

Gestructureerd farmacotherapie overleg: Een kosteneffectief middel om naleven van medicamenteuze richtlijnadviezen te bevorderen?

No registrations found.

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

Summary

ID

NL-OMON25825

Source

NTR

Health condition

sleepdisorders
behavioral problems
dementia

Sponsors and support

Primary sponsor: Instituut voor Verantwoord Medicijngebruik, Utrecht
VU medisch centrum, Amsterdam

Source(s) of monetary or material Support: ZonMW

Intervention

Outcome measures

Primary outcome

Percentage of residents of the physicians/nursing homes of pharmacotherapy counselling

groups that using:

1. Hypnotics;
2. Antipsychotics.

Secondary outcome

1. Scores on other prescription indicators (chosen drug, dosage, treatment time) of residents of participating pharmacotherapy counselling groups;
2. Experienced workload/work satisfaction of participating pharmacotherapy counselling group members;
3. Falls, hospital admissions and mortality of residents of participating pharmacotherapy counselling groups;
4. Costs (hospital admissions, falls, medication, intervention);
5. Use of other psychotropics drugs by residents of participating pharmacotherapy counselling groups;
6. Use of physical restraints by residents of participating pharmacotherapy counselling groups.

Study description

Background summary

IMPLEMENTATION OBJECTIVE(S)/RESEARCH QUESTION(S):

The aim is to study if working with quality circles by pharmacotherapy counselling groups (PCGs) improves guideline adherence to the prescription of hypnotics and antipsychotics in nursing homes. In general, these classes of drugs are used too often and too long. The main research questions are: What is the effect of the implementation of quality circles as a working method in nursing home PCGs on guideline adherence to the prescription of hypnotics and antipsychotics? Is it cost-effective compared to pharmacotherapy counselling groups 'as usual'?

DESIGN, STUDY POPULATION:

The study will be a cluster randomized trial with 26 PCGs consisting of physicians and

pharmacists. Both the intervention and the control group will consist of 13 PCGs.

INTERVENTION TO BE IMPLEMENTED:

The pharmacotherapy paragraph about hypnotics and antipsychotics of the guideline for problem behaviour.

IMPLEMENTATION ACTIVITIES/STRATEGY:

For a year PCGs will be trained and intensively supported to use quality circles during their meetings. Nursing staff will participate in the intervention PCGs.

OUTCOME MEASURES & PROCESS INDICATORS:

Guideline adherence will be measured by prescription indicators. Primary outcome: percentage of residents using hypnotics and antipsychotics. An extensive process evaluation will be carried out to determine facilitators and barriers for the implementation of quality circles.

SAMPLE-SIZE CALCULATION/DATA ANALYSIS:

Based on a mean PCG-size of 10 physicians, two times 13 PCGs are necessary. Multilevel logistic regression and generalize estimated equations will be used for statistical analyses of the outcomes.

ECONOMIC EVALUATION:

An economic evaluation will be carried to study if the implementation of quality circles in PCGs is a cost-effective strategy to implement the pharmacotherapy paragraphs of the guideline for problem behaviour.

TIME SCHEDULE:

The study will take 3.5 years:

1. 0-12 months: Recruitment, development of educational material and indicators;
2. 13-30 months: Implementation of quality circles in PCGs, measurements;
3. 31-42 months: Analysis, writing papers, knowledge transfer.

Study objective

Implementation of pharmacotherapy audit meetings (PTAMs) using quality circles will increase guideline adherence in nursing homes and result in improved quality of psychotropics-prescription in nursing homes.

Study design

Baseline, 3 months, 6 months and 1 year.

The time points we are eventually interested in are baseline and 1 year.

Intervention

Implementation of working with quality circles at level 3 or 4 in already existing pharmacotherapy audit meetings (PTAMs).

PTAMs of the intervention group will be trained and intensively supported in working with quality circles during their meetings for one year. Quality circles are defined as a cyclic method in which evidence-based information about prescription is provided to the participants and feedback on individual prescription is given. Participants discuss this information, reflect on the prescription data and make general treatment agreements. In consecutive meetings the results are evaluated by using prescription data. This can result in adjusted treatment agreements if target goals are not achieved. PTAMs using quality circles can be seen as a multifaceted implementation strategy. In this study the national guideline for problem behaviour of the Dutch Society of Elderly Care Physicians (Verenso) will be the source for evidence-based information about prescription of hypnotics and antipsychotics.

In PTAMs participate the pharmacist, all physicians and two representatives of the nursing staff of a nursing home organisation.

The control intervention is the 'usual way' of PTAMs: Not using working with quality circles or working with quality circles at a very low level (level 1 or 2).

Contacts

Public

Department of Nursing Home Medicine, the EMGO Institute for Health and Care Research, VU
University Medical Center
De Boelelaan 1109 / 9A-03
Martin Smalbrugge
Amsterdam 1081 HV
The Netherlands
+31 (0)20 4449686

Scientific

Department of Nursing Home Medicine, the EMGO Institute for Health and Care Research, VU
University Medical Center
De Boelelaan 1109 / 9A-03
Martin Smalbrugge
Amsterdam 1081 HV
The Netherlands
+31 (0)20 4449686

Eligibility criteria

Inclusion criteria

Pharmacotherapy audit meetings (PTAMs) in Dutch nursing homes not using quality circles or working with quality circles functioning at level 1 or 2.

Exclusion criteria

Pharmacotherapy audit meetings (PTAMs) already working with quality circles and functioning on level 3 or 4.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel

Allocation:	Randomized controlled trial
Masking:	Single blinded (masking used)
Control:	Active

Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	01-01-2011
Enrollment:	26
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	NL2672
NTR-old	NTR2800
Other	ZonMw : 171103007
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Study results

Summary results

N/A