# Knee replacement bandaging study (KReBS)

Submission date	Recruitment status  No longer recruiting	<ul><li>[X] Prospectively registered</li><li>[X] Protocol</li></ul>		
20/02/2017				
Registration date	Overall study status Completed	Statistical analysis plan		
20/02/2017		[X] Results		
Last Edited	Condition category	Individual participant data		
02/05/2025	Musculoskeletal Diseases			

#### Plain English summary of protocol

Background and study aims

Total knee replacement (TKR) surgery is a common procedure where the weight bearing surfaces of the knee joint are replaced with metal and plastic components to relieve pain and disability. The most common condition which leads to the need for a TKR is osteoarthritis (a type of arthritis where the surface of joints wears away, causing pain and stiffness). Swelling around the knee is commonly seen after a patient has had TKR surgery, and is thought to contribute to pain after surgery and slowing down the rehabilitation process. Inelastic compression bandages (tight-fitting bandages) are routinely used in the treatment of a range of conditions, including leg ulcers and lymphedema (a long-term condition that causes swelling in the body's tissues). Their use in helping reduce swelling is not well documented but it is thought that they aid venous blood return to the heart whilst improving the efficacy of the calf muscles which work as pumps to help return blood and thus help swelling. The aim of this study is to investigate whether use of short stretch inelastic compression bandages can help to reduce pain and swelling after TKR surgery. Blood loss during and following total knee replacement reduces a patient's haemoglobin and haematocrit counts whilst also increasing the need for a transfusion. By controlling the bleeding and subsequent swelling it is also thought that pain after surgery can be reduced. The study also assesses whether the use of a compression bandage will help reduce blood loss.

Who can participate?

Adults who are having a total knee replacement at a participating hospital

## What does the study involve?

Participants are randomly allocated to one of two groups. Those in the first group receive standard care. This involves application of a cotton wool bandage and crepe following knee replacement. Those in the second group have a compression bandage applied from the foot up to the groin. In both groups, the bandages will be applied in theatre and left in place for up to 48 hours before they are discharged from hospital. At the start of the study and then again after six and twelve months, participants complete a range of questionnaires and assessment to find out how well their knee has recovered after surgery. Participants in Northumbria NHS Foundation Trust also have their routinely taken full blood counts and blood transfusion data collected, and acute pain is assessed through pain scores routinely taken before and after surgery along with their analgesic (painkiller) requirements.

What are the possible benefits and risks of participating?

Participants who receive the compression bandages could benefit from decreased swelling and pain after surgery and ultimately better knee function and outcome. There are no notable risks involved with participating.

Where is the study run from?

Northumbria Healthcare NHS Foundation Trust and 14 other NHS trusts throughout the UK (UK)

When is the study starting and how long is it expected to run for? August 2016 to November 2020

Who is funding the study? 3M Company (USA)

Who is the main contact? Mrs Elizabeth Cook liz.cook@york.ac.uk

#### Study website

https://www.york.ac.uk/healthsciences/research/trials/research/trials/krebs/

## Contact information

## Type(s)

**Public** 

#### Contact name

Mrs Elizabeth Cook

#### Contact details

University of York Heslington York United Kingdom YO10 5DD +44 (0)1904 321522 liz.cook@york.ac.uk

## Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

Secondary identifying numbers 32352

## Study information

#### Scientific Title

A randomised controlled trial of the effect of a two-layer compression bandage system on knee function following total knee arthroplasty

#### **Acronym**

**KReBS** 

#### **Study objectives**

The aim of this study is to assess the effectiveness and cost-effectiveness of a two-layer compression bandage worn post-operatively for up to 48 hours, compared to standard practice (non-compressive bandaging) on patient reported outcomes following elective total knee replacement.

#### Substudy added 22/02/2018:

A substudy is being undertaken as part of a student project that will be reported separately to the main trial. In this substudy it is hypothesised that the use of a compression bandage will act as a tamponade and help reduce blood loss.

## Ethics approval required

Old ethics approval format

#### Ethics approval(s)

North East - Newcastle & North Tyneside 2 Research Ethics Committee, 08/02/2017, ref: 16/NE /0400

#### Study design

Randomised; Interventional; Design type: Treatment, Device

#### Primary study design

Interventional

## Secondary study design

Randomised controlled trial

## Study setting(s)

Hospital

## Study type(s)

Treatment

## Participant information sheet

See additional files

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

Specialty: Musculoskeletal disorders, Primary sub-specialty: Elective Orthopaedic Surgery; UKCRC code/ Disease: Musculoskeletal/ Other joint disorders

#### **Interventions**

Participants are randomised to one of two groups via a secure internet system utilising a simple randomisation process.

