Grensoverschrijdende Online behandeling van Artrose / Beyond borders: e-self-management for knee and/or hip osteoarthritis (dr. Bart - app).

No registrations found.

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

Summary

ID

NL-OMON23951

Source
NTR

Brief title
Dr. Bart - app

Health condition

Osteoarthritis, OA, knee, hip, knee and/or hip OA, knee and/or hip osteoarthritis, artrose, knieartrose, heupartrose, knie- en heupartrose, self management, selfmanagement, ehealth, e-health, Netherlands, Germany, cultural, cultural differences, app, application, physical activity

Sponsors and support

Primary sponsor: Sint Maartenskliniek Nijmegen
Source(s) of monetary or material Support: European Regional Development Fund; Interreg Europe

Intervention

Outcome measures

Primary outcome

Number of consultations in secondary healthcare (e.g. orthopaedic surgeon / rheumatologist) due to OA of the knee and/or hip in the past 6 months.

Secondary outcome

- Health care consumption

- Self-management behaviour

- Physical activity

- Treatment Beliefs in Osteoarthritis

- Physical function in daily living, sport and recreation

- Health status

- Pain

- Illness perception

- Quality of care

- Usability of the app

- Use of the app

Study description

Background summary

Rationale: Osteoarthritis (OA) is highly prevalent in industrialized countries. It is expected that this number will expand through aging and higher BMIs. Since OA is not curable, a rich variety of and non-surgical (conservative) and surgical treatments are available. The American College of Rheumatology (ACR) and European League Against Rheumatism (EULAR) recommend a combination of pharmacological and non-pharmacological modalities (i.e. education, exercise and pain management). As OA is a chronic disease, self-management is of paramount importance. Modern technologies offer the possibility to support self-management, for instance by providing interactive information 24/7, as well as tools to set goals and monitor life-style changes. A wide variety of apps is available for a

variety of chronic diseases (i.e. COPD, Diabetes Mellitus). However, hardly no empirical supported OA apps are available. Therefore, we developed an online self-management app (Dr. Bart) with the aim to enhance self-management and ultimately to optimize non-surgical health care utilization and to reduce secondary health care costs in patients with knee and / or hip OA (KHOA). This app will be implemented simultaneously in the region of Nijmegen (the Netherlands) and Meerbusch (Germany), to allow to examine the influence of cultural differences on the use of self-management. We hypothesize that the app is superior to usual care.

Objective: The primary objective of this study is to investigate the effect of the dr. Bart - app on the number of consultations in secondary healthcare in patients with KHOA in the Netherlands in the six month period of follow up. Secondary objectives are: to examine short and long term (3 & 6 months) effects on clinical outcomes attributable to the app; to observe the use and usability of the app; to explore differences in use, usability and clinical outcomes between the Netherlands and Germany.

Study design: Randomized Controlled Trial (RCT), with two arms in the Netherlands. To study differences in use, usability and clinical outcomes between the Netherlands and Germany we will include a third arm, consisting of patients recruited in Germany, all receiving the app.

Study population: Residents of the region Nijmegen (Netherlands) and Meerbusch (Germany) of 50 years and over, with self-reported KHOA will be recruited through advertisements in local papers.

Intervention: The intervention consists of the provision of the application “dr. Bart”.

Main study parameters/endpoints: Self-reported number of consultations in secondary healthcare, due to KHOA in the 6 months period of follow up.

Nature and extent of the burden and risks associated with participation, benefit and group relatedness: Participants in the experimental group will be invited to use the app. All participants will receive electronic questionnaires via the software application Castor at baseline, after 3 and 6 months. It will take approximately 30-35 minutes to complete those questionnaires.

Risk attributable to use of the app is not foreseen.

Study design

Assessments will be performed at baseline and after 3 and 6 months via internet questionnaires.

Intervention

Dr. Bart - application

Contacts

Public
Tim Pelle
Hengstdal 3

Ubbergen
The Netherlands
024 365 9148
Scientific
Tim Pelle
Hengstdal 3

Ubbergen
The Netherlands
024 365 9148

Eligibility criteria

Inclusion criteria

- ≥50 years of age

- Self-reported OA of the knee and/or hip

- Able to read, write and sufficiently comminucate in Dutch or German language, where appropiate

- Possession of smartphone or tablet and willing to download the Dr. Bart app on one or more devices

- Having an email address

Exclusion criteria

- Being wheelchair bound

- Knee and / or hip replacements

- Scheduled for replacement surgery in the next 6 months

- Diagnosis of inflammatory rheumatic disease

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Single blinded (masking used)
Control:	N/A , unknown

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	06-12-2017
Enrollment:	483
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	NL6505
NTR-old	NTR6693
Other	Interreg Europe, European Union; European Regional Development Fund : 2017-3625

Study results