Registration of attentional function as a predictor of incident delirium

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To assess the potential of a short neuropsychological test measuring attentional variability and vigilance preoperatively in predicting postoperative delirium among elderly non-dementia patients undergoing elective surgery.

Ethical review Approved WMO

Status Recruitment stopped **Health condition type** Encephalopathies

Study type Observational non invasive

Summary

ID

NL-OMON41165

Source

ToetsingOnline

Brief title

RAPID

Condition

- Encephalopathies
- Deliria (incl confusion)

Synonym

delirium, postoperative confusion

Research involving

Human

Sponsors and support

Primary sponsor: Academisch Medisch Centrum

Source(s) of monetary or material Support: ZonMW

Intervention

Keyword: Atttentional function, Delirium

Outcome measures

Primary outcome

Mean preoperative intra-individual reaction time variability among postoperative delirious and non-delirious patients.

Secondary outcome

- Mean preoperative individual accuracy of response among postoperative delirious and non-delirious patients.
- Sensitivity and specificity of a combined index of preoperative intra-individual reaction time variability and accuracy of response in predicting postoperative delirium.

Study description

Background summary

Delirium is a common complication that occurs in various medical conditions. Validated models predicting delirium in individual patients are scarce and existing models tend to focus exclusively on demographic characteristics and comorbid conditions. Previous research has suggested that impairment of attentional function might serve as an early and specific individual predictor of incident delirium. Utilization of a test of attentional function in a clinically easy-to-use way could potentially yield a pathophysiological monitor to identify individual patients at risk of evolving delirium and target future prophylactic treatment.

Study objective

To assess the potential of a short neuropsychological test measuring attentional variability and vigilance preoperatively in predicting postoperative delirium among elderly non-dementia patients undergoing elective

surgery.

Study design

An observational prospective cohort study.

Study burden and risks

There are no risks associated with participation in this study. The burden of participation consists of a small test battery during anaesthetic preassessment at the outpatient clinic, taking approximately an hour. Subjects will have no direct benefit from participating in the study.

Contacts

Public

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

- * Age *70 years
- * Elective surgery

Exclusion criteria

- * Preceding diagnosis of dementia or Clinical Dementia Rating (CDR) *1
- * Language barrier enough to hamper informed consent and testinstructions
- * Serious functional disability of the dominant hand (e.g. palsy, amputation, arthrodesis)

Study design

Design

Study type: Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 04-04-2014

Enrollment: 300

Type: Actual

Ethics review

Approved WMO

Date: 26-03-2014

Application type: First submission

Review commission: METC Amsterdam UMC

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 NL47720.018.14