Feasibility study of a systematic approach for deprescribing of statins and proton pump inhibitors in nursing home residents

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The aim of this study is to test the feasibility of this algorithm as an intervention to carry out deprescribing a targeted medication group, proton pumpinhibitors (PPI*s) and statins, among nursing home residents.

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

Summary

ID

NL-OMON46524

Source
ToetsingOnline

Brief title
FeDeS+P

Condition

- Other condition
- Gastrointestinal disorders
- Age related factors

Synonym
polypharmacy, the concurrent use of multiple medications by a patient

Health condition

Polyfarmacie

Research involving
Human

Sponsors and support

Primary sponsor: Zuyderland Medisch Centrum
Source(s) of monetary or material Support: Zuyderland Medisch Centrum

Intervention

Keyword: Deprescribing, frail elderly, Nursing home, Nursing home residents

Outcome measures

Primary outcome

1. Decrease in PPI and statin use for the short and long term.

Secondary outcome

1. All possible negative effects of deprescribing

2. The feasibility and acceptance of this deprescribing proces for patients,

family and doctors.

Study description

Background summary

Deprescribing, the process of safely reducing or discontinuing unnecessary or harmful medication, has the potential to decrease polypharmacy and improve health outcomes. In this study a structured implicit algorithm, focusing on both extrinsic medication factors (eg change in disease) and intrinsic patient factors (eg. pill burden) will be used.

Study objective

The aim of this study is to test the feasibility of this algorithm as an intervention to carry out deprescribing a targeted medication group, proton pump inhibitors (PPI*s) and statins, among nursing home residents.

Study design

A multicentre, unblinded, single group (pre-comparison and post-comparison) feasibility study.

Intervention

For this study an implicit, evidence-supported and patient-centred algorithm has been developed. The outcome of the algorithm is an advice to the doctor to deprescribe or not deprescribe the statin and/or PPI.

Study burden and risks

We expect a minimal burden for our participants.
Expected benefits for the participants: decrease in pill burden, less medication interactions and side effects.
Possible disadvantages for the participants: symptom recurrence.

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

Participant uses a statin
Or/and participant uses a proton pump inhibitor
Participant signs informed consent

Exclusion criteria

Participant is there for short term nursing home admission (<3 months)
Participant is there for hospice admission.

Study design

Design

Study type: Interventional

Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	02-04-2018
Enrollment:	125
Type:	Actual

Ethics review

Approved WMO

Date:	06-03-2018
Application type:	First submission
Review commission:	METC Z: Zuyderland-Zuyd (Heerlen)

Approved WMO Date:	02-07-2018
Application type:	Amendment
Review commission:	METC Z: Zuyderland-Zuyd (Heerlen)

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	NL64093.096.18