The Bluebelle study: designing trials of relevance to patients, clinicians and the NHS

Jane M Blazeby on behalf of the Bluebelle Study
Management Group



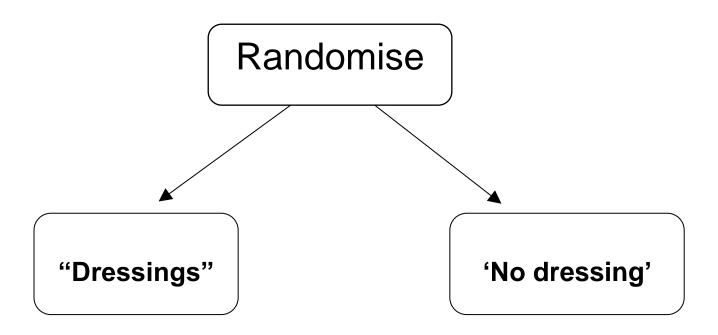


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Winning trial design



Needs loads of feasibility work!



NIHR HTA commissioned call

A feasibility study to establish whether a main trial of 'complex', 'simple' or 'absent' wound dressings is possible







University Hospitals Birmingham MHS



NHS Foundation Trust











ConDuCT-II Hub





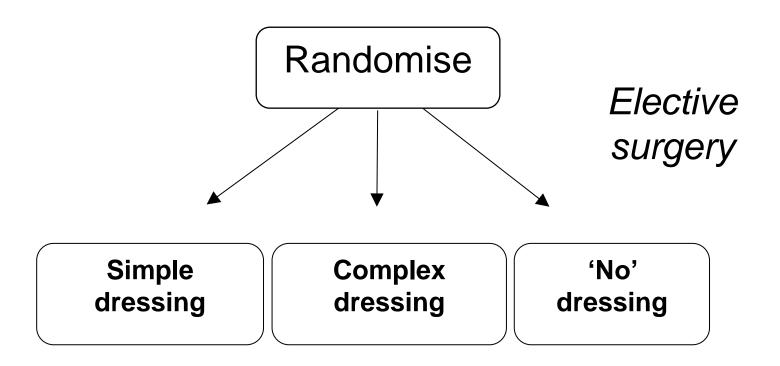




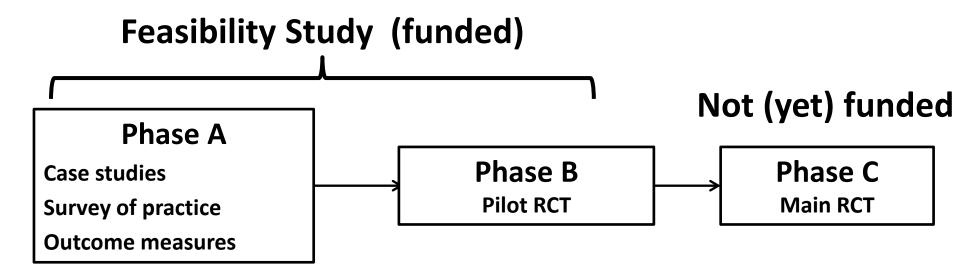
Surgical research nurses

Trainee research collaboratives

Aim of Bluebelle Phases A & B Is a main RCT possible?

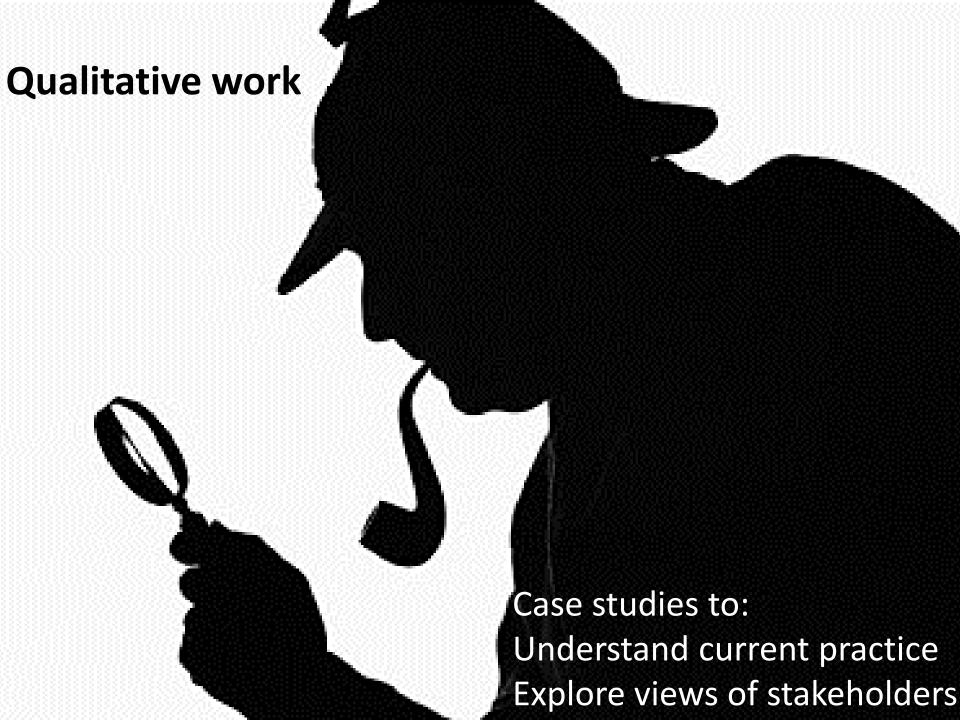


Feasibility study: Phase A & B



Phase A – preliminary work

- Qualitative case studies
- Surveys & literature work
- Development of outcome measures



Methods/data collection

- 91 interviews clinicians and patients
- Abdominal, obstetric, paediatric surgery
- University and district hospitals

What is a 'dressing'?

