.35; A70394

Study information

Scientific Title

A multi-centric trial of front-loaded smear microscopy in the diagnosis of tuberculosis

Acronym

TB-TSDSS (TuBerculosis - Two Same Day Sputum Specimens)

Study objectives

- 1. To determine the sensitivity, specificity and predictive values of a "two samples in a single day" strategy for the diagnosis of tuberculosis (TB) and compare it to the standard strategy
- 2. To determine the proportion of patients who could initiate treatment (or who are referred to initiate treatment) 24, 48 or greater than or equal to 72 hours after consultation by the "two samples in a single day" and the standard strategies
- 3. To describe the effect of using different thresholds to define a positive smear and a smear positive case on the yield of the "two samples in a single day" and standard strategies

Ethics approval required

Old ethics approval format

Ethics approval(s)

- 1. World Health Organization (WHO) Research Ethics Committee, September 2007
- 2. Nigeria National Ethics Committee, 23/07/2007
- 3. Brazil National Ethics Committee, 12/10/2007
- 4. Ethopia National Ethics Committee, 10/01/2008
- 5. Nepal National Ethics Committee, 22/07/2007
- 6. Yemen National Ethics Committee, 27/06/2007
- 6. Liverpool School of Tropical Medicine Research Ethics Committee, 07/06/2007, ref: 07.35

Study design

Interventional randomised controlled two-armed study

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Diagnostic

Participant information sheet

Not available in web format, please use contact details to request a participant information sheet

Health condition(s) or problem(s) studied

Tuberculosis

Interventions

Scheme one: experimental arm -

Each patient attending during this week will be requested to provide:

- 1. One on-the-spot sputum sample at the time of the patient's first visit
- 2. A second on-the-spot sample taken one hour after the first one
- 3. An early morning sputum sample taken by the patient at home on the day following the initial visit

Scheme two: current standard -

Each patient attending during this week will be requested to provide:

- 1. One on-the-spot sputum sample at the time of the patient's first visit
- 2. An early morning sputum sample taken by the patient at home on the day following the initial visit
- 3. A second on-the-spot sample taken at the time the patient brings his early morning sample

There is no long term follow up of patients. Patients are managed by the National TB control programmes. It is intended that enrolment of patients will take a minimum of 10 months and may continue until the sample size is complete.

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

These outcomes will be established for each diagnostic strategy and will use culture as gold standard:

- 1. Sensitivity, specificity, positive and negative predictive value of smear microscopy when using:
- 1.1. The WHO case definitions for smear-positive tuberculosis
- 1.2. The first two specimens collected by each strategy (spot and extra-spot versus spot and morning)
- 2. The number of patients referred to a TB treatment centre 24, 48 and 72 hours after their initial consultation
- 3. The number of patients who drop out of the diagnostic process

Secondary outcome measures

- 1. Sensitivity, specificity, positive and negative predictive value of:
- 1.1. A single positive smear
- 1.2. A single positive smear considering smears with scanty acid-fast bacilli (AFB) as positive
- 1.3. The smears collected as spot, extra-spot and morning or spot-morning-spot
- 2. Proportion of patients with positive culture identified by two smears prepared from a single specimens
- 3. The incremental yield of the second and third samples

Overall study start date

06/01/2008

Completion date

01/01/2009

Eligibility

Key inclusion criteria

- 1. Symptoms suggesting pulmonary TB: persistent cough (generally greater than two weeks)
- 2. Provision of informed consent to participation
- 3. Age greater than 18 years old, either sex

Participant type(s)

Patient

Age group

Adult

Lower age limit

18 Years

Sex

Both

Target number of participants

6852

Key exclusion criteria

- 1. Inability to provide informed consent (e.g., unfamiliarity with language of patient information /consent forms, prisoners, mentally impaired)
- 2. Anti-tuberculous treatment in the last month

Date of first enrolment

06/01/2008

Date of final enrolment

01/01/2009

Locations

Countries of recruitment

Brazil

England

Ethiopia

Nepal

Nigeria

United Kingdom

Yemen

Study participating centre Liverpool School of Tropical Medicine Liverpool United Kingdom L3 5QA

Sponsor information

Organisation

Liverpool School of Tropical Medicine (UK)

Sponsor details

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Sponsor type

University/education

Website

http://www.liv.ac.uk/lstm/

ROR

https://ror.org/03svjbs84

Funder(s)

Funder type

Research organisation

Funder Name

United Nations Children's Fund (UNICEF)/United Nations Development Programme (UNDP) /World Bank/World Health Organization (WHO) - Special Programme for Research and Training in Tropical Diseases (TDR)

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	results	01/07/2011		Yes	No
Results article	results	01/07/2011		Yes	No
Results article	results	24/03/2016		Yes	No