

ARTIC is opening nationwide

The ARTIC study has now finished its pilot phase and we are entering the full project. We only just recruited enough to pass the pilot progression criteria and we are now analysing the data from interviews from both Parents and clinicians to understand more what we did well and where we can improve.

Early findings from the Parent works shows Parents who took part in the RCT have been overwhelmingly positive about their experiences. They were positive about how the GP explained the study to them in the first instance, the study materials and many have said that they would take part in an RCT in the future if they were asked. Many Parents had not used a symptom booklet before and found it useful in terms of monitoring their child's illness and understanding their recovery in more detail (i.e. that over a course of a week or two week period a child might have days when they appear to be recovering and subsequent days when they decline again until full recovery is reached). In terms of Parents who did not participate in the trial, many explained that they might have done in normal circumstances but not on this particular occasion due to their child having a recent, serious illness. Some of these Parents explained that shortly before this serious episode, they had provided self-care for their child at home and had not taken them to visit a health care practitioner. The symptoms then deteriorated rapidly resulting in an emergency visit to A & E. This experience affected the Parents' subsequent decision-making process regarding when to consult in primary care and their views of antibiotics with many reporting that they did not want to take 'any chances' and would prefer knowing that the child received antibiotics when consulting at the time of this trial.

The clinicians have found our processes simple enough if a little long winded for the first few recruits until they gain confidence. They have confirmed our expectation that the time taken to explain fully the RCT side including randomisation and use of placebos is far more than the observational arm. This is why the reimbursement is more. None have had problems explaining the equipoise and why the trial is necessary.

We are now working with our colleagues at the Universities of Oxford, Cardiff and Bristol. In recognition of the challenges that primary care is currently facing with staff shortages and increased workload to find recruiting sites that can deliver we are now opening over the entire country including currently GPs in the East and West Midlands, Eastern England, London, North- west Coast areas and also in secondary care when the child attends as a first point of contact.

If you would like to know more do contact us.