

Optimising the Management of Angina (OMA): a pilot study for a cluster randomised controlled trial of a training and development quality programme and a cohort study in rapid access chest pain clinics

Submission date 21/05/2010	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 21/05/2010	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 09/08/2019	Condition category Circulatory System	<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

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

7882

Study information

Scientific Title

Optimising the Management of Angina (OMA): a pilot study for a cluster randomised controlled trial of a training and development quality programme and a cohort study in rapid access chest pain clinics

Acronym

Optimising the Management of Angina (OMA)

Study objectives

The Optimising Management of Angina (OMA) pilot study is a pilot for a cluster randomised controlled trial of an intervention consisting of an educational and individual patient based decision support tool ("ask OMA") in rapid access chest pain clinics. In the absence of any previous outcome powered trials of any intervention targeting patients whose initial presentation is suspected angina at the time of first specialist referral, we will develop a multi-faceted intervention within chest pain clinics including an individual patient based decision support tool and clinician training to guide appropriate investigation and initial treatment decisions, pilot the intervention, analyse its potential effectiveness and cost-effectiveness and determine the need for a main trial.

The pilot will test the feasibility and acceptability of the intervention, which aims to optimise the management of angina by implementing an educational programme for clinic staff consisting of further training in diagnosis (focused on a computerised decision support tool for appropriate investigation) and the prescribing of secondary prevention medication and behavioral modification. The need for better decisions with patients presenting with new onset stable chest pain has been highlighted by the 2010 NICE chest pain guidelines. Our intervention implements the patient tailored, risk based decisions recommended by that guideline.

Ethics approval required

Old ethics approval format

Ethics approval(s)

MREC approved (ref: 08/H0709/85)

Study design

Multicentre randomised interventional treatment and screening study

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Topic: Primary Care Research Network for England, Cardiovascular; Subtopic: Not Assigned, Cardiovascular (all Subtopics); Disease: Cardiovascular, All Diseases

Interventions

An educational and patient specific decision support tool (askOMA) targeted at doctors and specialist nurses.

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

General practice follow up for the recruited participants

Secondary outcome measures

1. Further investigations and treatment procedures
2. Developing methods for pseudo-anonymising data in practices

Overall study start date

05/01/2009

Completion date

01/06/2010

Eligibility

Key inclusion criteria

1. All patients attending the rapid access chest pain clinic after referral by their GP
2. Male and female, above the age of 40 years

Participant type(s)

Patient

Age group

Adult

Sex

Both

Target number of participants

Planned sample size: 200

Total final enrolment

294

Key exclusion criteria

There are no clinical exclusion criteria however patients unable to read English when there is no interpreter or family member present who can translate will be excluded. Patients who are accompanied by a family member acting as an interpreter will be able to participate without being asked sensitive questions from the questionnaire.

Date of first enrolment

05/01/2009

Date of final enrolment

01/06/2010

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Department of Epidemiology and Public Health

London

United Kingdom

WC1E 6BT

Sponsor information

Organisation

University College London Hospitals NHS Foundation Trust (UK)

Sponsor details

250 Euston Road

London

England

United Kingdom

NW1 2PG

Sponsor type

Hospital/treatment centre

Website

<http://www.uclh.nhs.uk/>

ROR

<https://ror.org/042fqyp44>

Funder(s)

Funder type

Government

Funder Name

National Institute for Health Research (NIHR) (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?
Results article	results	01/12/2015	09/08/2019	Yes	No