

# Implementing evidence based primary care for back pain

<b>Submission date</b> 22/06/2007	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
<b>Registration date</b> 02/08/2007	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 28/09/2018	<b>Condition category</b> Musculoskeletal 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

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
346/4540

# Study information

## Scientific Title

IMplementation to improve Patient Care through Targeted treatment for Back pain (IMPACT Back)

## Acronym

IMPACT Back

## Study objectives

Implementing a new system of sub-grouping and targeting treatment for Low Back Pain (LBP) in Primary Care will significantly improve clinical outcome and service provision.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Approval being sought from the Cheshire LREC in September 2007. A favourable ethical opinion was received in the October 2007 meeting (ref: 07/H1017/143).

## Study design

A pragmatic, interventional, implementation study to compare a new system of care with current practice (before implementation care) in a pre-post design.

## Primary study design

Interventional

## Secondary study design

Non randomised controlled trial

## Study setting(s)

Hospital

## Study type(s)

Diagnostic

## Participant information sheet

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

Low back pain

## Interventions

There will be an initial observational phase, to gather data on current clinical practice, care pathways and patient outcomes.

## Intervention:

A novel system of sub-grouping and targeting treatment on potentially modifiable physical and psychological risk factors for LBP recurrence and chronicity.

**Control:**

This will be compared with current clinical practice (before implementation care).

The initial observational phase will take place over a four month period. Patients will be followed-up at two and six months after recruitment. The implementation of the new care system will take place over six months. There will then be a 12-month recruitment/observational phase, again with patient follow-up at two and six months.

Time points for follow-up are at baseline, and two and six months after recruitment. Data will be collected through questionnaires sent directly to patients. We will be using a battery of validated self-complete instruments, including the Roland-Morris disability questionnaire (primary outcome), the 12-item Short Form (SF-12) general health measure, EuroQol, HAD (Hospital Anxiety-Depression Scale), the Tampa scale of kinesiophobia, fear avoidance beliefs questionnaire, sub-scales from the pain catastrophising instrument, individualised goal scaling and questions about pain and satisfaction. The exact format of the questionnaire is currently being finalised.

**Intervention Type**

Other

**Phase**

Not Specified

**Primary outcome measure**

1. Clinical outcome - back pain related disability (Roland-Morris questionnaire)
2. Clinical practice outcome - captured through questionnaires and medical record reviews
3. Service outcome - referral and re-consultation rates

Outcomes will be assessed at baseline, two and six months.

**Secondary outcome measures**

1. Patient individualised goal attainment
2. Pain intensity
3. Global change in condition and general health status
4. Psychological health
5. Quality of Life
6. Utility
7. Healthcare usage
8. Satisfaction with care
9. Employment status
10. Changes in clinical practice
11. Changes in service provision

Outcomes will be assessed at baseline, two and six months.

**Overall study start date**

01/10/2007

**Completion date**

01/04/2010

# Eligibility

## Key inclusion criteria

Adults consulting their general practitioner for low back pain.

## Participant type(s)

Patient

## Age group

Adult

## Sex

Not Specified

## Target number of participants

1000

## Key exclusion criteria

1. Indication of "red flags" (potential serious pathology)
2. Unable to give informed consent

## Date of first enrolment

01/10/2007

## Date of final enrolment

01/04/2010

# Locations

## Countries of recruitment

England

United Kingdom

## Study participating centre

Primary Care Musculoskeletal Research Centre

Newcastle-under-Lyme

United Kingdom

ST5 5BG

# Sponsor information

## Organisation

Keele University (UK)

**Sponsor details**

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**Sponsor type**

University/education

**Website**

<http://www.keele.ac.uk>

**ROR**

<https://ror.org/00340yn33>

**Funder(s)****Funder type**

Charity

**Funder Name**

The Health Foundation (UK) (ref: 346/4540)

**Funder Name**

Keele University (UK)

**Funder Name**

Central and Eastern Cheshire Primary Care Trust (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?
<a href="#">Other publications</a>	explanation of treatment and training	01/02/2012		Yes	No
<a href="#">Protocol article</a>	protocol	01/02/2012		Yes	No
<a href="#">Results article</a>	results	01/03/2014		Yes	No