

# Living well with asthma: supporting self care

<b>Submission date</b> 16/04/2013	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
<b>Registration date</b> 18/06/2013	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 16/05/2016	<b>Condition category</b> Respiratory	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

People with asthma often put up with symptoms such as wheeze, shortness of breath or interrupted sleep without realising that adjusting their inhalers might help. Some studies have shown that people with asthma have fewer symptoms when they use online resources to learn about asthma and to receive feedback about their symptoms and medications. We have developed such a resource which will be available free of charge to people with asthma. Before it can be made widely available we need to find out how it works in practice, so we are trying it out in this study. We want to find out how the website is used so we can learn ways to improve it.

### Who can participate?

Adults over the age of 16, with a diagnosis of asthma and an ACQ (Asthma Control Questionnaire ) score greater than or equal to 1, can participate.

### What does the study involve?

We will randomly allocate people into one of two groups: one group will get to use the website for 12 weeks and the other group will manage their asthma as normal. There will be a follow-up, 12 weeks after the first visit, covering similar areas as the first visit and to check lung function. Those who didnt have a login for the website will be given one then for 12 weeks. We also want to interview some people for their feed about using the website. This interview will take less than 60 minutes and is optional.

### What are the possible benefits and risks of participating?

The benefits are that the participants will learn about their condition and may gain better control of their asthma, resulting in fewer symptoms. As long as participants continue to seek advice from their doctor or nurse as usual, we do not see any risks to any individuals taking part in this study.

### Where is the study run from?

This study has been set up and will be run by the University of Glasgow, sponsored by NHS Greater Glasgow and Clyde.

When is study starting and how long is it expected to run for?

The study starts in June 2013 and will run until November 2014. The study will be recruiting participants for 6 months and the participants will be in the study for a maximum of 5 months (3 months using the online resource and 2 months to participate in a qualitative interview).

Who is funding the study?

This project is funded by the Chief Scientist Office, Scottish Government (reference CAF/11/08).

Who is the main contact?

Dr Deborah Morrison

Deborah.morrison@glasgow.ac.uk

## Contact information

### Type(s)

Scientific

### Contact name

Dr Deborah Morrison

### Contact details

1 Horselethill Road

General Practice & Primary Care

Institute of Health & Wellbeing

University of Glasgow

Glasgow

United Kingdom

G12 9LX

01413308383

deborah.morrison@glasgow.ac.uk

## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

RAISINV2.0

## Study information

### Scientific Title

A pilot Randomised controlled trial (RCT) of Asthma Internet Self management INtervention

### Acronym

RAISIN

## **Study objectives**

Current hypothesis as of 13/02/2014:

This pilot RCT aims to establish:

1. Recruitment and retention rates
2. Provide estimates of efficacy across a range of outcomes in order to estimate effect sizes for future full scale evaluations
3. Usability of this online resource

We hypothesise that this online resource, which has been designed with end user involvement and aims to improve adherence to therapy using multiple strategies, will result in improved symptom control and asthma quality of life.

Previous hypothesis:

This pilot RCT aims to establish:

1. Recruitment and retention rates
2. Feasibility of selected outcome measures (clinical and process)
3. Usability of this online resource. This pilot study does not aim to show changes in outcome measures.

## **Ethics approval required**

Old ethics approval format

## **Ethics approval(s)**

West of Scotland Research Ethics Committee, 19/03/2013, WOS/13/0004

## **Study design**

Randomised controlled trial

## **Primary study design**

Interventional

## **Secondary study design**

Randomised controlled trial

## **Study setting(s)**

Other

## **Study type(s)**

Quality of life

## **Participant information sheet**

Not available in web format, please use the contact details below to request a patient information sheet

## **Health condition(s) or problem(s) studied**

Asthma self management

## **Interventions**

Participants are randomised to two groups:

1. One group receives an internet-based resource which aims to promote adherence to asthma treatments by challenging negative beliefs, promoting activation, recognising barriers, using

goalsetting, and providing information, leading to improvements in symptoms control and quality of life.

