

# A randomised controlled trial of day-care versus outpatient thermal balloon endometrial ablation using Thermachoice

<b>Submission date</b> 30/09/2004	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 30/09/2004	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 06/10/2009	<b>Condition category</b> Urological and Genital Diseases	<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

**Contact name**  
Dr F A Marsh

**Contact details**  
Academic Unit of Obstetrics and Gynaecology  
Gledhow Wing  
Leeds Teaching Hospitals NHS Trust  
Beckett Street  
Leeds  
United Kingdom  
LS9 7TF  
+44 (0)787 946 3287 and 65485  
r&d@leedsth.nhs.uk

## Additional identifiers

**Protocol serial number**  
N0436130477

## Study information

## Scientific Title

### Study objectives

The safety and efficacy of thermal balloon endometrial ablation (EA) for the treatment of menorrhagia is well established. However the vast majority have been performed under general anaesthetic with its resultant risk and costs. Thermachoice has been performed in the outpatient setting both in this hospital and several others around the UK. The potential advantages of performing this technique in the outpatient setting are:

- The avoidance of general anaesthesia and its associated risks
- Earlier discharge from hospital
- Faster return to full mobility and fitness
- Less time of work
- Less cost to the patient

We plan to undertake a randomised controlled trial in order to compare out-patient (OP) and day-care (DC) Thermachoice. We will determine the acceptability, recovery and cost of both procedures. Longer term follow up will be undertaken with validated questionnaires comparing patients' menstrual symptoms before and after the treatment. We hypothesise that Thermachoice in the outpatient setting is a safe, acceptable treatment for menorrhagia.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

Not provided at time of registration

### Primary study design

Interventional

### Study design

Randomised controlled trial

### Study type(s)

Treatment

### Health condition(s) or problem(s) studied

Menorrhagia

### Interventions

Patient will be randomised to

1. Day care group
2. Outpatient group

### Intervention Type

Other

### Phase

Not Specified

### Primary outcome(s)

Patient satisfaction and acceptability with the two procedures

### **Key secondary outcome(s)**

To analyse and compare the two procedures in relation to:

1. Speed of recovery
2. Time away from home
3. Time away from work
4. Patient satisfaction at 6 and 12 months
5. Symptomatic changes specially menorrhagia severity and other menstrual symptoms e.g. dysmenorrhoea at 6 and 12 months.
6. Cost to the patient, employer and NHS.
7. Health related quality of life changes at 6 and 12 months.

### **Completion date**

01/06/2004

## **Eligibility**

### **Key inclusion criteria**

Patients will be recruited from the outpatient Gynaecology and Hysteroscopy clinics.

### **Participant type(s)**

Patient

### **Healthy volunteers allowed**

No

### **Age group**

Adult

### **Sex**

Female

### **Key exclusion criteria**

Does not meet inclusion criteria

### **Date of first enrolment**

01/01/2003

### **Date of final enrolment**

01/06/2004

## **Locations**

### **Countries of recruitment**

United Kingdom

England

**Study participating centre**  
**Academic Unit of Obstetrics and Gynaecology**  
Leeds  
United Kingdom  
LS9 7TF

## Sponsor information

**Organisation**  
Department of Health

## Funder(s)

**Funder type**  
Hospital/treatment centre

**Funder Name**  
Leeds Teaching Hospitals NHS Trust (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?
<a href="#">Results article</a>	results	01/03/2007		Yes	No