# Tailored advice for a healthy and tasty diet by improved information supply

Published: 22-12-2017 Last updated: 12-04-2024

Primary objective of the study is to evaluate whether using the Voeding Slim Thuis (VST) concept can improve food intake and meal satisfaction in vulnerable community-dwelling older adults. The VST concept comprises tailored dietary advice, a...

Ethical review Approved WMO

**Status** Recruitment stopped

**Health condition type** Other condition **Study type** Interventional

# **Summary**

## ID

NL-OMON46390

#### Source

**ToetsingOnline** 

#### **Brief title**

Food Smart@home

## Condition

Other condition

## **Synonym**

inadequate food intake, nutritional status

#### **Health condition**

ondervoeding

## Research involving

Human

## **Sponsors and support**

**Primary sponsor:** Stichting Wageningen Research

Source(s) of monetary or material Support: Ministerie van Economische

Zaken, Mosadex, NControl

## Intervention

**Keyword:** Dietary intake, ICT system, Older adults, Tailored dietary advice

### **Outcome measures**

## **Primary outcome**

Food intake for different food groups included in the Schijf van Vijf (e.g.

fruits, vegetables, dairy) based on a 3-day food diary

Meal satisfaction as measured with a 3-item questionnaire (10 points structured

line scale).

Both parameters will be evaluated at baseline and at the end of the study.

## **Secondary outcome**

Acceptation and user-friendliness of the ICT-system for composing tailored

dietary advices by the dietician

# **Study description**

## **Background summary**

Prevention and treatment of undernutrition is complex due to interactions between medication, care treatments, diet and wellbeing. Targeted, simple and practical dietary advice, as provided by a dietician, can be helpful to stimulate an adequate food intake among vulnerable community-dwelling older adults

## **Study objective**

Primary objective of the study is to evaluate whether using the Voeding Slim Thuis (VST) concept can improve food intake and meal satisfaction in vulnerable

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community-dwelling older adults. The VST concept comprises tailored dietary advice, a consultation with the dietician and a hot meal service \* all supported by an ICT system. The ICT system is used for: 1-estimating individual dietary needs; 2- monitoring self-reported compliance with advice provided by the dietician and liking of consumed meals; and 3-generating tailored hot meal menus. The secondary objective of the study is to evaluate whether the ICT system in the VST concept facilitates the dietician in composing an effective tailored dietary advice for vulnerable community-dwelling older adults.

## Study design

Randomized controlled intervention study with a duration of 12 weeks.

## Intervention

Participants in the intervention group will receive the VST concept. They receive a tablet-pc on which the ICT system will be installed. Through the system each participant has access to a personal ICT environment where he/she can 1) see the tailored dietary advice as provided by the dietician, 2) order hot meals from the personalized choicemenu, and 3) complete monitoring questionnaires. For generating tailored dietary advice, first the ICT system integrates information on individual health status (gender, age, medical profile and nutritional status) to estimate dietary needs based on knowledge rules. Dietary needs are combined with information on the individual profile (i.e. dietary habits, preferences, appetite, chewing and swallowing difficulties) and then translated by the dietician into a tailored dietary advice that is discussed with participants during an individual consultation at baseline. Throughout the intervention period self-selected hot meals can be either picked up at the pharmacy by the participants or are delivered at home. Self-reported compliance with the dietary advice and liking of the consumed meals is monitored throughout the intervention period by a short questionnaire that is completed by the participants on 2 days per week. Based on monitoring results, the dietician can adjust the initial dietary advice if necessary. Participants in the control group will receive a general leaflet on food-based dietary guidelines (\*Schijf van Vijf\*) and usual care.

## Study burden and risks

The risks involved in participating in this study can be considered negligible. The burden can be considered low: baseline visit (1 hour), end visit (1 hour), two times completion of a 3-day food diary and one consultation with the dietician (1 hour) will take some time and effort from the participants. Most study measures are non-invasive (mainly questionnaires). Time required for completion of monitoring questionnaires is limited (15 minutes per week). The participants stay in control over their own food intake and participants can

continue to engage in their normal daily activities.

## **Contacts**

### **Public**

Stichting Wageningen Research

Bornse Weilanden 9 Wageningen 6708 QG NL

#### 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**

- \* Aged 70 years or over
- \* Independently living
- \* Taking 5 types of medicine or more (polypharmacy)
- \* Consuming hot ready-to-eat meals on at least 2 days a week
- \* Willing to use a tablet for completing questionnaires, monitoring dietary compliance and meal enjoyment
- \* Having signed informed consent

## **Exclusion criteria**

- \* Not willing that the General Practitioner is informed to verify the presence of medical conditions
- \* Under supervision of a dietician
- \* On a weight loss diet
- \* Suffering from sever undernutrition, BMI <20 kg/m2 in combination with significant weight loss (based on SNAQ65+ evaluation criteria)
- \* Suffering from severe swallowing difficulties
- \* Allergies/intolerances other than egg, gluten, cow\*s milk or lactose
- \* Having diagnosed with cancer
- \* Suffering from renal disease
- \* Progressive disease with strongly reduced life expectancy (<6-12 months)
- \* Parkinson\*s disease
- \* Cognitive impairments that unable them to understand and complete questionnaires

# Study design

## **Design**

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Open (masking not used)

**Primary purpose:** Health services research

## Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 05-07-2018

Enrollment: 60

Type: Actual

## **Ethics review**

Approved WMO

Date: 22-12-2017

Application type: First submission

Review commission: METC Wageningen Universiteit (Wageningen)

Approved WMO

Date: 27-03-2018

Application type: Amendment

Review commission: METC Wageningen Universiteit (Wageningen)

# **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 NL63515.081.17