2. Other group manages asthma as usual.

## **Intervention Type**

Other

## **Phase**

Not Applicable

## **Primary outcome measure**

Current primary outcome measures as of 13/02/2014:

1. Recruitment and retention rates at 12 weeks from baseline
2. Web use over 12 weeks (via automatically collected counts of access to website) plus perceived barriers and facilitators to sustained use of resource (via qualitative evaluation)
3. Changes at 12 weeks from baseline for:
  - 3.1. Asthma Control Questionnaire (ACQ)
  - 3.2. Asthma Quality of Life Questionnaire (AQLQ)

Previous primary outcome measures:

1. Recruitment and retention rates at 12 weeks from baseline
2. Web use over 12 weeks (via automatically collected counts of access to website) plus perceived barriers and facilitators to sustained use of resource (via qualitative evaluation)

## **Secondary outcome measures**

Current secondary outcome measures as of 13/02/2014:

1. Changes at 12 weeks from baseline for
  - 1.1. EQ-5D3
  - 1.2. Patient Activation Measure (PAM)
  - 1.3. Morisky Medication Adherence Scale (MMAS)
  - 1.4. Lung function (via pre bronchodilator spirometry)
  - 1.5. Airway inflammation (via fractional exhaled nitric oxide)
2. Problematic Experiences of Therapy Scale (PETS) in those in intervention group at follow up visit only (at 12 weeks)
3. Self-reported health care utilisation
4. Self-reported medication utilisation
5. Adverse events

Previous secondary outcome measures:

1. Changes at 12 weeks from baseline for:
  - 1.1. Asthma Control Questionnaire (ACQ)
  - 1.2. Asthma Quality of Life Questionnaire (AQLQ)
  - 1.3. EQ-5D3
  - 1.4. Patient Activation Measure (PAM)
  - 1.5. Morisky Medication Adherence Scale (MMAS)
  - 1.6. Lung function (via pre bronchodilator spirometry)
  - 1.7. Airway inflammation (via fractional exhaled nitric oxide)
2. Problematic Experiences of Therapy Scale (PETS) in those in intervention group at follow up visit only (at 12 weeks)

3. Self-reported health care utilisation
4. Self-reported medication utilisation
5. Adverse events

**Overall study start date**

01/06/2013

**Completion date**

31/10/2014

## Eligibility

**Key inclusion criteria**

1. Written informed consent
2. Age 16 years or older
3. Diagnosis of asthma by a health professional and duration of asthma symptoms for more than 1 year
4. Juniper ACQ score  $\geq 1$
5. Ability to access the internet

**Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Both

**Target number of participants**

50

**Key exclusion criteria**

1. Unstable asthma
2. Presence of active lung disease other than asthma
3. Mental impairment/language difficulties making informed consent impossible
4. Terminal illness
5. Cognitive impairment

**Date of first enrolment**

23/09/2013

**Date of final enrolment**

31/10/2014

## Locations

**Countries of recruitment**

Scotland

United Kingdom

**Study participating centre**

**1 Horselethill Road**

Glasgow

United Kingdom

G12 9LX

## **Sponsor information**

**Organisation**

NHS Greater Glasgow & Clyde (UK)

**Sponsor details**

c/o Dr Maureen Travers

The Tennent Institute

Western Infirmary

38 Church Street

Glasgow

Scotland

United Kingdom

G11 6NT

+44 141 211 6389

maureen.travers@ggc.scot.nhs.uk

**Sponsor type**

Hospital/treatment centre

**ROR**

<https://ror.org/05kdz4d87>

## **Funder(s)**

**Funder type**

Government

**Funder Name**

Chief Scientist Office, Scottish Government (UK), Ref: CAF/11/08

## **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?
<a href="#">Protocol article</a>	protocol	24/05/2014		Yes	No
<a href="#">Results article</a>	results	12/05/2016		Yes	No