The effectiveness of health check-ups for promoting healthy behavior: a quasi-experimental study.

No registrations found.

Ethical review Not applicable

Status Pending

Health condition type -

Study type Interventional

Summary

ID

NL-OMON26736

Source

Nationaal Trial Register

Brief title

The EVA-trail

Health condition

Prevention of obesity, diabetes and cardiovascular disease (Preventie van obesitas/overgewicht, diabetes, hart-en vaatziekten).

Sponsors and support

Primary sponsor: Academic Medical Center, University of Amsterdam

Source(s) of monetary or material Support: ZonMw

Intervention

Outcome measures

Primary outcome

Self-assessed healthy behavior:

- 1. Physical activity;
- 2. Dietary intake;
- 3. Tobacco use;
- 4. Alcohol consumption;
- 5. Relaxation.

Secondary outcome

Stage of behavioural change; For the explanation of the effect on shift in stage of change, determinants such as risk perception, attitudes, subjective norms and self-efficacy will be measured.

Study description

Background summary

The majority of western European populations do not meet current recommendations for healthy behaviour, in terms of non-smoking, sufficient physical exercise, and a healthy diet. These behaviours account for a substantial part of the total burden of disease. Promoting healthy behaviour has therefore become a central goal of public health policies. In the Netherlands, health check-ups on health behaviour are increasingly being offered as a strategy to obtain this goal. The core of these health check-ups is a risk assessment. The aim of this is to increase the awareness of participants on their health risks influenced by their personal behaviour. Awareness of people's own risk (or susceptibility) is acknowledged as an important factor for behavioural change. Given this, health check-ups can be considered as a promising strategy to prepare people for engaging into health promotion, including organised preventive programs. Although promising, the evidence on the effectiveness of health checkups for promoting healthy behaviour is yet limited. The wide availability and use of health check-ups in combination with the lack of evidence concerning their impact on health behaviour raises the need for the present study. The aim of this study, is to evaluate, in a guasi-experimental design, the effectiveness of a health check-up for promoting healthy behaviour, including smoking, dietary intake, physical activity, alcohol consumption and relaxation. The setting in which this will be studied is that of companies. The health check-up to be evaluated is the Prevention Compass of NIPED. In order to understand the factors that explain its effectiveness, we will also evaluate the level of participation of relevant subgroups in the health check-up, as well as the behavioural responses to the health risk assessment. Finally, we will assess whether and why the effectiveness varies according to subgroups, with a special attention to participants with an adverse risk profile, including those in lower educational groups. The study will be set up a quasi-randomised controlled trial in which a comparison will be made between participation in Prevention Compass (intervention group,

n=1750) and no intervention (control group, n=1750). Both groups are formed out of employees of companies that embedded the PreventionCompass in their corporate health management strategies. The companies involved invite employees to participate in the programme in different time clusters. The first half of the clusters will serve as intervention group and the second half as control group. For both the control group as the intervention group data will be collected at baseline and after six months. For the intervention group the baseline measurement (T0) is the health check-up it self. Follow-up measurements for the intervention group will be done by sending a short electronic questionnaire with health behaviour items derived from the questionnaire of the health check-up six months after participation (T1) in the health check-up. For the control group it is the other way around. Control group members will receive a short electronic questionnaire focussing on health behaviour six months before invitation to the health check-up (T0). The actual health checkup, six months later, will then serve as follow-up measurement (T1). After six month, the change in health behaviour between T0 and T1 will be assessed and compared in both the intervention and control group. The results of this study will increase our insight into the effectiveness of health check-ups for promoting healthy behaviour, as well as into the conditions which are important for optimizing their effectiveness. This may in the long term provide an important contribution to the promotion of healthy behaviour in the Dutch population.

Study objective

Participation in a health check-up results in a statistically significant positive change in health-related behaviour after 6 months.

Study design

Baseline measurement and follow-up measurement after 6 months.

Intervention

The interventiongroup will participate in the PreventionCompass at baseline, and receive a short electronic lifestyle questionnaire after 6 months. The controlgroup will receive the short electronic lifestyle questionnaire at baseline, and will participate in the PreventionCompass six months later. (Cross-over design).

The PreventionCompas is an health check that consists of a questionnaire on health behaviour and socio-demographics and measurements of length, weight, waist, blood pressure and cholesterol. Based on both the responses to the questionnaire and the measurements, risk profiles are calculated for each participant. These include the risk of hypertension, hypercholesterolemia, diabetes, chronic kidney disease, and obesitas. Participants receive on a secured webpage a colour code for each risk profile: (1) green (average risk), (2) orange (moderate risk) and (3) red (high risk). Based on the magnitude of the risk, participants can be directed towards preventive interventions or a physician.

Randomisation over the intervention and controlgroup over waitingtime.

Contacts

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Eligibility criteria

Inclusion criteria

- 1. Employees, working at different hierarchical levels and with different educational background;
- 2. Intervention- and controlgroup are formed out of employees of companies that embedded the PreventionCompass in their corporate health management strategies;
- 3. Aged 18 years or older and being literate enough to read and understand simple WebPages in the Dutch language.

Exclusion criteria

N/A

Study design

Design

Study type: Interventional

Intervention model: Crossover

Allocation: Randomized controlled trial

Masking: Open (masking not used)

Control: Active

Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 15-03-2010

Enrollment: 3500

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 NL2253 NTR-old NTR2379 Register ID

Other ZonMW: 200310006

ISRCTN wordt niet meer aangevraagd.

Study results

Summary results

N/A