Control group: Participants receive crepe bandage and synthetic wool layer for up to 48 hours post TKR proximal shin to distal thigh following adhesive dressing application in theatre.

Intervention group: Participants receive a 2 layer Compression bandage (Coban 2 3M) for 48hrs post TKR from foot to groin following adhesive dressing application in theatre.

Standard post knee replacement surgery care for both arms following bandage application. Both arms will have standard hospital led follow up. In addition, Oxford knee score and EQ 5D questionnaires will be sent to patients at six and 12 months respectively as well as SMS text messages for VAS at 10 days, 4 weeks and 12 months post TKR.

#### Substudy added 22/02/2018:

Following recruitment into the main study, those patients undergoing total knee replacement in Northumbria NHS Foundation Trust will also have their routinely taken pre and post-operative full blood counts and transfusion data reviewed. Acute pain will also be assessed through routinely taken pre and post-op pain scores and analgesic requirements.

#### Intervention Type

Other

#### Phase

Phase III

#### Primary outcome measure

Patient reported knee function and pain is measured using the Oxford Knee Score at baseline (pre-operatively), 12 months post-operatively

#### Substudy added 22/02/2018:

Haemoglobin drop: difference between pre-op at pre-assessment or anaemia clinic and day 1 post-op levels

#### Secondary outcome measures

- 1. Patient reported knee function and pain is measured using the Oxford Knee score at baseline (pre-operatively) and 6 months posy-operatively
- 2. Health related quality of life is measured using the EQ-5D-3L at baseline (pre-operatively), 6 and 12 months post-operatively.
- 3. Health related quality of life is measured using the EQ-5D-5L at baseline (pre-operatively) and 12 months post-operatively- the validity and responsiveness of EQ5D-5L will be compared against EQ5D-3L. The UK value sets for the EQ-5D-5L are currently being derived and analysis will follow the most recent EuroQol guidance.
- 4. Pain is measured by VAS at 10 days post-operatively, 4 weeks and 12 months post-operatively
- 5. Proportion of each patient group that have to return to theatre within 30 days of surgery for any reason is assessed by hospital episode statistics at 12 months post-operatively
- 6. Proportion of each patient group that is readmitted to hospital within 30 days of surgery for any reason is assessed using local NHS trust patient administration system (PAS) data at 12 months post-operatively
- 7. Proportion of each patient group that suffers a pulmonary embolism requiring in patient hospitalization within 30 days post-operatively is assessed using local NHS trust patient administration system (PAS) data at 12 months post-operatively
- 8. Proportion of each patient group that suffers a deep vein thrombosis requiring inpatient hospitalization within 30 days of surgery is assessed using local NHS trust patient administration

system (PAS) data at 12 months post-operatively

9. Length of hospital stay will be calculated and assessed by using admission and discharge dates

#### Substudy added 22/02/2018:

- 1. Haematocrit drop: difference between pre-op at pre-assessment or anaemia clinic and day 1 post-op levels
- 2. Transfusion rate: units of Red blood cell transfusion as inpatient
- 3. Length of stay: nights spent as inpatient during acute stay
- 4. Analgesic requirements: cumulative dose for analgesia whilst an inpatient from patient records
- 5. Pain score: day 1 post op pain using 1-10 pain scale as recorded by nursing staff and day 10 pain scores via SMS and a pain scale 1-10

#### Overall study start date

01/08/2016

#### Completion date

07/11/2020

## **Eligibility**

#### Key inclusion criteria

- 1. Patients scheduled for primary total knee arthroplasty
- 2. Presenting at a participating trial site
- 3. Aged over 18
- 4. Able to provide written informed consent

#### Participant type(s)

Patient

#### Age group

Adult

#### Lower age limit

18 Years

#### Sex

Both

#### Target number of participants

Planned Sample Size: 2600; UK Sample Size: 2600

#### Total final enrolment

2338

#### Key exclusion criteria

- 1. Unable to consent
- 2. History of peripheral vascular disease
- 3. History of peripheral neuropathy
- 4. History of, or current venous ulceration
- 5. Absent foot pulses

- 6. Planned same day discharge joint replacement patients
- 7. Revision knee arthroplasty
- 8. Unicondylar or patellofemoral joint knee arthroplasty
- 9. Regular concomitant high dose anti-coagulant medication. Patients on routine thromboprophylaxis can be included
- 10. Unwilling to provide informed consent
- 11. Lack mental capacity and therefore unlikely to comply with data collection

