

Diabetes 6 (D-6) trial: psychologically enhanced diabetes care, delivered by nurses

Submission date 19/05/2010	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered
Registration date 19/05/2010	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 14/06/2017	Condition category Nutritional, Metabolic, Endocrine	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<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
4299

Study information

Scientific Title
A randomised controlled trial of 'Psychologically Enhanced Diabetes Care, delivered by nurses' (D-6) for people with Type 2 diabetes and sub-optimal glycaemic control

Acronym

Study objectives

Some people with type 2 diabetes (T2DM) have problems reaching ideal blood glucose levels that will prevent a worsening of their condition. They may need to make significant lifestyle changes to do this which can be very difficult. Often it may be a question of being unsure whether they can make the changes not that they don't know what changes to make. Talking therapies such as motivational interviewing and cognitive behavioural therapy can help people talk through their difficulties within a supportive relationship and help foster their own self confidence in their ability to make changes. These therapies have increasingly been used in health settings although usually delivered by psychologists but the skills involved can be taught to non-psychologists such as practice nurses.

The aim of this study is to train practice nurses (for intervention GP practices) in talking therapy for diabetes and compare their patients with those from practices where nurses have not had the training. We would invite approximately 24 GP practices from the London boroughs of Lambeth, Southwark and Lewisham to participate and these would be randomised and nurses in the intervention practices would receive training. Nurses working in the non-intervention (control) GP practices would receive additional training in diabetes education. If this study shows that training nurses in talking therapy helps their patients to get better control of their diabetes this training could be offered to other practice nurses working in the NHS.

Ethics approval required

Old ethics approval format

Ethics approval(s)

1. South East Ethics Committee 3, 30/11/2009, ref: 09/H0808/97
2. Research & Development Centre for South East London NHS, 05/05/2010, ref: RDLSL 534/CSP 20423

Study design

Multicentre randomised interventional treatment trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Topic: Diabetes Research Network; Subtopic: Type 2; Disease: Hypertension, Dyslipidaemia, Diabetic Control, Obesity, Prevention/screening

Interventions

Baseline blood tests are taken in both the treatment and control groups. Patients are randomised to:

1. D-6 treatment group: face to face psychological diabetes care sessions. Maintenance psychological diabetes sessions, specified by patient, may be telephone/e-mail/face to face.
2. Control group: Face to face diabetes education sessions. Maintenance education sessions specified by patient, may be telephone/e-mail/face to face.

Follow-up blood tests are then taken in both the treatment and control groups.

Total duration of intervention: 12 months

Total duration of follow-up: 6 months

Intervention Type

Other

Phase

Phase II

Primary outcome(s)

Change in HbA1c (glycaemic control) at 18 months

Key secondary outcome(s)

1. Total cholesterol, taken at baseline and at end of study
2. Blood pressure, taken at baseline and at end of study
3. BMI, taken at baseline and at end of study
4. Quality of life, measured before and after intervention
5. Depressive symptoms, measured before and after intervention
6. Economic evaluation, measured before and after intervention

Completion date

30/11/2016

Eligibility

Key inclusion criteria

1. People with Type 2 diabetes for more than 2 years
2. Resident in south London boroughs of Lambeth Southwark and Lewisham
3. Aged 18 - 79 years, either sex
4. Persistent suboptimal glycaemic control defined as HbA1c above or equal to 8% on occasions in the past 12 months despite 2 appointments with a diabetes health professional

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. Severe mental disorders
2. Terminal illnesses and severe end stage diabetes complications
3. Morbid obesity with a body mass index (BMI) greater than 50 kg/m² as there is usually comorbid psychiatric morbidity
4. No telephone or mobile phone access as telephone contact is part of the intervention

Date of first enrolment

27/09/2010

Date of final enrolment

11/10/2011

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

Department of Psychological Medicine

London

United Kingdom

SE5 9RJ

Sponsor information

Organisation

King's College Hospital NHS Foundation Trust (UK)

ROR

<https://ror.org/01n0k5m85>

Funder(s)

Funder type

Government

Funder Name

National Institute for Health Research (NIHR) (UK) - Programme Grants for Applied Research (ref: RP-PG-0606-1142)

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	01/10/2016		Yes	No