

Assessment and Geriatric Evaluation in Different Hospitals of elderly patients with Heart failure

Published: 22-09-2006

Last updated: 20-05-2024

To determine the characteristics and geriatric comorbidities (such as cognitive disorders, mood disorders, mobility disorders, functional decline, caregiverburden) of heart failure patients aged 70 years and over at heart failure outpatient clinic.

Ethical review	Approved WMO
Status	Pending
Health condition type	Other condition
Study type	Observational non invasive

Summary

ID

NL-OMON30176

Source

ToetsingOnline

Brief title

AGED-HF study

Condition

- Other condition
- Heart failures
- Dementia and amnestic conditions

Synonym

a disorder in which the heart loses its ability to pump blood efficiently, heart failure

Health condition

geriatrische comorbiditeit

Research involving

Human

Sponsors and support

Primary sponsor: Universitair Medisch Centrum Sint Radboud

Source(s) of monetary or material Support: eigen afdeling

Intervention

Keyword: aged, comorbidity, dementia, heart failure

Outcome measures

Primary outcome

prevalence, type and severity of cognition disorders

Secondary outcome

Mood measured by GDS

Mobility measured by Tinetti gait and balance test and Time-up and go test

Functional performance measured by GARS and Jamar handdynamometer

Comorbidity measured by CIRS-G

Quality of life measured by MOS-20

Caregiver burden measured by Zarit

Medication by dutch version of Brief medication questionnaire

Use of Health resources by admission to a hospital last year (cardiac and non cardiac causes) and number of visits to the outpatient clinic and reason

Severity of heart failure (NYHA)

Study description

Background summary

Elderly HF patients have more geriatric co-morbidity, such as cognitive and

mood disorders, and disability. This is in contrast to the younger HF population, which has more cardiovascular related co-morbidity such as diabetes and hypertension. The characteristics of elderly HF patients seen by the geriatrician or general physician (GP) are remarkably different from the HF patients as seen by a cardiologist. The HF patients seen by GP*s are in general several years older, are more women, and have a higher ejection fraction compared to cardiology HF patients.

Besides a different pattern of comorbidity also the goal of care in these patients is different. In these elderly not improvement in survival is the primary goal, but improving symptoms, preventing acute exacerbation, independent functioning and enhancement of quality of life. In the near future there will be more elderly patients suffering from heart failure. Therefore it is very important to achieve more information about these elderly heart failure patients with their specific geriatric comorbidities so that intervention programmes can be specifically tailored for elderly heart failure patients.

Study objective

To determine the characteristics and geriatric comorbidities (such as cognitive disorders, mood disorders, mobility disorders, functional decline, caregiverburden) of heart failure patients aged 70 years and over at heart failure outpatient clinic.

Study design

cross sectional, descriptive

Study burden and risks

We estimated that this research takes about three hours for a participant with in that three hours enough moments for a little rest. We use standardised questionnaires, perform measurements of blood pressure, pulse, height and weight. Bloodtest are only performed if this isn't done recently by their own cardiologist. The burden associated with participation consist of a time investment of 3 hours. There are no risks associated with participation.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

aged 70 years and over, confirmed diagnosis of heart failure, BNP>100pmol/l, community dwelling or living in residence for elderly at the start of the study, able to visit the cardiology outpatient clinic, written informed consent

Exclusion criteria

uncertain diagnosis of heart failure, acute disease or acute care needed, dialysis, life-expectancy less than 3 months, no full comprehension and use of dutch language, patients with a documented diagnosis of dementia

Study design

Design

Study type: Observational non invasive

Intervention model: Other

Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Diagnostic

Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	15-09-2006
Enrollment:	300
Type:	Anticipated

Ethics review

Approved WMO	
Application type:	First submission
Review commission:	CMO regio Arnhem-Nijmegen (Nijmegen)

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
CCMO	NL13454.091.06