

Can we introduce evidence based prescribing of complementary drug therapies into primary care? A randomised controlled trial.

Submission date 01/11/2005	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 20/12/2005	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 19/07/2010	Condition category Musculoskeletal Diseases	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Study information

Scientific Title

Study objectives

To determine the impact of dissemination to GPs of a recommendation about glucosamine sulphate for knee osteoarthritis, endorsed by Bury PCT Medicines Subgroup on:

1. The frequency with which glucosamine sulphate is prescribed in primary care
2. The appropriateness of prescribing
3. The frequency with which non-steroidal anti-inflammatory drug (NSAID)/COX2 inhibitors are prescribed
4. The frequency of serious NSAID associated gastrointestinal effects

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved by the Oldham research ethics committee (ref: 03/OL/105) Last amendment 13/06/2004.

Study design

Cluster randomised controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Osteoarthritis

Interventions

Dissemination of a recommendation for the prescribing of glucosamine for knee osteoarthritis endorsed by the Bury PCT Medicines Management Subgroup and accompanied by a letter of support signed by the Director of Public Health, Bury PCT.

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Glucosamine sulphate

Primary outcome(s)

Change in the mean number of prescriptions for glucosamine sulphate 500 mg per general practitioner over study period.

Key secondary outcome(s)

1. Change in cost to the NHS of prescriptions for glucosamine per general practitioner over study period
2. Proportion of GP prescribing glucosamine sulphate 500 mg during study period
3. If sufficient change in prescribing observed, number of admissions for gastrointestinal

bleeding

4. Change in mean number of prescriptions of NSAID and COX2

Completion date

01/07/2005

Eligibility

Key inclusion criteria

General practitioners in Bury PCT

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

General practitioners on the local medicines management subgroup and the other GPs in their practices

Date of first enrolment

26/06/2004

Date of final enrolment

01/07/2005

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

Department of Public Health

Bury

United Kingdom

BL9 0EN

Sponsor information

Organisation

Bury Primary Care Trust (UK)

Funder(s)

Funder type

Government

Funder Name

Bury Primary Care Trust (UK)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration