

Hartfalen in verpleeghuizen.

No registrations found.

Ethical review	Positive opinion
Status	Pending
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON23037

Source

Nationaal Trial Register

Health condition

heart failure, quality of life,

hartfalen, kwaliteit van leven,

Sponsors and support

Primary sponsor: University Maastricht

Maastricht university medical centre, (department cardiology)

Source(s) of monetary or material Support: ZonMw

Intervention

Outcome measures

Primary outcome

1. The prevalence of heart failure in Dutch Nursing homes. The diagnosis of heart failure is based on the decision of the panel;
2. The predictive value to diagnose heart failure in a nursing home with a clinical assessment without using echocardiography and judgment of a panel cardiologists as golden standard is based on the percentage of cases that are diagnosed as heart failure by the NHP without the results of the echocardiogram compared to the same cases assessed by and diagnosed as

heart failure by the panel using the golden standard. The nursing home physician will diagnose heart failure based on the available information about history, physical examination, NT-pro BNP value, ECG, diagnosis, co-morbidity and medication;

3. The current treatment of heart failure in nursing homes compared to the guidelines using the medication prescriptions in the nursing homes;

4. The care dependency and quality of life of nursing home residents with heart failure compared to them with no heart failure;

5. Insight in the course of heart failure after one year follow-up regarding the outcomes: heart failure events, hospital admissions for heart failure and mortality.

Secondary outcome

N/A

Study description

Background summary

Rationale:

Heart failure is an important and increasing problem in older people. The disease affects the experienced quality of life and care dependency negatively. Heart failure is expected to be particularly prevalent in the nursing home population but reliable data about heart failure in this specific population are lacking. Early diagnosis and treatment may lead to improvement of the signs and symptoms and improvement of quality of life; outcomes that are very important also for the nursing home population.

Objective:

The prevalence, diagnosis and management of heart failure in nursing home residents will be investigated. Furthermore we look for the relation between HF versus care dependency and HF versus quality of life in nursing home residents. A one year follow-up is planned to determine whether episodes of heart failure, hospital admissions for heart failure and mortality have occurred.

Study design:

The design of this multicentre study consists of a cross sectional part and a longitudinal part. Data will be collected from actual clinical examinations of nursing home residents (including history, physical examination, ECG, NT-pro BNP marker and echocardiography), patient records and questionnaires. In each resident, all examinations are performed within a period of two weeks. The collected data of the heart failure assessment will be judged by a panel of two cardiologists and a geriatrician.

Study population:

Nursing home residents of five healthcare organizations, who are aged over 65 year and receiving long term somatic or psychogeriatric care.

Main study parameters/endpoints:

The study will lead to a prevalence figure of heart failure in nursing home residents, the insight of the current treatment and course of heart failure in nursing homes and will describe the experienced quality of life and care dependency.

Study objective

The hypothesis is that the prevalence of heart failure is underestimated in Dutch nursing homes. In addition it is hypothesized that residents with heart failure experience a lower quality of life, have a higher degree of care dependency and have severe cognitive impairments.

Study design

1. After inclusion: Extensive clinical examination and questionnaires;
2. Follow-up after one year: Questionnaires.

Intervention

1. Clinical examination of nursing home residents including history, physical examination, ECG, Cardiac markers (NT pro BNP) and echocardiography;
2. Questionnaires: Care dependency scale, Qualidem, SF-12, VAS, MMSE, MDS.

Contacts

Public

Postbus 616
M. Velden, van der - Daamen
Faculty of health, Medicine and Life Sciences
Department of health Care and Nursing Science
CAPHRI
Maastricht 6200 MD
The Netherlands
+31 (0)43 3882458

Scientific

Postbus 616
M. Velden, van der - Daamen
Faculty of health, Medicine and Life Sciences
Department of health Care and Nursing Science
CAPHRI
Maastricht 6200 MD
The Netherlands
+31 (0)43 3882458

Eligibility criteria

Inclusion criteria

Nursing home residents aged over 65 years and staying on chronic somatic or psychogeriatric wards.

Exclusion criteria

Nursing home residents who receive palliative care and residents admitted for short-time rehabilitation.

Study design

Design

Study type: Observational non invasive

Intervention model:	Parallel
Allocation:	Non controlled trial
Control:	N/A , unknown

Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	15-01-2011
Enrollment:	1000
Type:	Anticipated

Ethics review

Positive opinion	
Date:	23-12-2010
Application type:	First submission

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	NL2545
NTR-old	NTR2663
Other	ZonMw / METC : 60-61900-98-303 / NL33281.068.10 ;
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Study results

Summary results

N/A