

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

Recruitment status

No longer recruiting

☐ Prospectively registered

☐ Protocol

Registration date

10/01/2006

Overall study status

Completed

☐ Statistical analysis plan

☒ Results

Last Edited

18/04/2008

Condition category

Infections and Infestations

☐ Individual participant data

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

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

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Screening

Participant information sheet

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 measure

Ward MRSA transmission rates.

Secondary outcome measures

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

Overall study start date

01/01/2006

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

Age group

Adult

Sex

Both

Target number of participants

Approximately 15,000

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

England

United Kingdom

Study participating centre**Department of Infection**

London

United Kingdom

SE1 7EH

Sponsor information

Organisation

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

Sponsor details

Dr. Kate Blake

West Wing

Guy's Hospital

St. Thomas' Street

London

England

United Kingdom

SE1 9RT

Sponsor type

Hospital/treatment centre

Website

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

ROR

<https://ror.org/00j161312>

Funder(s)

Funder type

Government

Funder Name

Department of Health (UK) (ref: 0190016)

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	26/04/2008		Yes	No