

# Self-management and congestive heart failure: a randomized controlled trial to improve health-behavior and health-related quality of life by increasing self-efficacy expectancies in congestive heart failure patients.

No registrations found.

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

## Summary

### ID

NL-OMON29524

### Source

Nationaal Trial Register

### Brief title

N/A

### Health condition

Congestive heart failure

## Sponsors and support

**Primary sponsor:** CAPHRI, The Research Institute of the University Maastricht

**Source(s) of monetary or material Support:** Netherlands Heart Foundation, University Hospital Maastricht (Profileringfonds, Administrative Board)

## Intervention

## Outcome measures

### Primary outcome

1. Self-efficacy expectancies:
  - a. General expectancies: General Self-Efficacy Scale (GSES);
  - b. Cardiac expectancies by scale Sullivan et al. (1998);
2. Perceived control/ mastery by Mastery scale (Pearlin & Schooler 1978).

### Secondary outcome

1. Quality of life:
  - a. General: RAND/SF-36;
  - b. CHF-specific: Kansas City Cardiomyopathy Questionnaire (KCCQ);
  - c. Symptoms of anxiety/ depression: Hospital Anxiety & Depression Scale (HADS);
2. Health behavior:
  - a. Life style;
  - b. Physical activity level;
  - c. Self-care behavior (European Heart Failure Self-Care Behavior Scale);
3. Health care utilization (number consultations of cardiologist/ nurse specialist, hospitalization days etc.)

In addition, the following variables are assessed with respect to the process evaluation: performance according to protocol, attendance, overall adherence per course session/ adherence with regard to home work assignments, opinions about the intervention (participants + course leaders) etc.

## Study description

### Background summary

This study comprises both an effect and a process evaluation of the into Dutch translated "Chronic Disease Self-Management Program" among congestive heart failure patients. The self-management course, developed by Lorig and colleagues (Stanford University), has been broadly evaluated and implemented in the USA. In the present study the course is led by 2 trained course leaders (nurse specialist + congestive heart failure patient). Effectiveness of the Dutch version among congestive heart failure patients is assessed in a RCT-design with 1-year follow-up.

### **Study objective**

1. Self-efficacy expectancies may increase by the "Chronic Disease Self-Management Program" in congestive heart failure intervention patients as compared to controls;
2. These higher levels of self-efficacy expectancies contribute to health behavior, and will decrease demoralization (depressive symptoms, feelings of anxiety) and functional disability and increase levels of quality of life.

### **Study design**

N/A

### **Intervention**

1. Patients in the intervention group attend a protocolled self-management group course (6 weekly sessions of 2,5 hours per session);
2. Patients assigned to the control group received usual care.

## **Contacts**

### **Public**

University Maastricht (UM), Faculty of Health Sciences, Department of Health Care Studies,  
Section of Medical Sociology,  
P.O. Box 616  
Esther S.T.F. Smeulders  
Maastricht 6200 MD  
The Netherlands  
+31 (0)43 3884183

### **Scientific**

University Maastricht (UM), Faculty of Health Sciences, Department of Health Care Studies,  
Section of Medical Sociology,  
P.O. Box 616  
Esther S.T.F. Smeulders  
Maastricht 6200 MD

## Eligibility criteria

### Inclusion criteria

1. Extent of congestive heart failure (CHF): systolic CHF; LVEF<40% (NYHA 2-3) or diastolic CHF (NYHA 2-3 + additional hospital admission 'Decompensatio Cordis' after being diagnosed with CHF);
2. Diagnosis CHF at least 3 months ago to include only stable patients (an additional 3 months before the start of the intervention sums up to 6 months);
3. Ability to understand/write/speak Dutch.

### Exclusion criteria

Participation in other scientific research.

## Study design

### Design

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

### Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	15-12-2003
Enrollment:	360

Type:

Actual

## Ethics review

Positive opinion

Date:

21-10-2005

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	NL427
NTR-old	NTR467
Other	: NHS, nr. 2002B005
ISRCTN	ISRCTN88363287

## Study results

### Summary results

N/A