

Development and evaluation of Nurse Practitioner follow-up in the management of patients with lung cancer.

Submission date 23/01/2004	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 23/01/2004	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 22/05/2012	Condition category Cancer	<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
NCP/J17/18

Study information

Scientific Title

Study objectives

Not provided at time of registration

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)

Treatment

Health condition(s) or problem(s) studied

Cancer (neoplasms): Lung (non-small cell)

Interventions

1. Conventional medical follow-up:

At the specialist cancer hospital, patients were seen within one month and, if stable, discharged back to their referring cancer unit. At the cancer units, follow-up was 2 - 3 monthly if patients were stable. At all centres, patients who were not considered medically stable were seen on the basis of need.

2. Nurse-led follow-up:

Patients allocated to one of two Clinical Nurse Specialists (CNS) who took responsibility for their follow-up care for one year. Patients assessed monthly or on basis of need by telephone or at a nurse-led clinic. Patients could also use a paging system to contact CNS if they had concerns during intervals between assessments. Focus of care was not only disease surveillance but also the physical, psychological and social needs of patients and their families. Emphasis on prompt communication and liaison with primary care teams. Patients attended hospital medical clinics only if their condition indicated this was needed or if patients requested a consultation with a hospital physician.

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

Not provided at time of registration

Key secondary outcome(s)

Not provided at time of registration

Completion date

01/01/2001

Eligibility

Key inclusion criteria

1. Patients with lung cancer having completed initial treatment
2. Not requiring immediate medical intervention or close medical supervision
3. Considered to have a good performance status (World Health Organization [WHO] performance status 0 - 2)
4. Had an expected prognosis of at least 3 months
5. Were not participating in other clinical trials requiring intensive medical investigation or follow-up
6. Understood and read English for informed consent and data collection purposes

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Not Specified

Sex

Not Specified

Key exclusion criteria

Not provided at time of registration

Date of first enrolment

01/01/1999

Date of final enrolment

01/01/2001

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

The Institute of Cancer Research

London

United Kingdom

SW3 6JJ

Sponsor information

Organisation

Record Provided by the NHS R&D 'Time-Limited' National Programme Register - Department of Health (UK)

Funder(s)

Funder type

Government

Funder Name

NHS Cancer National Research and Development Programme (UK)

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?
Results article	Results	16/11/2002		Yes	No