

The Dutch national inhaler care pathway for patients with asthma/COPD: a hybrid type III implementation study

Published: 17-06-2021

Last updated: 08-11-2023

The aim of this study is to identify barriers and facilitators for successful implementation of the care pathway, to ultimately inform national scale-up of the pathway.

Ethical review	Positive opinion
Status	Recruitment stopped
Health condition type	Respiratory disorders NEC
Study type	Observational non invasive

Summary

ID

NL-OMON26085

Source

Nationaal Trial Register

Brief title

LAN inhaler pathway

Condition

- Respiratory disorders NEC

Synonym

Chronic Obstructive Pulmonary Disease, Asthma

Health condition

asthma, COPD

Research involving

Human

Sponsors and support

Primary sponsor: Lung Alliance Netherlands (LAN) and University Medical Center Groningen

Source(s) of monetary or material Support: Multiple industry sources

Intervention

- Other intervention

Explanation

Outcome measures

Primary outcome

Barriers and facilitators for optimal implementation of the national inhaler care pathway

Secondary outcome

Clinical outcomes: relievers/controller ratio, medication adherence, uniformity in inhaler devices, exacerbations. Qualitative outcomes: Implementation of inhaler care pathway elements, agreements between healthcare providers made, time investment, patient satisfaction, healthcare provider satisfaction

Study description

Background summary

Strategies to enhance inhaler technique and medication adherence to inhaled respiratory medication have been proven effective and cost-effective. In 2019, the Lung Alliance Netherlands (LAN) designed a national multidisciplinary care pathway for patients using inhaled medication by integrating these strategies. Yet, optimal implementation remains to be uncovered.

Study objective

The aim of this study is to identify barriers and facilitators for successful implementation of the care pathway, to ultimately inform national scale-up of the pathway.

Study design

This is a hybrid type III implementation study

Intervention

Inhaler care pathway implementation

Contacts

Public

University Medical Center Groningen
Job Van Boven

+31503617893

Scientific

University Medical Center Groningen
Job Van Boven

+31503617893

Eligibility criteria

Age

Adults (18-64 years)

Adults (18-64 years)

Elderly (65 years and older)

Elderly (65 years and older)

Inclusion criteria

(i) patients ≥ 18 years having asthma and/or COPD (ii) using inhaled medication for at least three months; (iii) understanding the Dutch language

Exclusion criteria

< 18 years; not understanding Dutch

Study design

Design

Study phase:	N/A
Study type:	Observational non invasive
Intervention model:	Single
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	N/A , unknown
Primary purpose:	Health services research

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	01-07-2021
Enrollment:	500
Type:	Actual

IPD sharing statement

Plan to share IPD: No

Ethics review

Positive opinion	
Date:	12-11-2020
Application type:	First submission
Review commission:	nWMO adviescommissie UMC Groningen

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	NL9560
Other	METC UMCG : METc 2020/593

Study results

Results posted: 06-11-2023

Actual enrolment: 602

Summary results

At least 104 general practitioners, 33 pulmonologists and 33 pharmacies were involved within the four pilot regions. A total of 602 patient questionnaires were completed, of which 159 were new patients and 432 patients with follow-up inhalation medication. After three rounds, there seemed to be tentative regional changes and improvements. Facilitators for good implementation were the set-up of the multidisciplinary training courses, and the interim measurements and associated feedback. The barriers of the implementation were: making and maintaining good cooperation agreements, and embedding the care pathway in the daily routine care. The care pathway has not yet been fully implemented within the pilot regions, but it has been well received so far: The regions have received training, multidisciplinary working groups have been set up, work agreements have been made, and local (and regional) changes have been made. Embedding the care pathway is the biggest bottleneck in the regions.

Baseline characteristics

N=602 patients included. 40.3% male; mean age (SD) 59.7 years \pm 17.2; Diagnosis: asthma: 43.6%; COPD: 31.7%; ACO: 15.5%;

Participant flow

Not applicable (single visit)

Adverse events

Not applicable

Outcome measures

Facilitators for good implementation were the set-up of the multidisciplinary training courses, and the interim measurements and associated feedback. The barriers of the implementation were: making and maintaining good cooperation agreements, and embeddin

First publication

20-04-2023