

Effectiveness of a skincare- feedback program in healthcare workers

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The primary objective To assess the effectiveness of an intervention program, consisting of provision of skin care products and regular group feedback, on the skin condition in health care workers The secondary objective To assess whether this...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Epidermal and dermal conditions
Study type	Interventional

Summary

ID

NL-OMON44027

Source

ToetsingOnline

Brief title

Skincare -Feedback Program in healthcare workers

Condition

- Epidermal and dermal conditions

Synonym

handdermatitis, handeczema

Research involving

Human

Sponsors and support

Primary sponsor: Academisch Medisch Centrum

Source(s) of monetary or material Support: Ministerie van OC&W,DEB GROUP,unrestricted grant en AMR

Intervention

Keyword: adherence, handeczema/ hand dermatitis, RCT, skincare

Outcome measures

Primary outcome

Primary study parameter: Hand Eczema Severity Index - score (HECSI -score)

Secondary outcome

Secondary parameter:

- levels of natural moisturizing factor (NMF) (mmol/g protein) in the skin
- consumption of handcream

Study description

Background summary

Workers in Healthcare (HCW) are at high risk for developing occupational hand dermatitis (HD) mainly due to frequent exposure to skin irritants such as detergents, disinfectants, and wearing of occlusive gloves. The one year prevalence of HD among HCW is around 20%, while the life-time prevalence in the general population is 15%. Amongst HCW, nurses are the group at highest risk of HD, with an estimated point prevalence of 12-30%.

Both the socioeconomic burden and the strong impairment of the quality of life of affected persons seem substantial.

Almost 60% of HCW has eczema related sick leave during the first year after notification of disease. The annual costs for occupational skin diseases for medical care, absenteeism and disability pensions are estimated to be €98 million in the Netherlands.

Development of HD results largely from multiple sub-threshold damage of the skin barrier by skin irritants which affect the lipids and structural proteins of the stratum corneum (SC) which is the principal barrier of the skin. E.g. contact with the soaps and organic acids leads to the strong reduction of the levels of the natural moisturizing factors (NMF) in the skin which are crucial for hydration of the skin. A dry skin will further facilitate ingress of skin irritants and allergens leading eventually to the skin inflammation.

Furthermore, a damaged skin is one of the reasons mentioned by HCW as to why they may be discouraged to comply with hand hygiene protocols. Therefore, maintenance of a proper skin barrier in HCW is of crucial importance. Regular

use of skin care products such as emollients and moisturizers has therefore been recommended as an integral part of current prevention programs in various countries. Use of skin care creams has been shown to reduce prevalence of HD in different occupations with increased risk for HD. Despite this, adherence to the use of skin care remains poor among HCW. This is supported by a survey among nurses, which found that only 15% of the 204 respondents reported to apply hand creams after handwashing. In a study among 1355 metal workers, 28% indicated use of hand creams as generally recommended. The reason for poor adherence in these groups is not clear. It is likely that the costs of the hand cream and its accessibility might pose a barrier for their use. Therefore, in the proposed trial the hand cream will be provided and placed at strategic places. Provision of skin care products will be coupled with regular education and group feedback on the electronically monitored skin care consumption. The effectiveness of this intervention will be investigated by comparison of the skin condition in the intervention and control group which will receive only regular education on skin care.

Study objective

The primary objective

To assess the effectiveness of an intervention program, consisting of provision of skin care products and regular group feedback, on the skin condition in health care workers

The secondary objective

To assess whether this intervention program increases the consumption of hand creams

Study design

This is a two-arm, cluster randomized trial, based on departments as the unit of randomization. Wards will be randomly selected to be an intervention or control group.

Intervention

The intervention consists of two elements:

1) provision of protective hand creams and 2) regular group feedback on hand cream consumption

Study burden and risks

Negligible risk. The possibility of a (mild) allergic reaction to an ingredient in the creams is not expected, but can't be totally ruled out, just like other over the counter products.

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

- Informed written consent
- Age between 18-65 years
- exposure to wet work activities
- employment as nurse at the participating wards

Exclusion criteria

Not performing 'wet work' -activities

Study design

Design

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

Primary purpose: Prevention

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	01-05-2016
Enrollment:	544
Type:	Actual

Ethics review

Approved WMO	
Date:	12-02-2016
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

ID: 25684
Source: Nationaal Trial Register
Title:

In other registers

Register	ID
CCMO	NL54372.018.15
OMON	NL-OMON25684