Evaluation of the Origo prototype for enhancing women's labor & delivery experience.

No registrations found.

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

Summary

ID

NL-OMON23730

Source
NTR

Health condition

-expectations and experience of childbirth
-ambient experience
-support during labour

Sponsors and support

Primary sponsor: MMC
Source(s) of monetary or material Support: MMC

Intervention

Outcome measures

Primary outcome

The primary outcome measure will be maternal quality of life.

Secondary outcome

1. Experiences of the loved ones of the participants;

2. Experiences of the clinical staff;

3. Need for painrelief during labour.

Study description

Background summary

Randomized trial to gain insights into the value of the proposition ‘Origo’ for women and their loved ones, medical staff and care institution.

Study objective

We hypothesise that Origo, an experience design concept that supports the woman during labor in a personal and unobtrusive way by providing real-time breathing support and visualizing progress of labor, will enhance the woman s labor & delivery experience in the hospital by means of ambient experience design (AE).We assume the use of the Origo App and the Origo system in the delivery room will give both patient and her partner more confidence and leads to less fear of childbirth.

Study design

One year duration of the study.

Intervention

Origo, an experience design concept that supports the woman during labor in a personal and unobtrusive way by providing real-time breathing support and visualizing progress of labor. ‘Origo’ consists of an App and a special conditioned delivery room. The App can be used during pregnancy as well as during labor, both at home and in the hospital. Furthermore, the delivery room is equipped with an AE system, which is built on the App with which the woman end her partner are already familiar with. It contains an interactive light animation that is coupled to physiological data obtained by contraction monitoring (which is standard equipment present in any delivery room), and results in a unique memento after the delivery.

Pregnant women will be randomized to the Origo concept or to care as usual.

Contacts

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Eligibility criteria

Inclusion criteria

1. Maternal age ≥ 18 years;

2. Nulliparae;

3. Singleton pregnancy;

4. Planned vaginal delivery;

5. Gestational age beyond 20 weeks;

6. Dutch speaking.

Exclusion criteria

1. High patients (tertiary care)-risk;

2. Known fetal anomaly.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	01-08-2012
Enrollment:	140
Type:	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	NL3329
NTR-old	NTR3490
Other	METC MMC : 1227
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Study results

Summary results

Buitendijk, S.E., (2010) 'Vrouwen moeten zeggenschap terugkrijgen over bevalling. De stem van vroede vrouwen'. Oratie Geneeskunde van mw. prof. dr. S.E. Buitendijk, bijzonder hoogleraar Eerstelijns Verloskunde en Ketenzorg
Ford, R.C. and Myron, D. (2000) Creating Customer-focused Health Care Organizations. Health Care Management Review 25(4), 18-33.
Goodman, P., Mackey, M.C. and Tavakoli, A.S. (2004) Issues and innovations in nursing practice: Factors related to childbirth satisfaction. Journal of Advanced Nursing 46(2), 212-219.
Rijnders, M., Baston, H., Schönbeck, Y., van der Pal, K., Prins, M. Green, J. and Buitendijk, S. (2008) Perinatal factors related to negative or positive recall of birth experience in woman 3 years postpartum in the Netherlands. Birth 35(2), 107-116.