Case management in patients with Amyotrophic Lateral Sclerosis and their caregivers

No registrations found.

Ethical review	Not applicable
Status	Recruiting
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON21038

Source NTR

Brief title ALS-case management

Health condition

Amyotrophic Lateral Sclerosis, ALS

Sponsors and support

Primary sponsor: Netherlands ALS Centre Amsterdam, Utrecht, and Nijmegen **Source(s) of monetary or material Support:** ZonMW (Palliative Care, 11500008)

Intervention

Outcome measures

Primary outcome

Quality of life (ALSAQ-40)

Secondary outcome

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Patient:

- ALS specific symptomatology (e.g. fatigue, stiffness/spasticity, pain, breathing difficulty, cramps, sialorrhia: ordinal scale score)

- Delivery time of aids and adaptations (recording time procedure request-delivery).

- Actualisation of a PEG catheter and a meeting at the CTB (recording of the duration of the procedure issue-actualisation).

- Restrictions in activities (ALSFRS-R)
- Restrictions in autonomy and participation (IPA)

Caregiver:

- Caregiver burden (CSI).

Patient and caregiver:

- Quality of care (Quality of care questionnaire MITTZ)
- Depression and Anxiety (HADS)

Study description

Background summary

Previous research has shown that the quality of care for patients with ALS is insufficient, especially the collaboration of the various disciplines, timely delivery of the necessary aids and adaptations, the high frequency of unsatisfactorily treated, but well treatable symptoms and that the caregivers' total burden is high.

Case management appears to be the organisational solution. The case manager may provide a better symptom control since the coordinating and steering function leads to early interventions and early solutions to problems. In a randomized controlled trial the effectiveness of case management during 1 year on the quality of life of ALS-patients and the caregiver burden will be investigated.

Study objective

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Case-management in ALS improves quality of life of ALS-patients and reduces the caregiver burden.

Study design

baseline (T0)

4 months (T1)

8 months (T2)

12 months (T3)

Intervention

For 1 year a case manager maintains contact with ALS patients and their informal caregiver through home visits, telephone calls and e-mail designed to provide information regarding symptoms, aids and adaptations and interventions, to control disease symptoms, and to coordinate care with the person's specialized ALS care teams.

Contacts

Public

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Eligibility criteria

Inclusion criteria

1. Diagnosed as clinically definite, clinically probable, clinically probable lab-supported or clinically possible Amyotrophic Lateral Scelerosis according to the El Escorial criteria.

2. Age > 18 years.

Exclusion criteria

1. Insufficient proficiency in the Dutch language.

2. Cognitive impairment (diagnosed through the cognitive screening test: Mini Mental State Examination < 20).

3. Residence in a hospice/terminal care unit.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Single blinded (masking used)
Control:	Placebo

Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	01-05-2008
Enrollment:	195
Туре:	Anticipated

Ethics review

Not applicable Application type:

Not applicable

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL1225
NTR-old	NTR1270
Other	MEC AMC : 08/083
ISRCTN	ISRCTN wordt niet meer aangevraagd

Study results

Summary results N/A