PaTIO study: PhysiotherApeutic Treatto-target Intervention after Orthopaedic surgery; A cost-effectiveness study.

Published: 20-12-2017 Last updated: 15-05-2024

To evaluate the cost-effectiveness of optimized, treat-to-target PPT in TKA/THA patients as compared to usual PPT. Thehypothesis is that with the optimized strategy superior functional outcomes can be achieved compared to usual care, at lowercosts (...

Ethical review Approved WMO

Status Recruitment stopped

Health condition type Joint disorders **Study type** Interventional

Summary

ID

NL-OMON55756

Source

ToetsingOnline

Brief title

PATIO study

Condition

Joint disorders

Synonym

hip and knee replacement; total hip and knee arthroplasty

Research involving

Human

Sponsors and support

Primary sponsor: Erasmus MC, Universitair Medisch Centrum Rotterdam

Source(s) of monetary or material Support: Leading the Change call (Zorgverzekeraars)

Intervention

Keyword: postoperative physiotherapy, THA, TKA, treat-to-target

Outcome measures

Primary outcome

Difference between both groups regarding changes of KOOS-PS/HOOS-PS, a measure

of physical functioning, between

baseline and 3 months postoperatively.

Differences between both groups regarding cost-effectiveness.

Secondary outcome

Differences between both groups in:

- recovery of function during 12 months follow-up,
- in scores of OKS/OHS (functioning), NRS (amount of pain), EQ-5D (quality of

life), performance tests, physical activity level, and satisfaction of the patient.

Study description

Background summary

Postoperative physiotherapy (PPT) is a proven effective treatment after total knee (TKA) and hip arthroplasty (THA), however research shows that there is no consensus regarding its timing, content and duration and practice variation is considerable. We propose an evaluation of optimized, personalized treat-to-target PPT, which is presented in the form of a transmural care pathway.

Study objective

To evaluate the cost-effectiveness of optimized, treat-to-target PPT in TKA/THA patients as compared to usual PPT. The

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hypothesis is that with the optimized strategy superior functional outcomes can be achieved compared to usual care, at lower costs (superiority study).

Study design

Cluster randomized study

Intervention

Treat-to-target: optimized, personalized strategy implying that after receiving PT in the postoperative phase in the hospital will

either or not be referred to primary care PT based on a standardized assessment of their health status, personal-, external

factors and achievement of functional milestones. Those needing PPT in primary care receive a standardized, time contingent

program, focused on evidence-based components muscle strengthening and functional exercises, with regular evaluations

regarding achievement of functional milestones. After reaching the milestones, PPT is ended and patients will receive a

tailored advice with home-based exercises in combination with referral to exercise activities in the community. The

treat-to-target PPT is based on scientific evidence and expert opinion and is presented in the form of a transmural care pathway.

Usual care: Current PPT delivery

Study burden and risks

Patients will be asked to fill out questionnaires at 6 time points (at home, web-based program). At three time points the patients will be asked to perform physical performance tests. So additional time will be asked from the participating patients. In our view patients participating in this study will undergo no additional risks.

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

Patients eligible for this trial are patients with clinical and radiological knee or hip OA who are scheduled for a primary TKA or THA, and willing to comply with the study protocol.

Exclusion criteria

A potential subject who meets any of the following criteria will be excluded from participation in this study: TKA or THA for a diagnosis other than OA, uncontrolled cardiovascular disease or hypertension, history of neuromuscular disorder that affects lower extremity function, terminal illness, plans to have another joint replacement during study follow-up, not able to attend follow-up measurements, not able to attend the PPT in primary setting, serious adverse events during surgery or directly thereafter, serious psychiatric disorders, or insufficient command of the Dutch language, spoken and/or written.

Study design

Design

Study type: Interventional

Intervention model: Other

Allocation: Randomized controlled trial

Masking: Open (masking not used)

Control: Active

Primary purpose: Treatment

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 02-08-2018

Enrollment: 624

Type: Actual

Ethics review

Approved WMO

Date: 20-12-2017

Application type: First submission

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 12-03-2018

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 09-04-2018

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 24-04-2018

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 03-09-2018

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 17-09-2018

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 08-11-2018

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 25-03-2019

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 18-04-2019

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 28-05-2019

Application type: Amendment

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam

(Rotterdam)

Approved WMO

Date: 05-06-2019

Application type: Amendment

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

ID: 27356 Source: NTR

Title:

In other registers

Register ID

CCMO NL61763.078.17 OMON NL-OMON27356