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Does an intensive development procedure of multidisciplinary guidelines improve prescribing behaviour: a pre/post study with concurrent control group and a randomised subgroup

Submission date
20/09/2005

Registration date
28/09/2005

Last Edited
10/09/2009

Recruitment status
No longer recruiting

Overall study status
Completed

Condition category
Other

[_] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[X] Results
[_] 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

Study information

Scientific Title

Study objectives

Two hypotheses:
1. Dissemination of locally and multidisciplinairy developed guidelines can lead to a modest but relevant change of volumes of prescriptions in the desired direction
2. What is the additional effect on change of volumes of prescriptions because of involving the target group in the preparation and development of the guidelines

Ethics approval required
Old ethics approval format

Ethics approval(s)
Not provided at time of registration

Study design
Randomised controlled trial

Primary study design
Interventional

Study type(s)
Not Specified

Health condition(s) or problem(s) studied
Improving rational prescribing behaviour among GPs in the Netherlands

Interventions
The randomised intervention concerns the intensified involvement of GPs in the development procedure of a set of prescription guidelines. A randomised subgroup of GPs were invited for a more intense role and received conceptual guidelines to comment on them. The other GPs only received the final version of the prescription guidelines. The second design of our study, the quasi experiment, concerns the dissemination of locally and multidisciplinary guidelines in the south of the Netherlands, controlled by a comparable region elsewhere in the Netherlands. The guidelines contained 14 recommendations on antibiotics, asthma/COPD drugs and cholesterol drugs.

Intervention Type
Other

Phase
Not Specified

Primary outcome(s)
Prescription data, gathered retrospectively per GP per month during the period 2001-2004. Expected directions of change have been defined based on the detailed recommendations contained in the guidelines, in combination with estimates based on the expertise of the initially involved key regional representatives.

Key secondary outcome(s))
Drug volumes and pre/post changes between groups on short-term and long term (one and two years after).

Completion date
01/02/2004

Eligibility

Key inclusion criteria
Completeness of the GPs data (no missing data per GP for more than one year) and at least 500 patients in the GPs practice

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Adult

Sex
All

Key exclusion criteria
GPs outside the region

Date of first enrolment
01/02/2001

Date of final enrolment
01/02/2004

Locations

Countries of recruitment
Netherlands

Study participating centre
Department of Health Organisation, Policy and Economics
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6200 MD

Sponsor information

Organisation
Care and Public Health Research Institute (CAPHRI) (Netherlands)

ROR
https://ror.org/02jz4aj89

Funder(s)

Funder type
Industry

Funder Name
The two local insurance companies (VGZ and CZ) provided funding sources for this study (Netherlands).

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	02/11/2006		Yes	No