# Patient and Partner \*Empowerment\* Protocol in Idiopathic Pulmonary Fibrosis

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To evaluate the effect and feasability of a short support program for patients with IPF and their partners. The secondary objective is to explore if hair cortisol, as a measure of chronic stress, is a feasible biomarker for Quality of Life in IPF.

Ethical review	Approved WMO
Status	Recruiting
Health condition type	Lower respiratory tract disorders (excl obstruction and infection)
Study type	Interventional

# Summary

### ID

NL-OMON42031

**Source** ToetsingOnline

Brief title PPEPP

## Condition

• Lower respiratory tract disorders (excl obstruction and infection)

#### Synonym

Idiopathic Pulmonary Fibrosis, scarring of the lung

#### **Research involving** Human

### **Sponsors and support**

**Primary sponsor:** Erasmus MC, Universitair Medisch Centrum Rotterdam **Source(s) of monetary or material Support:** Ministerie van OC&W

### Intervention

Keyword: Idiopathic Pulmonary Fibrosis, Patient support groups, Quality of Life

### **Outcome measures**

#### **Primary outcome**

To evaluate the effect of a short educational program for patients with IPF and their partners on quality of life measured with K-BILD.

#### Secondary outcome

-to explore if hair cortisol values change before and after the program

-to explore if changes in perceived stress and anxiety measured with

questionnaires correlate with hair cortisol values

-to explore if outcomes of the questionnaires focusing on quality of life,

health status, anxiety and depression and stress change before and after the

program.

-to assess if there is there a learning effect evaluated by IPF specific

questions.

# **Study description**

#### **Background summary**

Idiopathic Pulmonary Fibrosis (IPF) is a specific form of pulmonary fibrosis of unknown etiology. IPF has a progressive and irreversible course and the mean survival is 2.5-3.5 years after diagnosis. No curative medication exists and life expectancy is short. At the moment, there is only one registered medicine that appears to slow the disease progression. For a small group of patients, lung transplantation can prolong survival. Therefore, interventions focused on improving Quality of Life are an important aspect of clinical care in IPF. A short support program focusing on education on IPF, psychosocial support and physiotherapy for patients and partners could lead to a better QoL, by improving knowledge about the disease and eliminating uncertainties. Chronic diseases with great impact on QoL are often accompanied by high perceived stress levels. Chronic stress has been associated with high cortisol levels. However, cortisol levels in blood, saliva and urine are highly variable during the day and therefore findings only show real time information. Cortisol levels measured in scalp hair provide a marker for long-term cortisol exposure and are not subject to the limitations of time-point measurements. Using this relatively novel method, chronically increased cortisol has been linked to stress exposure and decreased mental health.

#### **Study objective**

To evaluate the effect and feasability of a short support program for patients with IPF and their partners.

The secondary objective is to explore if hair cortisol, as a measure of chronic stress, is a feasible biomarker for Quality of Life in IPF.

### Study design

Prospective intervention pilot study

#### Intervention

Support program for patients with IPF and their partners.

### Study burden and risks

Participants will be asked to attend 3 afternoons, each with a duration of 3 hours, in the hospital for an educational program. Also, participants will be asked to fill in a set of questionnaires at 4 designated moments. For patients this set consists of 5 questionnaires, for partners this set contains 3 questionnaires. Before and after the program, knowledge about IPF is tested, using 10 IPF specific questions. After the program, a hair sample of approximately 150 hairs (20mg) will be collected from all participants that consented. This will be done in such way that it is not or barely visible where the sample was taken. This procedure will take 5 minutes. Hair samples can be taken during a regular scheduled outpatient clinic visit or the researcher can come to the participators at home. Attending the program, filling in guestionnaires and taking hair samples is not expected to change the course of the disease or cause side effects. The advantage is that patients and partner receive extra education and coaching during these meetings. The participants will have the opportunity to continue the support groups after the program has ended. The control group will be asked to fill in a set of guestionnaires (same as the patients and partners attending the program) at 4 designated moments. Filling in questionnaires is not expected to change the course of the disease or cause side effects.

# Contacts

**Public** Erasmus MC, Universitair Medisch Centrum Rotterdam

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# **Trial sites**

# **Listed location countries**

Netherlands

# **Eligibility criteria**

#### Age

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

### **Inclusion criteria**

For patients only:

- Diagnosis of IPF according to the guidelines of 2011

-Forced Vital Capacity (FVC) >=45% from predicted, and if available diffusion capacity for carbon monoxide (DLCO) >= 25% from predicted;For patients and partners (a partner is defined as a marital partner, family member or other close contact):

-Willing and able to attend three afternoons in the outpatient clinic and to complete questionnaires.

-Able to speak, read and write in Dutch

-Written informed consent

## **Exclusion criteria**

For patients only:

- Estimated life expectancy less than 1 year; For patients and partners (a partner is defined as a marital partner, family member or other close contact)

- Unable to provide informed consent
- History of severe psychiatric disease

- If consent for hair sampling is given: use of steroids (systemic, inhalation, intra articular etc. ) in the past year.

# Study design

### Design

Interventional
Other
Non-randomized controlled trial
Open (masking not used)

Primary purpose: Prevention

### Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	05-11-2014
Enrollment:	48
Туре:	Actual

# **Ethics review**

Approved WMO	
Date:	03-09-2014
Application type:	First submission
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO	
Date:	07-08-2015

Application type: Review commission: Amendment METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

# **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 CCMO **ID** NL48553.078.14