Table 65: Clark 2008[97]

Study	Clark 2008[97]
Study type	RCT (Patient randomised; Crossover: Insufficient).
Number of studies (number of participants)	One (n=10)
Countries and setting	Conducted in Australia; Setting: Hospital.
Line of therapy	Not applicable.
Method of assessment of guideline condition	Unclear method of assessment/diagnosis.
Stratum	Overall.
Subgroup analysis within study	Not applicable.
Inclusion criteria	People over the age of 18 years with an expectation that the terminal phase of illness (defined as the last 48-72 hours of life) would occur during the admission.
Exclusion criteria	People already participating in another trial, people unwilling to discuss the potential of death, people without family members who could also provide consent, and people with known hypersensitivity to the intervention drugs.
Age, gender and ethnicity	Age - Median (range): 79 years (63 - 88). Gender (M:F): 3/7. Ethnicity:
Extra comments	All participants had advanced cancer (n = 6 gastrointestinal, n = 2 haematological, n = 1 breast, n = 1 prostrate).
Indirectness of population	No indirectness.
Interventions	(n=21) Intervention 1: Anti-muscarinic - Hyoscine hydrobromide. Hyoscine hydrobromide 400 mcg subcutaneously. Duration Injections at 30 minutes, 1 hour, 4 hours, and 6 hours. Concurrent medication/care: In conjunction with usual care which included non-pharmacological approaches (such as re-positioning). (n=21) Intervention 2: Somatostatin analogue - Octreotide. Octreotide 200 mcg subcutaneously. Duration Injections at 30 minutes, 1 hour, 4 hours, and 6 hours. Concurrent medication/care: In conjunction with usual care which included

	non-pharmacological approaches (such as re-positioning).
Funding	Funding not stated.
RESULTS (NUMBERS ANALYSED) AND RISK OF BIAS FOR COMPARISON: HYOSCINE HYDROBROMIDE versus OCTREOTIDE Protocol outcome 1: Subjective or objective improvement in respiratory secretions at hours/days - Actual outcome: Intensity of noisy breathing (none, mild, moderate, severe, very severe) at the time of each injection; Group 1: 2/5, Group 2: 2/5; Risk of bias: High; Indirectness of outcome: No indirectness.	
Protocol outcomes not reported by the study	Quality of life at hours/days; Hospitalisation at hours/days; Subjective ratings from people on distress related to noisy breathing /respiratory secretions at hours/days; Sedation (patient-rated, clinician-rated, carer-rated) at hours/days; Adverse events (particularly paradoxical agitation, failure to expectorate, dry mouth at hours/days; Subjective ratings from informal carers' on distress relating to noisy breathing/respiratory secretions at hours/days; Hydration status at hours/days; Length of survival at hours/days; Length of stay at hours/days.