

# Daily home monitoring in Idiopathic Pulmonary Fibrosis \* a pilot study to assess feasibility of a home spirometry and eHealth self-management application

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In this study we aim to determine the feasibility of a home monitoring program, consisting of an online tool (IPF-online), home spirometry and online collecting of PROs in patients with IPF.

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	Lower respiratory tract disorders (excl obstruction and infection)
<b>Study type</b>	Observational non invasive

## Summary

### ID

NL-OMON45619

### Source

ToetsingOnline

### Brief title

Home monitoring in IPF

### Condition

- Lower respiratory tract disorders (excl obstruction and infection)

### Synonym

idiopathic pulmonary fibrosis, lung fibrosis

### Research involving

Human

## Sponsors and support

**Primary sponsor:** Longziekten

**Source(s) of monetary or material Support:** Ministerie van OC&W

## Intervention

**Keyword:** e-health, home monitoring, home spirometry, idiopathic pulmonary fibrosis

## Outcome measures

### Primary outcome

Adherence to home monitoring and reproducibility of home spirometry will be measured to assess feasibility.

### Secondary outcome

- Correlation between home spirometry and hospital based measurements of lung function
- Exploratory endpoints are patient satisfaction with the care process and the effect of home monitoring on different parameters of HRQOL.

## Study description

### Background summary

IPF is a chronic disease with progressive scarring of the lung tissue (fibrosis), resulting in a poor prognosis and a devastating impact on the lives of patients and their families. Progressive shortness of breath, cough and fatigue are major factors influencing health-related quality of life (HRQOL) in patients with IPF. Recently two anti-fibrotic drugs became available that slow down disease progression. The availability of effective drugs for this devastating disease has importantly changed daily care and research in IPF. Currently, one of the major challenges in daily IPF care is the evaluation of how individual patients objectively and subjectively experience treatment and benefit from treatment.

The use of information communication technology in health care, also named e-health, is a promising solution to improve the quality of care. E-health

allows remote exchange of data between patients and health care professionals which enables monitoring, research and management of long term conditions. Also communication between patients and physicians, and physicians mutually, becomes more accessible. This creates an opportunity for earlier intervention by health care professionals, which may prevent a hospital admission. This might improve quality of life and reduce costs. Patients easily get access to up-to-date and tailored information, in an interactive way. By providing these tools, patients may better understand their health conditions and become actively involved in management of their own health care, which may lead to a better health status.

We have developed an \*internet tool\* for patients with IPF, providing information and enabling them to keep track of their own symptoms, HRQOL scores, medication use and lung function results.

### **Study objective**

In this study we aim to determine the feasibility of a home monitoring program, consisting of an online tool (IPF-online), home spirometry and online collecting of PROs in patients with IPF.

### **Study design**

This is a prospective, single-centre, non-randomized pilot study

### **Study burden and risks**

Patients will be asked to fill in questionnaires, perform home spirometry and they will have one additional outpatient clinic visit with lung function measurement. There will be no risk and the burden is small. Participants may directly benefit from this study, because patients receive extra information about the disease and have the possibility to communicate with their health care professional at a low threshold. IPF online may promote disease self-management, which may help the patient to feel more in control.

## **Contacts**

### **Public**

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### **Scientific**

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## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

Elderly (65 years and older)

### Inclusion criteria

All patients with a diagnosis of IPF according to the ATS 2011 criteria

### Exclusion criteria

not able to speak, read or write in Dutch

no access to the internet

## Study design

### Design

**Study type:** Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Treatment

## Recruitment

NL  
Recruitment status: Recruitment stopped  
Start date (anticipated): 03-11-2017  
Enrollment: 10  
Type: Actual

## Ethics review

Approved WMO  
Date: 07-08-2017  
Application type: First submission  
Review commission: 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	ID
CCMO	NL60902.078.17