

Current Dutch practice on caesarean sections: Identification of barriers and facilitators for optimal care.

No registrations found.

| | |
|------------------------------|----------------------------|
| Ethical review | Positive opinion |
| Status | Pending |
| Health condition type | - |
| Study type | Observational non invasive |

Summary

ID

NL-OMON29042

Source

NTR

Brief title

SIMPLE (Caesarean section implementation study.)

Health condition

Caesarean section/ keizersnede
Implementation guidelines/ Implementatie richtlijnen.

Sponsors and support

Primary sponsor: Maastricht University Medical Centre (MUMC), IQ Healthcare Nijmegen.
Source(s) of monetary or material Support: zonMW: The Netherlands Organisation for Health Research and Development

Intervention

Outcome measures

Primary outcome

Adherence to the quality indicators, extracted from the guideline recommendations and the

number of preventable CS.

Secondary outcome

1. Dutch practice as compared to international data (Robson criteria);
2. Barriers and facilitators to perform a CS;
3. External validation of VBAC prediction model.

Study description

Background summary

Caesarean (CS) delivery rates continue to increase worldwide. In the past 20 years the CS rate in the Netherlands increased from 5 to 15%. CS have no clear benefit for overall neonatal outcome and are associated with higher maternal complications and high costs. Dutch guidelines offer clear recommendations on factors that have a direct effect on the decision to perform a CS. This study aims to provide insight into current adherence of Dutch gynaecologists to these guideline recommendations. Moreover, facilitators and barriers for guideline (non)-adherence are studied and a tailored implementation strategy will be developed and tested in a feasibility study.

The current Dutch care will be studied in 20 hospitals (N=80 gynaecologists). After the development of quality indicators 1000 files on the performed CS are analyzed regarding the adherence to the guideline recommendations. To get insight into Dutch practices compared to international data, basic obstetrical data will be extracted from the delivery database. A barrier analysis will be carried out based on the results of the current care study. Two groups of hospitals will be identified in the upper and lower extremes of the 'adherence distribution': 5 hospitals with the lowest and 5 hospitals with the highest adherence scores. Factors that determine the decision to perform a CS or not (barriers and facilitators) will be analyzed in both groups using semi-structured interviews among 15-20 health care professionals and 15-20 patients. A questionnaire will be used to study the 'prevalence' of these factors among all obstetric gynaecologists in the Netherlands and among 200 experienced patients.

Based on the outcomes of the current care study and the barrier analysis, an implementation strategy will be developed and tested. The study will be performed in 4 hospitals where the effect of the implementation strategy; the adherence to the developed indicators will be measured. A process evaluation will be performed to study the experiences of the clinicians and patients with this strategy. A cost analysis of the tested implementation strategy will

take place.

Study objective

There is incomplete adherence to the recommendations from the guidelines on caesarean section among Dutch gynaecologists.

Study design

N/A

Intervention

Current care study: retrospective observational study.

Barrier and facilitator analysis: focus group interviews among healthcare professionals and caesarean section patients.

Contacts

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Eligibility criteria

Inclusion criteria

Previous caesarean section in a 3-4 month period.

Exclusion criteria

1. Fetal congenital malformalities;
2. Fetal death prior to delivery;
3. Duration of pregnancy less than 24 weeks of gestation.

Study design

Design

| | |
|---------------------|---------------------------------|
| Study type: | Observational non invasive |
| Intervention model: | Parallel |
| Allocation: | Non-randomized controlled trial |
| Masking: | Open (masking not used) |
| Control: | N/A , unknown |

Recruitment

| | |
|---------------------------|-------------|
| NL | |
| Recruitment status: | Pending |
| Start date (anticipated): | 01-03-2010 |
| Enrollment: | 1000 |
| Type: | Anticipated |

Ethics review

| | |
|-------------------|------------------|
| Positive opinion | |
| Date: | 05-07-2010 |
| 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 | NL2333 |
| NTR-old | NTR2439 |
| Other | zonMW : 17100.3006 |
| ISRCTN | ISRCTN wordt niet meer aangevraagd. |

Study results

Summary results

N/A