

# PneuMonitor - Comfort and prognosis in patients with pneumonia and dementia

No registrations found.

<b>Ethical review</b>	Positive opinion
<b>Status</b>	Recruiting
<b>Health condition type</b>	-
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON26992

### Source

Nationaal Trial Register

### Brief title

PneuMonitor

### Health condition

Dementia, pneumonia

## Sponsors and support

**Primary sponsor:** VU University Medical Center, EMGO+ Institute for Health and Care Research

**Source(s) of monetary or material Support:** The Netherlands Organisation for Scientific Research (NWO), the Hague; Innovational Research Incentives Scheme, a career award to JTS (Grant number Vidi 91711339).

## Intervention

## Outcome measures

### Primary outcome

Suffering (Discomfort: Discomfort Scale – Dementia of Alzheimer Type (DS-DAT); Pain: Pain Assessment In Advanced Dementia (PAINAD); comfort: End Of Life in Dementia – Comfort

Assessment in Dying (EOLD-CAD), respiratory difficulty: Respiratory Distress Observation Scale (RDOS)

## **Secondary outcome**

Consciousness and survival

# **Study description**

## **Background summary**

Many people in western countries currently die with dementia. In up to two-thirds of these patients, pneumonia is the terminal event. Earlier work has indicated severe suffering, along with under treatment of symptoms of the pneumonia. Comfort care is appropriate when death is near, but prognostication is difficult.

The PneuMonitor study examines whether suffering in patients with dementia and pneumonia can be reduced by the implementation of an evidence and consensus based practice guideline for optimal symptom relief. This practice guideline was developed using a Delphi study, and consists of a checklist that lists symptoms of pneumonia, observational instruments for dyspnea and pain, and the core guideline that provides information about treatments to relieve symptoms of pneumonia. Matched pairs of thirty-two nursing homes that participated in the study (matched by location, number of psycho geriatric beds and baseline DS-DAT scores) were randomly assigned (cluster-randomization) to the control (usual care) or the intervention group. Regular independent observations for discomfort, pain and respiratory difficulty are performed from diagnosis of pneumonia until cure or death (within 14 days) to examine suffering.

## **Study objective**

Implementation of a practice guideline for optimal symptom relief in Dutch nursing homes will reduce suffering in patients with dementia and pneumonia.

## **Study design**

Outcomes discomfort, pain and respiratory difficulty and consciousness: observations (when possible) twice daily on the day of diagnosis pneumonia (day 0) and day 1. Daily from day 2 until day 10, and one last time on day 13 or 14 or 15. Survival: minimum 3 months, maximum 3.5 years.

## **Intervention**

A practice guideline for optimal symptom relief based on evidence and consensus among national and international experts.

## Contacts

### Public

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### Scientific

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## Eligibility criteria

### Inclusion criteria

Nursing home residents who reside on a psycho geriatric ward and develop a pneumonia according to clinical judgement (pneumonia most likely diagnosis)

### Exclusion criteria

None

## Study design

## Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Non controlled trial
Masking:	Single blinded (masking used)
Control:	Active

## Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	01-01-2012
Enrollment:	613
Type:	Anticipated

## Ethics review

Positive opinion	
Date:	10-03-2015
Application type:	First submission

## 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	NL4731

**Register**

NTR-old

Other

**ID**

NTR5071

NWO : 91711339

## Study results

**Summary results**

van der Maaden T, van der Steen JT, de Vet HC, Achterberg WP, Boersma F, Schols JM, van Berkel JF, Mehr DR, Arcand M, Hoepelman AI, Koopmans RT, Hertogh CM. Development of a practice guideline for optimal symptom relief for patients with pneumonia and dementia in nursing homes using a Delphi study. *Int J Geriatr Psychiatry*. 2015 May;30(5):487-96