

Hospice in-patient deep vein thrombosis detection study

Submission date 01/06/2016	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 15/07/2016	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 06/09/2024	Condition category Circulatory System	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

<https://www.cancerresearchuk.org/about-cancer/find-a-clinical-trial/a-study-to-see-how-often-people-with-advanced-cancer-have-blood-clots-in-their-legs-hidden>

Contact information

Type(s)

Public

Contact name

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Additional identifiers

Protocol serial number

Version 1.0

Study information

Scientific Title

HIDDEN: Hospice In-patient Deep vein thrombosis Detection study

Acronym

HIDDen

Study objectives

Up to one in five cancer patients will develop blood clots in their veins known as deep vein thrombosis (DVT). A clot may break off from the DVT and travel to the lungs; known as a pulmonary embolism (PE). There are national treatment recommendations to prevent DVT in cancer patients admitted to hospital. However, it is not known whether these should apply to patients with advanced cancer admitted to specialist palliative care units (SPCU) such as hospices, as treatment may not alter how long patients have to live or improve symptoms and quality of life. It is not known if good effects outweigh side-effects of treatment (e.g. bleeding) in these patients. The aim of the HIDDen study is to find out how many cancer patients admitted to hospice units have a DVT via the use of a ultrasound scanner, at the hospice bedside, This study will determine how many cancer patients admitted to hospice units have DVTs and whether these cause problems and will result in a better understanding of how we should treat people with advanced cancer.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Health Research Authority, Yorkshire & The Humber - Leeds West Research Ethics Committee, 17/03/2016, ref: 16/YH/0045

Study design

Observational cohort study

Primary study design

Observational

Study type(s)

Other

Health condition(s) or problem(s) studied

Femoral deep vein thrombosis (DVT) in cancer patients admitted to specialist palliative care units (SPCUs).

Interventions

An ultrasound scanner at the hospice bedside, will be used to scan patients' legs to test whether they have a DVT. Symptoms will be noted, and patients re-scanned a week later. Patients are also asked about their symptoms, their condition and medications.

Weekly assessments will be undertaken until participants are no longer fit for ongoing assessments, have died, or have been discharged, up to a maximum of 3 weeks' inpatient stay.

Intervention Type

Other

Primary outcome(s)

The prevalence of femoral DVT in cancer patients admitted to specialist palliative care unit (SPCU) measured by Doppler ultrasound

Key secondary outcome(s)

1. Incidence of developing a proximal lower limb DVT in patients with and without a diagnosis of cancer during admission to a SPCU
2. Prevalence of clinical symptoms and signs attributable to VTE (proximal lower limb DVT and PE) on admission to a SPCU
3. Incidence of clinical symptoms and signs attributable to VTE (proximal lower limb DVT and PE) during admission to a SPCU
4. Incidence of acute deterioration or sudden death in patients with a known DVT that could be attributed to clinical pulmonary emboli
5. Clinical characteristics associated with the presence or absence of proximal lower limb DVT
6. Association between use of anticoagulation and presence or absence of DVT on admission and during admission to a SPCU
7. Impact of proximal lower limb DVT on length of stay
8. Survival

Completion date

28/02/2018

Eligibility

Key inclusion criteria

1. Admitted to a participating SPCU
2. 18 years or older
3. Able to give fully informed written consent or an available nominated consultee
4. No physical limitations to performing the ultrasound assessment

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Total final enrolment

343

Key exclusion criteria

1. Patients on other clinical trials will be considered on a case by case basis
2. Patients who are considered by the clinical team likely to die within 5 days
3. Where, in the case of a patient without mental capacity, the nominated consultee is too distressed to be approached regarding the study in the opinion of the clinical team
4. Patients unable to understand English well enough to provide informed consent or comply with study assessments

Date of first enrolment

06/06/2016

Date of final enrolment

10/10/2017

Locations

Countries of recruitment

United Kingdom

England

Northern Ireland

Wales

Study participating centre**Princess Alice Hospice**

W End Ln

Esher

United Kingdom

KT10 8NA

Study participating centre**Northern Ireland Hospice**

Newtownabbey

United Kingdom

BT37 9RH

Study participating centre**Marie Curie Hospice**

1A Kensington Rd

Belfast

United Kingdom

BT5 6NF

Study participating centre
Macmillan Unit
Antrim
United Kingdom
BT36 4TS

Study participating centre
Marie Curie Hospice
Bridgeman Rd
Penarth
Cardiff
United Kingdom
CF11 9LJ

Sponsor information

Organisation
University of Hull

ROR
<https://ror.org/04nkhwh30>

Funder(s)

Funder type
Government

Funder Name
National Institute for Health Research

Results and Publications

Individual participant data (IPD) sharing plan
Not provided at time of registration

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	01/02/2019		Yes	No
HRA research summary			28/06/2023	No	No
Other publications	exploratory substudy was the prevalence of DVT in patients with non-malignant palliative conditions	11/02/2022	06/09/2024	Yes	No
Participant information sheet		07/07/2016	26/07/2016	No	Yes
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Plain English results				No	Yes
Protocol file	version 4.0	22/09/2016	23/08/2022	No	No