Inconsistencies in what considered as a 'dressing'



Relevance of 'simple & complex'

Surgeon 1016

I've never heard of the terms [simple and complex] in terms of dressings.



The vast majorityhave got a simple covering over the wound.

Nurse 1002

Type of trial design & 'no dressing'

• They did engage with 'no dressing 'comparison

Because we don't use very many different types of dressings then probably 'dressings' vs. 'no dressings' is simpler and more useful.

Surgeon 2014

The purpose of wound dressings



Need to consider: If no dressing applied, does this change the quality of surgical skin closure?



Phase A – preliminary work

- Qualitative case studies
- Surveys & literature work
- Development of outcome measures



Survey of current practice



Survey details

- Prospective, in theatre
- 14 days
- Emergency/elective
- Upper/lower GI

21 centres727 patients1794 wounds





Survey results

		Patients n = 727 (%)
Sex	Female	375 (52)
Age	<30 30-50 51-70 71+	118 (16) 193 (26) 253 (35) 158 (22)
Diabetes		62 (9)
BMI	<20 20-25 26-30 30+	50 (7) 275 (39) 238 (34) 141 (20)

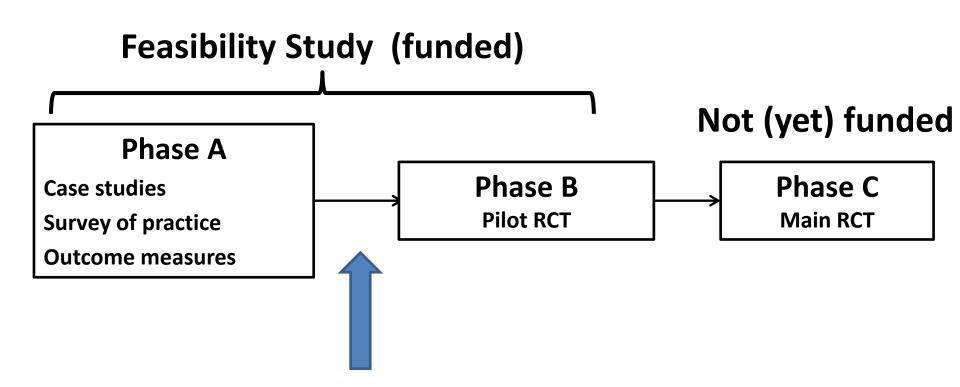
Survey of dressings: surgery

		Patients n = 727 (%)
Upper gastrointestinal	Oesophagogastric resection	8 (1)
•	Pancreaticobiliary resection	11 (2)
	Anti-reflux surgery	10 (1)
	Bariatric surgery	11 (2)
	Cholecystoo 20/	153 (21)
Lower gastrointestinal	1310 (70%)	82 (11)
FIG	ective (1130%)	10 (1)
L.	argency (3	40 (6)
E'	cholecyster (70%) ective (70%) mergency (30%) mergency (30%)	48 (6)
General	Hernia repair (groin/abdominal wall)	128 (17)
	Appendicectomy	109 (15)
	Diagnostic laparoscopy	20 (3)
	Small bowel procedure	17 (2)
	Other	76 (10)

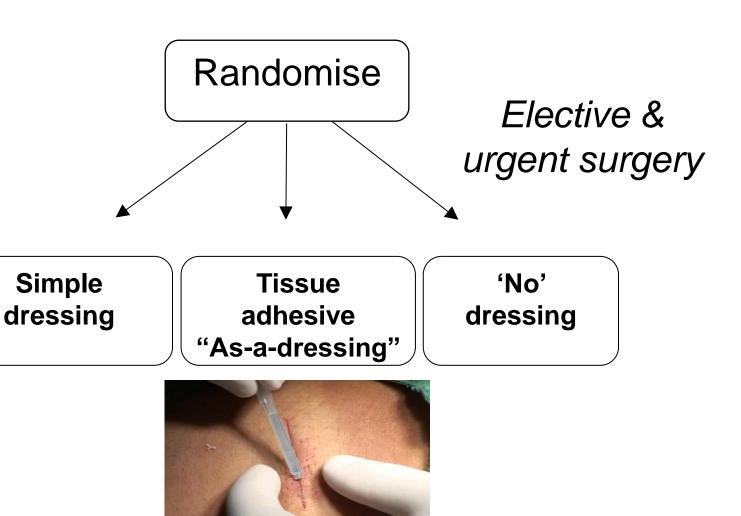
Survey of dressings: types used

	n = 1794 (%)
Simple	12
Advanced/complex did not vary	according to
Advanced/complex T: Type of dressing did not vary N Type of dressing did not vary patient or surgical factors patient or surgical factors	63 (4)
patro	

Feasibility study: Phase A & B



New design of Phase B



Where next?

- Under take the pilot RCT
- Design main trial
- Surgical Trials Showcase Day (March 18th)

Bristol Surgical Trials Centre: Surgical Showcase

18 March 2016, 10.00 AM - 18 March 2016, 4.00 PM



Discover how to get involved in RCTs in surgery. Hear inspirational stories from leading surgeons. Learn to explain clinical equipoise.

The Bristol Surgical Trials Centre Showcase day is for surgeons, allied health professionals and methodologists of all grades and types.

Key note speakers will include Professor Gianni Angelini, Professor Dion Morton, Miss Adele Francis and more.

