

Choosing the most efficient and cost-effective treatment for acute whiplash associated disorders (WAD)

Submission date 03/02/2009	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 27/03/2009	Overall study status Completed	<input checked="" type="checkbox"/> Protocol
Last Edited 30/07/2009	Condition category Injury, Occupational Diseases, Poisoning	<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

A randomised three-group study, internet-based, face-to-face based and standard-management after acute whiplash associated disorders (WAD): choosing the most efficient and cost-effective treatment

Study objectives

The main purpose of this study is to try a new intervention strategy aimed to reduce the number of patients who have persistent problems after the whiplash injury. The goal is also to identify which of three different interventions that is most cost-effective for whiplash associated disorders (WAD) patients and the health care system. In this study we are controlling for two factors. First, the effect of behavioural medicine approach is evaluated. Second, the manner in which the treatment is administered, IT or face-to-face, is evaluated.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Research Ethics Committee at Uppsala University, Uppsala, Sweden gave approval in May 2005 (ref: 01-229)

Primary study design

Interventional

Study design

Randomised prospective experimental three-group study

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Acute whiplash associated disorders

Interventions

Group 1: The new IT-based treatment (internet/e-mail) regimen for acute WAD patients, emphasizes self-monitoring and skills training, as well as discussions led by a therapist

Group 2: Face-to-face intervention involves groups of three to six patients led by therapists. The face-to-face program is planned to be similar to the IT-based treatment regimen described above, but differs in the way the treatment is administered.

Group 3: Standard care of these patients currently involves a visit to a physical therapist, which provides a home exercise program dealing with physical symptoms and advice of returning to normal activities as soon as possible. No further treatment is given except the home exercise program that all patients get at the emergency ward (standard care) before randomisation.

Both IT and face-to-face treatments:

Number of sessions: 7

Duration of sessions: 1 hour

Duration of treatment: about 7 - 9 weeks

Standard management:

1 hour only once.

Total duration of follow-up for all groups is 2 years.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

1. Disability, measured with Pain Disability Index
2. Cost-effectiveness, evaluated with a cost-diary

Measured at pre-, post-treatment, 3, 6, 12, 24 months follow-ups.

Key secondary outcome(s)

1. The Patient Goal Priority Questionnaire (PGPQ)
2. Tampa Scale for Kinesiophobia
3. Pain Intensity Diary
4. Self-Efficacy Scale
5. Coping Strategies Questionnaire
6. 36-item short form health survey (SF-36)
7. Exercise diary

Measured at pre-, post-treatment, 3, 6, 12, 24 months follow-ups. QALYs are measured at 12 and 24 years follow-up.

Completion date

31/12/2011

Eligibility**Key inclusion criteria**

1. Aged between 18 and 65 years, either sex
2. Satisfactory Swedish language skills
3. Fulfill criteria for the diagnosis of WAD grade I and II
4. Ongoing pain in the neck due to the accident
5. Access to a computer

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 Years

Sex

All

Key exclusion criteria

1. Prior neck injury
2. Other ongoing chronic pain problems
3. Ongoing treatment for pain or pain related symptoms

Date of first enrolment

01/11/2006

Date of final enrolment

31/12/2011

Locations

Countries of recruitment

Sweden

Study participating centre**Department of Physiotherapy**

Västerås

Sweden

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Sponsor information

Organisation

The Swedish Research Council (Sweden)

ROR

<https://ror.org/03zttf063>

Funder(s)

Funder type

Research council

Funder Name

The Swedish Research Council (Sweden)

Funder Name

Uppsala University (Sweden) - Faculty of Medicine

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?
Protocol article	protocol	22/07/2009		Yes	No