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A randomised crossover trial of a new, rapid method of detecting methicillin-resistant Staphylococcus aureus (MRSA) and comparing against conventional screening: in terms of the efficacy and the effect upon hospital methicillin-resistant Staphylococcus aureus infection rates, transmission rates and the use of hospital resources

Submission date
07/11/2005

Registration date
10/01/2006

Last Edited
18/04/2008

Recruitment status
No longer recruiting

Overall study status
Completed

Condition category
Infections and Infestations

[_] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[X] Results
[_] 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
RJ1 05/0083

Study information

Scientific Title

Study objectives
There is an assumption, which has not been tested, that quicker detection of methicillin-resistant Staphylococcus aureus (MRSA) carriers will lead to lower transmission within hospitals. Technology to obtain results more rapidly is being developed. Currently a new, polymerase chain reaction (PCR) based method of MRSA detection provides a screening tool that is much faster but also more expensive than standard methods. We propose to investigate whether significantly faster detection of MRSA cases does lead to reduction in transmission and other adverse outcomes by means of a randomised, crossover trial on both medical and surgical wards.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Ethics approval received from the local medical ethics committee (ref: 05/Q0702/157)

Study design
A randomised, controlled crossover trial (non-blinded)

Primary study design
Interventional

Study type(s)
Screening

Health condition(s) or problem(s) studied
MRSA colonisation (infection and bacteraemia)

Interventions
The use of a rapid method in detecting MRSA. This will be compared against the currently employed non-rapid method of detection.

Intervention Type
Other

Phase
Not Specified

Primary outcome(s)
Ward MRSA transmission rates.

Key secondary outcome(s))
1. Ward MRSA bacteraemia rates
2. Ward MRSA clinical infection rates
3. Length of hospital stay
4. Use of isolation facilities
5. MRSA-related nursing workload
6. Rapid test sensitivity, specificity, positive predictive value, negative predictive value, turn around time and cost with the conventional method using screening swabs taken under routine conditions
7. Economic analysis

Completion date
01/04/2007

Eligibility

Key inclusion criteria
All patients admitted to 10 study wards in the duration of the study.

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Adult

Sex
All

Key exclusion criteria
Patients not wishing to participate in the study.

Date of first enrolment
01/01/2006

Date of final enrolment
01/04/2007

Locations

Countries of recruitment
United Kingdom

England

Study participating centre

Department of Infection
London
United Kingdom
SE1 7EH

Sponsor information

Organisation
Guy's and St.Thomas' NHS Foundation Trust (UK)

ROR
https://ror.org/00j161312

Funder(s)

Funder type
Government

Funder Name
Department of Health (UK) (ref: 0190016)

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	26/04/2008		Yes	No