

# Screening the elderly for impaired vision: a nested trial within the MRC elderly trial

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		<input type="checkbox"/> Protocol
<b>Registration date</b> 23/10/2000	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
<b>Last Edited</b> 24/11/2010	<b>Condition category</b> Eye Diseases	<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**Protocol serial number**  
G9900232

## Study information

**Scientific Title**

## **Study objectives**

To determine the effectiveness of mass screening for visual impairment in unselected elderly people (aged 75 and over) in a community setting as part of a multidimensional screening programme.

To assess barriers to treatment of visual impairment among elderly people.

## **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

## **Study type(s)**

Not Specified

## **Health condition(s) or problem(s) studied**

Primary care

## **Interventions**

In the MRC Elderly Screening Study, practices were randomly allocated as follows:

1. Brief assessment by questionnaire followed by a detailed assessment, including visual acuity, only if indicated (the control group for this study) - the targeted screening group
2. Brief assessment by questionnaire followed by a detailed assessment including visual acuity for all patients (the intervention group for this study) - the universal screening group.

In the brief assessment, as one of the 35 questions about their health, participants were asked the following question on vision: 'Do you have difficulty seeing newsprint, even if you are wearing glasses?'

In arm A, criteria for triggering to the detailed assessment were three or more problems identified from the brief assessment or any one of four 'serious' symptoms (unexpected weight loss, frequent falls in previous month, vomiting blood, coughing blood).

In arm B all participants had a detailed assessment. In the detailed assessment, the participants' distance visual acuity was measured using a logarithm of the minimum angle of resolution (logMAR) chart. Anyone with a pinhole corrected acuity of 0.5 or more (equivalent to Snellen acuity less than 6/18) was referred to an ophthalmologist. If the visual impairment was corrected by use of a pinhole, the participant was referred to an optometrist for refractive error correction.

The patient assessments described above began in 1995 and were completed at the end of 1998. All participants are being followed up for mortality and hospital admissions but are not being re-examined as part of the MRC Elderly Screening Trial. We are proposing to conduct a nested trial within the MRC trial, specifically to examine the effectiveness of the visual acuity screening component of the study.

## **Intervention Type**

Other

## **Phase**

Not Specified

## **Primary outcome(s)**

These were changed prior to outcome data collection following the pilot study and with the agreement of the trial steering committee. The Primary outcomes are now:

1. Visual acuity less than 6/18 in either eye.
2. Visual function: the composite score on the national eye Institute Visual Function Questionnaire 25 Version.

## **Key secondary outcome(s)**

Not provided at time of registration

## **Completion date**

12/06/2002

# **Eligibility**

## **Key inclusion criteria**

The trial is being conducted in practices involved in the MRC Trial of Assessment and Management of Elderly People in the Community (The Elderly Screening Trial), who were recruited through the MRCGP framework. The patient population included all patients aged 75 years and over registered with study practices at the start of the main trial (1995-1997). We propose to re-examine 2000 participants from 20 practices within the main trial (100 in each practice). We will randomly select 10 practices from the two arms of the main trial. Within each practice, we will then randomly sample 150 people from the list of people who were originally eligible for inclusion in the main Elderly Screening Trial. We will ascertain those participants who have died or moved away. The remaining participants will be invited to an assessment.

## **Participant type(s)**

Patient

## **Healthy volunteers allowed**

No

## **Age group**

Senior

## **Sex**

Not Specified

## **Key exclusion criteria**

Anyone in long-term care or with terminal disease.

## **Date of first enrolment**

01/02/2000

## **Date of final enrolment**

12/06/2002

## Locations

### Countries of recruitment

United Kingdom

England

### Study participating centre

#### Epidemiology Unit

London

United Kingdom

WC1E 7HT

## Sponsor information

### Organisation

Medical Research Council (MRC) (UK)

## Funder(s)

### Funder type

Research council

### Funder Name

Medical Research Council (UK)

### Alternative Name(s)

Medical Research Council (United Kingdom), UK Medical Research Council, Medical Research Committee and Advisory Council, MRC

### Funding Body Type

Government organisation

### Funding Body Subtype

National government

### Location

United Kingdom

# Results and Publications

## 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?
<a href="#">Results article</a>	results	01/07/2002		Yes	No
<a href="#">Results article</a>	results	01/03/2004		Yes	No