Effectivity of an e-learning to improve serrated polyp detection: a randomized, controlled trial

No registrations found.

Ethical review	Not applicable
Status	Pending
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON27013

Source
NTR

Brief title
TBA

Health condition

Colorectal cancer

Sponsors and support

Primary sponsor: N/A
Source(s) of monetary or material Support: N/A

Intervention

Outcome measures

Primary outcome

Relative difference of PSPDR between e-learning group and control group over follow-up period of one year and two years.

Secondary outcome

Correlation of PSPDR and baseline characteristics

Study description

Background summary

Our research group has recently completed a large prospective non-randomized trial in the Netherlands, in which a substantial improvement of SP detection was observed among endoscopists within colonoscopies performed in the setting of Dutch FIT-based CRC screening program following a face-to-face training of 45 minutes, which was repeated after three years. In this study, endoscopists from 9 different hospitals located throughout the Netherlands were invited to receive this face-to-face training in 2014 and 2017. The training consisted of a Powerpoint based presentation in which we primarily aimed to educate endoscopists about the importance of SPs in the development of sporadic CRC and PCCRC. In addition, we included a detailed section about the endoscopic appearance of SPs using the well-established WASP classification for optical diagnosis of colorectal polyps. The proximal serrated polyp detection rate (PSPDR) of the endoscopists that received these face-to-face trainings steadily increased from 9.3% at baseline to 15.4% at the end of follow-up in 2018. We compared this with the PSPDR of a random group of 100 untrained endoscopists located throughout the Netherlands. In this control group, the PSPDR remained stable around 10% throughout the entire follow-up duration. The results of this study are promising and demonstrate that endoscopists can be easily trained for long lasting increase in SP detection. It is not known, however, whether this training could also be delivered as an e-learning instead of a face-to-face training session, which would greatly simplify implementation.

The effectivity of e-learning in endoscopy has been scarcely studied, although some smaller studies demonstrated beneficial effects of online training modules for optical diagnosis of gastric lesions. (2, 3) In education of surgeons however, a recent systematic review demonstrated that elearning was at least as effective in training surgical knowledge, psychomotor skills and nontechnical skills compared to other methods of training such as face-to-face training. Important notice: the major group participating were students or surgical-trainees, not trained surgeons. (4) In addition, our group has recently demonstrated that nationwide implementation of an e-learning for pathologists resulted in long lasting improvement of diagnostic accuracy for histopathologic assessment of serrated polyps.(5)

Based on this evidence, we expect that an e-learning will be similarly effective in improving serrated polyp detection in endoscopy compared to the face-to-face training which we applied in our previous study.

The content of the face-to-face training from our previous study will be used as foundation for the development of a new e-learning module.

Study objective

Proximal serrated polyp detection rate is higher in endoscopists group who were trained by the e-learning.

Study design

From baseline till 2 years of follow-up

Intervention

E-learning focused on detecting serrated polyps and distinguishing from adenoma's.

Contacts

Public
Amsterdam UMC, location AMC
David van Toledo

020-5661922
Scientific
Amsterdam UMC, location AMC
David van Toledo

020-5661922

Eligibility criteria

Inclusion criteria

Accreditated endoscopists performing within the FIT-based Dutch screening program for colorectal cancer.

Exclusion criteria

Endoscopist employed by participating centers of the previous study.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Placebo

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	28-05-2020
Enrollment:	50
Type:	Anticipated

IPD sharing statement

Plan to share IPD: Undecided

Ethics review

Not applicable

Application type:	Not applicable

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	NL8385
Other	METC AMC : W20_070#20.098 (decision: non-WMO; no formal ethical approval required)

Study results

Summary results
N/A