

Drug use Reconsidered in the Elderly using goal Attainment scales during Medication Review - The DREAMeR-study

Published: 22-03-2016

Last updated: 15-05-2024

To investigate whether a clinical medication review, focused on the perceived hindering complaints and personal wishes of the patients regarding their medication, improves health-related quality of life of older persons aged 70 years or older using...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	Interventional

Summary

ID

NL-OMON44034

Source

ToetsingOnline

Brief title

The DREAMeR-study

Condition

- Other condition

Synonym

n.a.

Health condition

alle aandoeningen waarbij farmacotherapie wordt ingezet

Research involving

Human

Sponsors and support

Primary sponsor: SIR Institute for Pharmacy Practice and Policy

Source(s) of monetary or material Support: unconditional grants van: Nederlandse Service Apotheek Beheer BV en KNMP

Intervention

Keyword: drug related problems, elderly, medication review, polypharmacy

Outcome measures

Primary outcome

1. Health-related quality of life (EQ-5D-5L)
2. Number of hindering complaints per patient

Secondary outcome

1. Health care utilization (used for calculating direct medical costs and non-medical costs)
2. The number of drug changes per patient
3. The number and type of ceased drugs after 3 and 6 months
4. The number and type of added drugs after 3 and 6 months
5. The number and type of goals at baseline
6. Scores on the Goal Attainment Scales (GAS) measured after 3 and 6 months
7. The number and type of drug-related problems (DRPs) per patient
8. Implementation rate of the recommendations associated with the DRPs

Study description

Background summary

Polypharmacy is related to the use of inappropriate medication and drug-related problems (DRPs). Clinical medication reviews are increasingly performed to

identify and reduce these DRPs. Studies have shown effects of medication reviews on process- and intermediate outcomes, like DRPs medication changes and cholesterol values. Moreover, studies suggest that medication reviews can improve pain management or reduce falls. However little effect has been shown on major clinical outcomes, like morbidity, mortality, hospital admissions or quality of life.

In particular, quality of life is related to the individual needs of patients in relation to their health and daily problems. The wish to use less medication is common among the elderly with polypharmacy. In this context, more and more research is performed on the topic: "deprescribing" in the elderly. These studies indicate that it is possible to discontinue (preventive) medication in the elderly if the benefits of a drug (e.g. long-term effect) no longer outweigh the disadvantages (e.g. experienced adverse events). Older people often have symptoms, which are not life-threatening, but can be hindering. Such hindering complaints can often be easily treated, by changing a drug for example. In this study, we will focus on the elderly with polypharmacy who experience health problems which are possibly related to the use of medication. Thereby, one or more health related goals will be drafted with the patient.

Study objective

To investigate whether a clinical medication review, focused on the perceived hindering complaints and personal wishes of the patients regarding their medication, improves health-related quality of life of older persons aged 70 years or older using 7 or more drugs.

Study design

The study is a randomized controlled intervention study. Control patients are added to a waiting list and will receive the intervention after 6 months.

Intervention

Patients in the intervention group will directly receive a clinical medication review at the start of the study. Patients in the waiting list group will receive usual care and will be provided with a clinical medication review after 6 months.

Study burden and risks

The risk of damage for the subjects participating in this study is low, because the intervention is already embedded in regular pharmaceutical patient care.

Contacts

Public

SIR Institute for Pharmacy Practice and Policy

Universiteitsweg 99

Utrecht 3584CG

NL

Scientific

SIR Institute for Pharmacy Practice and Policy

Universiteitsweg 99

Utrecht 3584CG

NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

Home-dwelling patients aged 70 years or older, using 7 or more chronic medicines

Exclusion criteria

Persons receiving repeat prescriptions solely from a specialist. (the GP is not the primary caregiver)

Persons with a life expectancy shorter than 6 months.

Persons who had a hospital admission < 1 month before the start of the trial

Persons who already received a medication review in the past 12 months

Study design

Design

Study type:	Interventional
Intervention model:	Other
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Health services research

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	18-04-2016
Enrollment:	750
Type:	Actual

Ethics review

Approved WMO	
Date:	22-03-2016
Application type:	First submission
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)

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: 27932

Source: NTR

Title:

In other registers

Register	ID
CCMO	NL54715.041.15
OMON	NL-OMON27932