

# An abnormal Pap smear and the impact of notification manner on women's health-related quality of life, coping and awareness of human papillomavirus

<b>Submission date</b> 22/11/2017	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 02/01/2018	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 02/01/2018	<b>Condition category</b> Urological and Genital Diseases	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

A pap smear is a test that detects any abnormal cells on the cervix which is the entrance to the womb from the vagina. The notification of an abnormal Pap smear can create negative psychological reactions. The aim of this study is to assess if a phone call notification of an abnormal Pap smear delivered by a trained healthcare provider have an effect on women's health-related quality of life (HRQoL) and coping, as well as women's awareness of human papillomavirus (HPV).

### Who can participate?

Women aged 23-65 years old who have an abnormal Pap smear.

### What does the study involve?

Participants are allocated to one of two groups. Those in the first group are notified about their Pap smear via a phone call by a trained healthcare provider. Those in the second group receive their results from a standard letter. Participants are followed up using a questionnaire to assess their quality of life, awareness of HPV and their coping abilities.

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

Participants may benefit from improvements in their quality of life and coping abilities after hearing they have an abnormal pap smear. There are some questions in the questionnaire about the women's sex life, which could intrude on women's integrity. Getting a questionnaire could raise question by itself and create anxiety among the women. For this, a curator is contacted and has given her permission for anxious women to calling her.

### Where is the study run from?

Women's Health Clinic, Kalmar län (Sweden)

When is the study starting and how long is it expected to run for?  
December 2015 to May 2017

Who is funding the study?  
Linnaeus University (Sweden)

Who is the main contact?  
Ms Marie Rask

## Contact information

**Type(s)**  
Scientific

**Contact name**  
Ms Marie Rask

**ORCID ID**  
<http://orcid.org/0000-0002-1569-6675>

**Contact details**  
Department of Health and Caring Sciences  
Linnaeus University  
Kalmar  
Sweden  
SE-391 82

## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

**Secondary identifying numbers**  
N/A

## Study information

**Scientific Title**  
Notification of an abnormal Pap smear: An intervention study

**Study objectives**  
A phone call notification of an abnormal Pap smear delivered by a trained healthcare provider minimizes the negative psychological consequences of receiving the test result.

**Ethics approval required**  
Old ethics approval format

**Ethics approval(s)**

Regional Ethics Committee for Human Research Faculty of Health Sciences Linköping University, 16/12/2015, ref: Dnr 2015/338-31

**Study design**

Interventional non randomised controlled study

**Primary study design**

Interventional

**Secondary study design**

Non randomised study

**Study setting(s)**

Hospital

**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**

An abnormal Pap smear result. Diagnosed as ASC-US+HR-HPV, LSIL+HR-HPV or HSIL.

**Interventions**

Participants who have an abnormal Pap smear are consecutively recruited from a women's health clinic. Participants are allocated to one of two groups. Those in the intervention group receive their results of their Pap smear from a phone call by a trained healthcare provider and those in the control group receive a standard letter.

The intervention consists of a phone call with a trained healthcare provider notifying the abnormal Pap smear. The training includes lectures and forum play. Healthcare providers at the women's health clinic participate in two half-day lectures. The education focuses on ethics, as well as factual knowledge about the cervical cancer screening program, HPV, abnormal Pap smear result and treatment. Thereafter, led by a drama teacher, ten of the healthcare providers participate in a one-day education with forum play focused on empathetic communication. Furthermore, healthcare providers are designated to notify women their abnormal Pap smear orally by phone. This phone call provides an opportunity for the women to have a dialogue with the healthcare provider and express their concerns and have questions answered. Women in the comparison group are notified about their abnormal Pap smear by an ordinary standard letter according to the routine of the women's health clinic.

The outcomes are assessed using a self-administered questionnaire, which the women filled out a week after they had been notified their abnormal Pap smear result.

**Intervention Type**

Behavioural

**Primary outcome measure**

1. Satisfaction with the notification manner regarding their test result is measured using the self-administrated questionnaire at week one
2. Health related quality of life is measured using the Functional Assessment of Chronic Illness Therapy-Cervical Dysplasia (FACIT-CD) and the Hospital Anxiety and Depression Scale (HADS) at week one

**Secondary outcome measures**

There are no secondary outcome measures.

**Overall study start date**

10/12/2015

**Completion date**

02/05/2017

## Eligibility

**Key inclusion criteria**

1. Women aged 23–65-years old
2. Diagnosed with ASC-US + HR-HPV, or LSIL + HR-HPV, or HSIL

**Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Female

**Target number of participants**

Intervention group: 113 women, and the comparison group 122 women

**Key exclusion criteria**

Diagnosed with cervical cancer.

**Date of first enrolment**

01/02/2016

**Date of final enrolment**

28/04/2017

## Locations

**Countries of recruitment**

Sweden

**Study participating centre**

**Women's Health Clinic, Kalmar län**  
Landstinget i Kalmar län  
Box 601  
Kalmar  
Sweden  
391 26

## Sponsor information

### Organisation

Kamprad Family Foundation

### Sponsor details

Västra Esplanaden 3  
Växjö  
Sweden  
352 30

### Sponsor type

Charity

### Website

<http://familjenkampradsstiftelse.se/fakta/kontakt/>

### ROR

<https://ror.org/03qb1q739>

## Funder(s)

### Funder type

University/education

### Funder Name

Linnéuniversitetet

### Alternative Name(s)

Linnaeus University

### Funding Body Type

Government organisation

### Funding Body Subtype

Local government

**Location**

Sweden

## **Results and Publications**

**Publication and dissemination plan**

We plan to send the study to Acta Obstetricia et Gynecologica Scandinavica.

**Intention to publish date**

11/12/2017

**Individual participant data (IPD) sharing plan**

The women's name or address is not expected to be made available, and it is looked up in a cabinet that only Marie Rask had access to. The data from the women's answer in the questionnaire is imputed in the SPSS, and coded, and that dataset could be obtained from Marie Rask.

**IPD sharing plan summary**

Not expected to be made available