# The feasibility of home monitoring for patients undergoing outpatient surgery for elective hip or knee replacement

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The purpose of this study is to evaluate the feasibility of postoperative home monitoring for patients undergoing outpatient knee- or hip arthroplasty; discharged on the same day as surgery; less than 12-hour hospital stay. We hypothesise that a...

**Ethical review** Approved WMO **Status** Recruitment stopped

**Health condition type** Joint disorders

**Study type** Observational non invasive

# **Summary**

#### ID

**NL-OMON51009** 

#### Source

**ToetsingOnline** 

#### **Brief title**

HORATIO: Home monitoring after outpatient primary hip or knee Prosthesis

#### **Condition**

Joint disorders

#### **Synonym**

joint degeneration, Osteoartritis

#### Research involving

Human

## **Sponsors and support**

Primary sponsor: Diakonessenhuis Utrecht

Source(s) of monetary or material Support: Philips (sponsort deel apparatuur), Philips NV

#### Intervention

**Keyword:** Hip prosthesis, Home monitoring, Knee prosthesis, Outpatient surgery

#### **Outcome measures**

#### **Primary outcome**

**Primary Objective:** 

The primary outcome is the mean percentage of successful wireless transmissions from home of blood pressure (BP) levels, heart rate (HR), respiratory rate (RR), oxygen saturation (SpO2) levels, temperature and pain score up to and including postoperative day 4 with a feasibility target of >=90%.

#### **Secondary outcome**

Secondary Objective:

Patient satisfaction measured with a patient satisfaction survey (5- point Likert scale)

**Tertiary Objective:** 

Cost effectiveness. A cost analysis will be conducted by the Diakonessenhuis Finance Department.

# **Study description**

#### **Background summary**

The introduction of fast-track protocols and multidisciplinary perioperative care strategies have shortened the length of stay (LOS) after total joint arthroplasty (TJA) significantly over the last 10 years. Outpatient surgery for hip- and knee prosthesis is now feasible for an estimated 15-20% of patients.

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However, these are mainly strictly selected young and healthy patients without comorbidities. We have reasons to believe that home monitoring and real-time interactive support will make outpatient TJA possible for a significantly larger group of patients without increase of complications and readmissions. Furthermore, we expect patient satisfaction will be high and that total care costs will be reduced.

#### **Study objective**

The purpose of this study is to evaluate the feasibility of postoperative home monitoring for patients undergoing outpatient knee- or hip arthroplasty; discharged on the same day as surgery; less than 12-hour hospital stay.

We hypothesise that a wireless system is feasible for monitoring patients at home postoperatively combining it with real-time interactive support by a response team in our hospital.

### Study design

The HORATIO-study is a prospective observational study

#### Study burden and risks

Risks:

**Falls** 

Disconnection with patient at home/no data transfer Readmission in hopsital Emergency department visit

Benefits:

faster revalidation

Better (real-time) communication with hospital

Rapidly back home in own environment, all own pace and surrounded by family or loved ones

Cost effectiveness

## **Contacts**

#### **Public**

Diakonessenhuis Utrecht

Jagersingel 1 Zeist 3707HL NL

#### **Scientific**

Diakonessenhuis Utrecht

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# **Trial sites**

#### **Listed location countries**

**Netherlands** 

# **Eligibility criteria**

#### Age

Adults (18-64 years) Elderly (65 years and older)

#### **Inclusion criteria**

Primary unilateral THA, TKA or UKA Preoperative body mass index (BMI)<40 kg/m2 Age 18-75 years at the time of surgery

#### **Exclusion criteria**

ASA score IV
Revised cardiac risk score > 2
Predictive Postoperative Nausea and Vomiting (Apfel) score > 2
Cognitive impairment (e.g. Dementia)
Use of psychopharmaceutical medicine
Chronic obstructive pulmonary disease with FEV1 <= 1
Obstructive sleep apnoea

# Study design

## **Design**

**Study type:** Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Health services research

#### Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 18-04-2022

Enrollment: 60

Type: Actual

## Medical products/devices used

Generic name: sensor (Healthdot) for measurement vital signs at home

Registration: Yes - CE intended use

## **Ethics review**

Approved WMO

Date: 22-12-2021

Application type: First submission

Review commission: MEC-U: Medical Research Ethics Committees United

(Nieuwegein)

# 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.

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# In other registers

Register ID

CCMO NL77324.100.21