



# Primary Care Alliance for Clinical Trials (PACT)

## *Building a network to facilitate quality randomised trials in primary care*

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### Randomised trials in PHC

Well conducted randomised trials provide the most rigorous evidence of effectiveness of primary health care (PHC) interventions. Trials can be expensive and require planning and persistence to be successful. Until recently, randomised trials have not been a commonly used method for testing interventions in PHC. The reality is, the discipline of general practice – in comparison with other medical disciplines – lacks quality evidence to support the decisions made in everyday practice.<sup>1-4</sup>

However, there are a variety of challenges to the development and execution of randomised trials in our community based settings. While there is little debate about the necessity of randomised trials to test the efficacy of medications for clinical conditions, there is ongoing debate about the necessity for randomised trials to test psychosocial and behavioural interventions.<sup>5</sup> In PHC we are often interested in the effectiveness rather than efficacy of complex interventions such as models of care (eg. the 3+ Asthma Plan). Randomised trials of complex interventions are becoming more common in PHC, and often randomise by practice rather than individual patient (cluster randomisation).<sup>6</sup>

We are only beginning to develop the frameworks and methods needed to meet these challenges<sup>6,7</sup> and cooperation and information sharing are essential if we are to provide our discipline with quality evidence to support the decisions that are made in clinical practice and policy making. To assist with this we have formed the Primary Care Alliance for Clinical Trials (PACT).

### Introducing PACT

The PACT network aims to strengthen and foster the community of researchers interested in randomised trials in PHC. The network formed in early 2003 as a part of the Primary Health Care Research Evaluation and Development Capacity Building Program of the Department of General Practice, University of Melbourne. Through existing networks, we identified researchers from Australia, New Zealand and the United Kingdom, interested in contributing to a collaborative, supportive virtual network. The PACT network will meet face-to-face on an annual basis to workshop current and future randomised trials in PHC. A key feature of the workshops will be to address the challenges faced by researchers undertaking randomised trials in PHC and to encourage large scale trials. A PACT website is scheduled to be launched by July 2004 providing access to network members and information about forthcoming events and items of interest.

### The inaugural PACT workshop

Our first official face-to-face gathering took place as a preconference workshop at the General Practice and Primary Health Care Research Conference, Canberra, June 2003. Thirty-five researchers from Australia and New Zealand met to share experiences and discuss four key challenges commonly encountered by PHC researchers:

- deciding when an intervention is ready to be tested in a randomised trial
- measuring meaningful outcomes in randomised controlled trials
- deciding when to use cluster versus indi-

vidual randomisation, and

- undertaking large scale multipractice randomised trials in primary care.

The PACT aims to provide a networking forum for those wishing to plan, implement and disseminate high quality randomised trials in PHC. Discussion papers on issues raised at the inaugural PACT workshop will be published in *Australian Family Physician* in coming months, with the aim of providing practical and theoretical information to guide those planning randomised trials in PHC. If you are interested in joining the PACT network, email: gp-phcred@unimelb.edu.au.

### References

1. Hays RB, Piterman L. Education and training for general practitioners. *General practice in Australia*: 2000. Canberra: Commonwealth Department of Health and Aged Care, 2000;347-382.
2. Horton R. Evidence and primary care. *Lancet* 1999;353:609-610.
3. Starfield B. A framework for primary care research. *J Fam Practice* 1996;42:181-185.
4. Van Der Weyden M. Promoting evidence base for general practice. *Med J Aust* 1999;171:60-61.
5. Stephenson J, Imrie J. Why do we need randomised controlled trials to assess behavioural interventions? *BMJ* 1998;316:611-613.
6. Puffer S, Torgerson DJ, Watson J. Evidence for risk of bias in cluster randomised trials: review of recent trials published in three general medical journals. *BMJ* 2003;327:785.
7. Medical Research Council. A framework for development and evaluation of RCTs for complex interventions to improve health. London: Medical Research Council, 2000;18.

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