

DIDACT

TOP TIPS

FROM THE TRIAL TEAM SURGEONS TO HELP SITE SURGEONS WITH RECRUITMENT

Delivering NIHR studies is important to continue funding of orthopaedic research. It has been shown that challenging UK-wide studies can recruit e.g. ProFHER, UK FROST.



There are **TWO** common concerns for you to put to one side:

1. DIDACT study question & trial design

The need for high quality evidence has been established and the design has been robustly peer reviewed and commissioned by the NIHR.

2. Personal experiences & concerns

We as surgeons may think that one treatment is preferable for a patient. But what we hear from patients is the opposite: they don't want us to decide for them. They want to know about any ongoing study, what is involved, and then they will take that considered decision. It is not your role to decide what treatment is best for the patient. Instead, allow the patient to decide about taking part.



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Decision Making

Surgeons are clinically trained to assume a position of certainty when talking to patients and advising on treatment. However, for the study, you need to move from that position. Accept the uncertainty and say to patients that either treatment is suitable for them but we don't know which treatment works better.

Equipose

Individually, surgeons may have views about which is the preferred treatment. The wider surgeon community, however, has collective equipose. A similar number of surgeons will think the opposite in the absence of clear evidence one way or another. Therefore, **the KEY step in recruitment** is to get your mind in gear about being in balance towards the treatments. This will make it easier to approach patients and bring them into equipose.



Involve a Research Nurse

Your role is to confirm eligibility, to introduce the trial briefly, to explain that you genuinely don't know which treatment is best for the patient, and to state that we would like the patient to consider taking part. Then hand the patient over to the Research Nurse, who is trained to consent and can spend more time with patients in a busy clinic.

Positive Approach

1. Sometimes the patient may ask you what would be the best treatment option? As a surgeon, we would respond that both treatments are routinely used in the NHS and both lead to good outcomes, however, we don't know if one is better than the other which is why the study is being done.
2. If a patient persists, advise that if they don't have strong preferences then it's best to take part in the study as (i) it will help patients in the future benefit from getting the best treatment and (ii) taking part in a study of national importance may improve patient experience of the treatment pathway.
3. If patients have a strong preference, bring them into the zone of equipose. Broadly if patients prefer surgery, explain the advantages of sling care and vice versa. The patient needs to understand the pro's and con's of both options.



Periodic Review

One process may not work for everybody or for every site so please take regular stock as to what should be done to improve processes locally.