ISRCTN73983810 https://doi.org/10.1186/ISRCTN73983810

Evaluation of primary hospital educational intervention

Submission date	Recruitment status	[_] Prospectively registered
24/03/2009	No longer recruiting	[_] Protocol
Registration date	**Overall study status**	[_] Statistical analysis plan
06/05/2009	Completed	[X] Results
Last Edited	**Condition category**	[_] Individual participant data
02/09/2013	Other	

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
071669

Study information

Scientific Title
A hospital based cluster randomised controlled trial to evaluate treatment behaviour following educational interventions and essential antidote stocking in the treatment of acute poisoning patients

Study objectives
That the provision of an education program on management of self-poisoning with supply of essential antidote stock will improve management of self-poisoning when compared with the provision of guidelines alone.

Ethics approval required
Old ethics approval format

Ethics approval(s)
University of Peradeniya, Sri Lanka gave approval on the 13th December 2007

Study design
Cluster randomised controlled trial

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
Clinical guidelines of the treatment of acutely poisoned patients

Interventions
A half-day interactive teaching session using a lecture/workshop format delivered by an expert (consultant physician) in the primary hospital to medical and other hospital staff. The distribution of posters describing treatment algorithms derived from National Poison Treatment Guidelines Book plus distribution of promotional items with reminder messages (folders for patient's inpatient notes, whiteboards for the wards and pens; all with prompts to look-up the National Poison Guidelines).

Intervention Type
Other

Phase

Not Applicable

Primary outcome measure
1. Use of forced emesis
2. Use of activated charcoal
3. Use of pralidoxime
4. Use of antidotes for paracetamol

Collected continuously and analysed at 6 and 12 months post-intervention.

Secondary outcome measures
1. Cost of treatment
2. Deaths from poisoning
3. Extent of irreversible acetylcholinesterase inhibition following organophosphate ingestion
4. Improvement in antidote stocking

Analysed at 12 months.

Overall study start date
01/10/2008

Completion date
01/12/2009

Eligibility

Key inclusion criteria
All primary rural hospitals in North Central Province with inpatient facilities

Participant type(s)
Patient

Age group
Other

Sex
Not Specified

Target number of participants
42 hospitals

Key exclusion criteria
Primary hospitals without inpatient facilities

Date of first enrolment
01/10/2008

Date of final enrolment
01/12/2009

Locations

Countries of recruitment
Sri Lanka

Study participating centre
SACTRC
Peradeniya
Sri Lanka
20400

Sponsor information

Organisation
South Asian Clinical Toxicology Research Collaboration (SACTRC) (Sri Lanka)

Sponsor details
c/o Professor Andrew Hamilton Dawson
Program Director, Visiting Professor of Medicine
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Sponsor type
Research organisation

Website
http://www.sactrc.org

ROR
https://ror.org/04z435g27

Funder(s)

Funder type
Charity

Funder Name
International Collaborative Research Grant:

Funder Name
The Wellcome Trust (UK) (grant ref: 071669)

Funder Name
National Health and Medical Research Council (NHMRC) (Australia)

Alternative Name(s)
NHMRC

Funding Body Type
Government organisation

Funding Body Subtype
National government

Location
Australia

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	19/08/2013		Yes	No