#### Date of first enrolment

01/03/2017

#### Date of final enrolment

31/08/2018

## Locations

#### Countries of recruitment

United Kingdom

## Study participating centre Betsi Cadwalder University Health Board

-United Kingdom

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## Study participating centre City Hospitals Sunderland NHS Foundation Trust

-United Kingdom

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## Study participating centre County Durham and Darlington NHS Foundation Trust

United Kingdom

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## Study participating centre Dorset County Hospital NHS Foundation Trust

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# Study participating centre East and North Hertfordshire NHS Trust

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United Kingdom

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# Study participating centre East Kent Hospitals University NHS Foundation Trust

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United Kingdom

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## Study participating centre Gateshead Health NHS Trust

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United Kingdom

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## Study participating centre Golden Jubilee National Hospital

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**United Kingdom** 

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## Study participating centre Hampshire Hospitals NHS Foundation Trust

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**United Kingdom** 

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## Study participating centre Maidstone and Tunbridge Wells NHS Trust

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United Kingdom

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Study participating centre Norfolk and Norwich University Hospital -
- United Kingdom -
Study participating centre North Cumbria University Hospitals NHS Foundation Trust -
- United Kingdom -
Study participating centre North Tees and Hartlepool NHS Foundation Trust -
- United Kingdom -
Study participating centre Northumbria Healthcare NHS Foundation Trust - - United Kingdom -
Study participating centre Royal Devon and Exeter NHS Foundation Trust United Kingdom

Study participating centre Royal Devon and Exeter NHS Foundation Trust **United Kingdom** Study participating centre South Tees Hospitals NHS Foundation Trust **United Kingdom** Study participating centre **Stockport NHS Foundation Trust United Kingdom** Study participating centre **Taunton and Somerset NHS Foundation Trust** United Kingdom Study participating centre The Dudley Group NHS Foundation Trust **United Kingdom** Study participating centre University Hospital of South Manchester NHS Foundation Trust **United Kingdom** 

Study participating centre

## Warrington and Halton Hospitals NHS Foundation Trust

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United Kingdom

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## Study participating centre Western Sussex Hospitals NHS Foundation Trust

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**United Kingdom** 

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## Study participating centre Wrightington, Wigan and Leigh NHS Foundation Trust

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**United Kingdom** 

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## Study participating centre York Teaching Hospital NHS Foundation Trust

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**United Kingdom** 

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# Sponsor information

## Organisation

Northumbria Healthcare NHS Foundation Trust

## Sponsor details

Wansbeck Hospital
Woodhorn Lane
Ashington
England
United Kingdom
NE68 6JJ
+44 (0)344 811 8111
contactus@northumbria.nhs.uk

## Sponsor type

Hospital/treatment centre

#### Website

https://www.northumbria.nhs.uk/our-locations/wansbeck-general-hospital

#### **ROR**

https://ror.org/01gfeyd95

# Funder(s)

#### Funder type

Industry

#### **Funder Name**

3M

#### Alternative Name(s)

3M Company, 3M Science Applied to Life, 3M Science. Applied to Life. 3M United States, Minnesota Mining and Manufacturing Company

#### **Funding Body Type**

Government organisation

## **Funding Body Subtype**

For-profit companies (industry)

#### Location

United States of America

## **Results and Publications**

## Publication and dissemination plan

Exact plans unknown but planned publication in a high-impact peer reviewed journal.

## Intention to publish date

31/12/2021

## Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from David.Torgerson@york.ac.uk

## IPD sharing plan summary

Available on request

## **Study outputs**

Output type Details

version V1	05/01 /2017	21/02 /2017 No	Yes
protocol	08/05 /2019	10/05 /2019 Yes	No
		06/09 /2022 No	No
An embedded randomised controlled retention trial of personalised text messages compared to non-personalised text messages in an orthopaedic setting	11/06 /2020	31/10 /2022 Yes	No
		28/06 /2023 No	No
<u>.</u>	05/07 /2024	02/05 /2025 Yes	No
	An embedded randomised controlled retention trial of personalised text messages compared to non-personalised text messages in an orthopaedic setting	protocol  An embedded randomised controlled retention trial of personalised text messages compared to non-personalised text messages in an orthopaedic setting  11/06 /2020	protocol  08/05 10/05 Yes /2019 /2019 Yes 06/09 No An embedded randomised controlled retention trial of personalised text messages compared to non-personalised text messages in an orthopaedic setting  11/06 31/10 Yes /2020 /2022 Yes  28/06 No /2023 No 05/07 02/05 Yes