

Antenatal screening for haemoglobinopathies in primary care: a cluster randomised trial to inform a simulation model

Submission date 30/04/2004	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered
Registration date 30/04/2004	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 31/01/2012	Condition category Haematological Disorders	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<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
HTA 03/02/03

Study information

Scientific Title

Acronym

SHIFT (Screening for Haemoglobinopathies In the First Trimester)

Study objectives

Offering antenatal screening for sickle cell and thalassaemia when women first report their pregnancy as opposed to offering it as part of community based secondary care increases the proportion of women who know their carrier status before ten weeks gestation.

Protocol can be found at: <http://www.nchta.org/protocols/200300020003.pdf>

More information can be found at: <http://www.hta.ac.uk/1401>

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics approval received from the local medical ethics committee on the 23rd March 2005 (ref: 05/Q0501/36)

Primary study design

Interventional

Study design

Partial factorial cluster randomised controlled trial

Study type(s)

Screening

Health condition(s) or problem(s) studied

Sickle cell and thalassaemia

Interventions

Please note that the anticipated end date of this trial has been extended to 30 April 2008 as of 14 December 2007 (Anticipated end date provided at time of registration: 30 September 2007). Closed to recruitment of participants: follow-up continuing.

A partial factorial cluster randomised controlled trial with general practice as the unit of randomisation. Participating general practices will be randomised to offering screening in one of three ways:

Group 1: In primary care, when women first report their pregnancies with parallel partner testing (i.e. partners of all women are offered screening at the same time as the pregnant women)

Group 2: In primary care, when women first report their pregnancies with sequential partner testing; (i.e. partners of women are only offered screening if the pregnant woman is found to be a carrier)

Group 3: In community-based secondary care, when women are booked by midwives with sequential partner testing

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

1. Time in pregnancy of offer of carrier screening for sickle cell and thalassaemia
2. Time in pregnancy of testing for carrier status for sickle cell and thalassaemia

Key secondary outcome(s)

1. Rates of informed choice about undergoing the screening test
2. Time in pregnancy when women know the carrier status of the baby's father
3. Couples' emotional responses to carrier testing after they have received their test result

Completion date

30/04/2008

Eligibility**Key inclusion criteria**

1. Eligible pregnant women receiving antenatal care at participating general practices
2. Aged 18 and over
3. Wanting to continue with the pregnancy
4. Carrier status is not documented in primary care records

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 Years

Sex

Female

Key exclusion criteria

1. Women who do not want to continue with the pregnancies
2. Women who are more than 18 weeks gestation when reporting their pregnancies

Date of first enrolment

01/10/2004

Date of final enrolment

30/04/2008

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

King's College London

London

United Kingdom

SE1 9RT

Sponsor information

Organisation

Department of Health (UK)

ROR

<https://ror.org/03sbpja79>

Funder(s)

Funder type

Government

Funder Name

NIHR Health Technology Assessment Programme - HTA (UK)

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 published by funding body	01/04/2010		Yes	No
Results	results published by the BMJ				

[article](#)

05/10/2010

Yes

No

[Results
article](#)

results published by Journal of Medical
Screening

01/10/2011

Yes

No