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Qualitative study exploring clinicians' experience of participating in a feasibility trial investigating benign paroxysmal positional vertigo in traumatic brain injury

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Background and aims

This is a multi-center qualitative study embedded within a larger multiphase feasibility study investigating the management benign paroxysmal positional vertigo (BPPV) in acute traumatic brain injury (TBI). Evidence has shown qualitative methods have a place in feasibility studies as they can improve validity of a future trial. Our primary objective was to explore the acceptability of trial processes such as recruitment, randomization and interventions. A secondary objective was to identify any facilitators or barriers to implementing a more definitive randomized controlled trial (RCT).

Methods

A qualitative approach was utilized as it provides an interpretive view of context-related phenomena. We used the theoretical domains framework to inform our topic guide and provide a theoretical lens into factors affecting behavior. Participants from the research team across two major trauma hospitals in London, UK were recruited using purposive sampling. Semi-structured, individual interviews were used as the data collection method. Data was transcribed verbatim and analyzed using Framework analysis.

Results

Eight clinicians participated: four research nurses, three physiotherapists and one occupational therapist. Concerns were raised surrounding the randomization of BPPV patients to the usual care treatment arm. Reported facilitators included a split clinical-research post, which enabled therapists to complete study specific research activities without significant impact on their clinical workload.

Conclusions

This work provides insight into clinicians' perspectives of trial processes and demonstrates the importance of gaining such views. These data will inform the design of a future RCT and will help shape targeted theory-based implementation strategies for clinical behavior change, with potential to translate into improved patient outcomes.