

Effects of a pain consult and patient education and monitoring: a prospective study in oncology patients.

No registrations found.

Ethical review	Positive opinion
Status	Recruitment stopped
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON23628

Source

NTR

Brief title

N/A

Sponsors and support

Primary sponsor: Erasmus MC
the Netherlands

Source(s) of monetary or material Support: Zorgonderzoek Erasmus MC
the Netherlands

Intervention

Outcome measures

Primary outcome

Average pain reduction measured by numeric rating scale during the study period.

Secondary outcome

Effect of the interventions after 2, 4 and 8 weeks at:

1. Adherence to ATC analgesics;
2. Worst pain reduction;
3. Average pain reduction;
4. Present pain reduction;
5. Proportion of patients with clinically relevant pain reduction;
6. Pain interference;
7. Quality of life;
8. Reduction of side effects;
9. Adequacy of pain treatment;
10. Pain knowledge.

Study description

Background summary

Patients with advanced cancer experience multiple symptoms. Among these symptoms pain is the most prevalent and feared: 15 – 77% of cancer patients experience pain. Although adequate pain treatment is now available for most patients, data have demonstrated that these methods are not used to their fullest, leading to inadequate pain relief in 42-65% patients. Pain management could be influenced by various factors, e.a. cause of pain, analgesics prescription, side effects and adherence. Physicians' knowledge about pain, pain management and analgesics could affect patients pain, but patients' misconceptions and beliefs could also influence the adequacy of pain management. To study which intervention would be most effective in reducing average pain intensity, patients will be randomised to:

1. standard care;
2. pain consult;
3. pain consult in combination with pain education.

Study objective

It is hypothesised that a pain consult at the specialized pain clinic in combination with Patient Education Program is more effective in reducing average pain intensity compared to a pain

consult alone. A pain consult at the specialized pain clinic is more effective in reducing average pain intensity compared to standard care.

Study design

N/A

Intervention

1. Second opinion pain consult at the specialist pain clinic;
2. Second opinion pain consult combined with Pain Education Program and monitoring by nurse specialists.

Contacts

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Eligibility criteria

Inclusion criteria

1. Cancer-related pain or cancer treatment related pain for at least two weeks;
2. Nociceptive pain;
3. Average pain intensity score of 4 or more;
4. Accessibility by telephone;

5. A life expectancy of at least three months;
6. Informed consent.

Exclusion criteria

1. Neuropathic pain;
2. Residing in nursing home or retirement home;
3. Pain not treated with oral medication;
4. Radiotherapy in the past two weeks.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Active

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	01-02-2006
Enrollment:	165
Type:	Actual

Ethics review

Positive opinion	
Date:	22-02-2006
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL557
NTR-old	NTR613
Other	: EMC 2005 - 257
ISRCTN	ISRCTN68236655

Study results

Summary results

N/A