

What is the effect of alternative summary statistics for communicating risk reduction on decisions about whether to take statins?

Submission date 09/03/2007	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 04/05/2007	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 02/09/2009	Condition category Circulatory System	<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

N/A

Study information

Scientific Title

Acronym

HIPPO 2 (Health Information Project, Presentation Online)

Study objectives

In terms of congruence between decisions and values:

1. "Relative risk reduction" is inferior to the absolute summary statistics
2. "Absolute risk reduction" is superior to other absolute summary statistics, and
3. There is no congruence between decisions and values for "event rates"

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval received from the University at Buffalo (New York, USA), Health Sciences Institutional Review Board, approved on 15 May 2002.

Study design

Randomised controlled trial

Primary study design

Interventional

Study type(s)

Other

Health condition(s) or problem(s) studied

Hypercholesterolaemia (hypothetical scenario)

Interventions

Presentations of summary statistic showing evidence of statins' effectiveness in preventing coronary heart disease over ten years.

The participants viewed one of the following six presentations:

1. Relative risk reduction (RRR)
2. Absolute risk reduction (ARR)
3. Numbers needed to treat (NNT)
4. Event rates (ER)
5. Tablets needed to take (TNT)
6. Whole numbers (WN)

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

Hypothetical treatment decision to take or not to take statins.

Key secondary outcome(s))

Understanding of and satisfaction with information, and preferred summary statistic.

Completion date

31/07/2005

Eligibility

Key inclusion criteria

1. At least 18 years of age
2. Fluent in English or Norwegian

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

Previous participation in this trial

Date of first enrolment

01/06/2003

Date of final enrolment

31/07/2005

Locations

Countries of recruitment

Canada

Norway

United States of America

Study participating centre

PO box 7004

Oslo

Norway

N-0130

Sponsor information

Organisation

Norwegian Knowledge Centre for the Health Services (Norway)

ROR

<https://ror.org/01thff661>

Funder(s)

Funder type

Research council

Funder Name

Norwegian Research Council (Norway)

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	01/11/2008		Yes	No
Results article	results	01/08/2009		Yes	No