# HOSTAS cohort \*Hand OSTeoArthritis in Secondary care\*; Inception cohort of patients with hand osteoarthritis referred to secondary care

Published: 27-03-2009 Last updated: 24-08-2024

To get more insight in: \*diagnostic and classification criteria for hand OA and its subsets\*the association between certain risk factors and hand OA\*risk factors for the development and clinical outcome of hand OA\*the utility of radiographs and MRI...

Ethical review Approved WMO

**Status** Recruitment stopped

**Health condition type** Joint disorders

**Study type** Observational invasive

# **Summary**

#### ID

NL-OMON53068

#### **Source**

**ToetsingOnline** 

**Brief title** 

**HOSTAS** 

### **Condition**

Joint disorders

#### Synonym

hand osteoarthrosis, osteoarthritis in de hand

#### Research involving

Human

# **Sponsors and support**

**Primary sponsor:** Leids Universitair Medisch Centrum

1 - HOSTAS cohort \*Hand OSTeoArthritis in Secondary care\*; Inception cohort of patie ... 29-05-2025

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

Intervention

**Keyword:** diagnostic, hand, Osteoarthritis, outcome

**Outcome measures** 

**Primary outcome** 

This is an descriptive study:

1. Expositions of interest are: age, sex, profession, hand strength,

familial/genetic factors, overweigth, symptoms, findings from physical

examination, radiological variables, like joint space narrowing, osteophytes,

erosions, and MRI variables, like bone marrow lesions, effusion

2. Outcomes are: diagnosis hand osteoarthritis, disease course, both clinically

as well as radiologically, over time, use of certain treatment modalities

(painkillers, splints, etc.)

3. Determinants going together with different sub-sets of hand osteoarthritis,

like erosions, nodes, thumb base involvement, can be used as exposition as well

as outcome in the study.

**Secondary outcome** 

not applicable

**Study description** 

**Background summary** 

Osteoarthritis (OA) of the hands is one of the most prevalent musculoskeletal diseases, leading to pain in and around affected joints, to swelling, stiffness, deformity and gradual loss of function. However knowledge concerning this disease is still lacking, especially with respect to:

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\*the diagnostic and classification criteria for hand osteoarthritis and its subsets

\*the association between certain risk factors and hand osteoarthritis

- \*risk factors for development and clinical outcome in hand osteoarthritis
- \*the utility of radiographs and MRI in hand osteoarthritis
- \*the association between hand osteoarthritis and osteoarthritis of the large joints.

This lack in knowledge hampers optimal patient care.

Currently only symptom modification (like paracetamol, thumb base splint) is available in hand osteoarthritis, but no disease modifying osteoarthritis drugs (DMOASDs). The search for DMOADs is an important objective in hand osteoarthritis research, for which more insight in pathophysiology and clinical course of the disease is of great importance. An additional problem is the scarce numbers of randomized clinical trials performed in hand osteoarthrits in the passed decades by lack of clinimetric possibilities.

## Study objective

To get more insight in:

- \*diagnostic and classification criteria for hand OA and its subsets
- \*the association between certain risk factors and hand OA
- \*risk factors for the development and clinical outcome of hand OA
- \*the utility of radiographs and MRI in hand OA
- \*the association between hand OA and large joint OA.

With the results of the present study care for patients with hand osteoarthritis will be improved and new targets for therapy may be elucidated enabling the development of new treatments for hand osteorthritis. When more knowledge concerning the course and the classification of hand osteoarthritis is available good randomized clinical trials can be performed and new treatment modalities investigated.

#### Study design

Observational inception cohort

### Study burden and risks

Within this cohort usual care for patients with hand osteoarthritis will be evaluated, but now in a standardized way.

In addition a MRI scan of the left and right hand will be made, leading to a low risk for the patient, since there is no radiation involved and it is very unlikely that incidentalomas will be detected by a MRI of the hand. Furthermore the patient has to fill in questionnaires related to osteoarthritis for which the patient visits the outpatient clinic. This costs the patient some

# **Contacts**

#### **Public**

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Scientific

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# **Trial sites**

## **Listed location countries**

**Netherlands** 

# **Eligibility criteria**

#### Age

Adults (18-64 years)

## Inclusion criteria

•Symptomatic \*primary\* hand OA as diagnosed by a rheumatologist from the outpatient rheumatology clinic of the LUMC

## **Exclusion criteria**

- •Any other pathological condition that could explain the existing symptoms, like tendinitis, carpal tunnel syndrome, surmenage, fibromyalgia, arthritis due to a primarily inflammatory rheumatic disease.
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- •\*Secondary\* OA, including 1) inflammatory joint diseases, like rheumatoid arthritis, psoriatic arthritis, spondylarthropathies and current sarcoidosis, 2) bone diseases such as osteitis deformans and osteochondritis, 3) intraarticular fractures, 4) certain metabolic diseases associated with joint disease such as hemochromatosis, Wilson\*s disease and ochronosis, 5) endocrine disease like acromegaly, 6) major congenital or developmental diseases and bone dysplasias, 7) major local factors such as hypermobility, 8) severe (tophous) gout.
- •Inability to understand the Dutch language, Additional exclusion criterion solely for the Bioelectrical Impedance Analyses (BIA) part of the physical exam (patients who are excluded for the BIA, will not perform this part of the physical exam, but can still participate in all the other components of HOSTAS):
- The presence of a pacemaker or subcutaneous cardio defibrillator. , Additional exclusion criteria for patients who undergo MRI for the study:
- The presence of metal in the body: pacemaker or subcutaneous cardio defibrillator, vascular clips on cerebral vessels, metallic splinters in the eye, not removable listening aid, not removable neurostimulator, hydrocephaluspump, dentures fixated by magnets, intra-uterine device
- Allergy for MRI contrast agents
- Impaired renal function
- Pregnancy

# Study design

# **Design**

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Basic science

### Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 01-06-2009

Enrollment: 538

Type: Actual

# **Ethics review**

Approved WMO

Date: 27-03-2009

Application type: First submission

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

Approved WMO

Date: 17-07-2014

Application type: Amendment

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

Approved WMO

Date: 13-07-2016

Application type: Amendment

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

Approved WMO

Date: 06-09-2022

Application type: Amendment

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

# **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 NL26201.058.08