

How well does emergency treatment of dental abscess work in an NHS emergency clinic?

Submission date 21/11/2014	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 01/12/2014	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 18/04/2018	Condition category Digestive System	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Acute apical abscess is a painful condition in which the tip of a tooth's root becomes inflamed, often resulting in swelling and fever. The aim of the study is to find out how much pain is reduced after patients have been seen at an NHS emergency dental clinic for patients with acute apical abscess. This is a clinic in which patients with urgent dental problems are seen at weekends and in the evening. As we only see patients when they are in pain and not for routine care, we don't know how quickly their pain reduces after treatment. Additionally, we want to know if different treatment strategies favoured by different dentists result in faster pain reduction.

Who can participate?

Adult patients who have acute apical abscess as diagnosed by a dentist.

What does the study involve?

Participants will answer a questionnaire in the waiting area prior to their dental appointment and then on the phone the next day and two days later. This should take no more than 5 minutes.

What are the possible benefits and risks of participating?

The benefit of taking part is knowing that you are helping to improve the treatment given to future patients. Patients will receive the same level of care if they participate or not. There is no risk to participating. The only disadvantage to participants is having to give up about 10 minutes of their time.

Where is the study run from?

South West London Urgent Dental Care (UK)

When is the study starting and how long is it expected to run for?

February 2015 to January 2016

Who is funding the study?

South West London Urgent Dental Care (UK)

Who is the main contact?
Scott Aaron
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Contact information

Type(s)
Scientific

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Additional identifiers

Integrated Research Application System (IRAS)
165278

Study information

Scientific Title
Efficacy of first aid treatment of acute apical abscess in an NHS emergency clinic in the UK

Study objectives
Two hypotheses are defined in order to assess the aims of the research:
1. Pain relief by AAA can be obtained in an NHS clinic in the UK
2. Pain relief is greater where drainage method has been established than where it has not

Ethics approval required
Old ethics approval format

Ethics approval(s)
London - City & East Research Ethics Committee, 12/10/2015, REC ref: 15/LO/0193

Study design
Prospective study involving a pain quality assessment questionnaire

Primary study design
Observational

Study type(s)
Treatment

Health condition(s) or problem(s) studied

Acute apical abscess

Interventions

1. On arrival at the clinic, patients will be asked if they wish to participate in the study. Patients will be advised they are free to consent, or not to join the study, and that a refusal will have no effect on the treatment they receive. They will also receive this in writing, and be informed that they can withdraw their consent to participate at any point. All patients will be offered to participate except when they fulfil one of the exclusion criteria (see below)
2. A DCP will go through the PQAS with the patient in a private room
3. Once the dentist has made a diagnosis, patients who have been diagnosed with AAA will be asked if they wish to participate by phone or email, and patients who have not been diagnosed with AAA will be informed that they won't be called back.
4. A DCP will call the patient by phone the next day and again 2 days later (i.e., at 72 hours). Patients are seen between 1830 and 2230. Calls to patients will be between 1700 and 2130. DCPs will try to call the patient up to three times if they don't get through initially. Emails will be accepted for inclusion if they are received between 1400 and 2400. In addition to the PQAS, patients will be asked if they have seen another dentist or doctor since the care provided at this clinic, and if so what was done by this second clinician.

Intervention Type

Other

Primary outcome(s)

Results will be analysed by a statistician. They will show the level of reduction (or increase) in pain as defined by PQAS. We shall record pulpal diagnosis (necrotic, previous treatment, previously initiated treatment) and which patients have had drainage established, which patients have had drainage established and an antibiotic, and which have had antibiotics only.

Key secondary outcome(s)

We shall also record drop out rates. Comparison will be made to other studies, often done under more 'ideal' circumstances.

Completion date

31/01/2016

Eligibility

Key inclusion criteria

Adult patients of either gender who have acute apical abscess as diagnosed by a dentist

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

1. Children aged under 16
2. Where the reason for attendance (which is sent from the call triage service) is definitely not endodontic in origin
3. Where the patient is unable to speak a reasonable level of English
4. When there is insufficient time prior to the patient's consultation

Date of first enrolment

01/02/2015

Date of final enrolment

31/01/2016

Locations**Countries of recruitment**

United Kingdom

England

Study participating centre

South West London Urgent Dental Care
Edridge Road Community Health Centre
2 Edridge Road
Croydon
United Kingdom
CR9 1PJ

Sponsor information**Organisation**

South West London Urgent Dental Care (UK)

Funder(s)**Funder type**

Hospital/treatment centre

Funder Name

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/04/2018		Yes	No
HRA research summary			28/06/2023	No	No