

Self-management and the use of the Assessment of burden of COPD (ABC) tool

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• H1: The use of the ABC tool leads to more self-management • H2: The ABC tool will be more effective in patients with better baseline self-management abilities

Ethische beoordeling	Positief advies
Status	Werving gestart
Type aandoening	-
Onderzoekstype	Observationeel onderzoek, zonder invasieve metingen

Samenvatting

ID

NL-OMON20567

Bron

NTR

Verkorte titel

TBA

Aandoening

COPD

Ondersteuning

Primaire sponsor: Boehringer-Ingelheim

Overige ondersteuning: Sponsorshi[

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Changes in PAM total scores

Toelichting onderzoek

Achtergrond van het onderzoek

Recently the ABC tool was developed to measure the experience burden of COPD. This burden was defined as:

The physical, emotional, psychological and/ or social experience of the patient with COPD. The ABC tool is a communication tool between patient and healthcare provider, as well as a means to monitor progression or deterioration. It also provides not only insights in the experienced burden of disease, but the underlying algorithm provides input for a personal care plan. This care plan is expected to improve patient's ability to self-manage. The ABC proved to be a valid and reliable measure (Slok et al 2015) and the use of this tool showed that the quality of life improved compared to patients who do not use this tool (Slok et al 2016). Furthermore, results from a discrete choice experiment showed that the outcomes of the ABC tool can be used to rank severity of burden of disease into mild, moderate and severe, which relates to a quarterly cost-expenditure of €1200, €2500 and €9500 respectively (Rutten et al, 2016). Theoretically, patients who remain in their current burden of disease ranking, would save costs compared to patients regressing to a more severe disease state.

From a contemporary view on health, where health is defined by the ability to self-manage and cope, in the light of living with a chronic disease, the ABC tool seems to be a valuable addition to improve experienced health. However, the relationship between the ABC tool and self-management is not yet known. If there would be a positive relationship, then this tool would be of even more relevance for patients and healthcare providers to be used in practice. Furthermore, if the ABC tool would improve self-management, and by improving self-management also reducing healthcare use as evidence exists that more active patients consume less care (Hibbard et al 2014), payers would be motivated to have this tool available in daily practice by financing the ABC tool.

In this research, we aim to study the relationship between self-management and use of the ABC tool. And if patients can be identified who will gain the most from using this tool, the ABC tool can be used more effectively.

Doel van het onderzoek

- H1: The use of the ABC tool leads to more self-management
- H2: The ABC tool will be more effective in patients with better baseline self-management abilities

Onderzoeksopzet

1 year

Contactpersonen

Publiek

University Maastricht
Maarten Voorhaar

0615040299

Wetenschappelijk

University Maastricht
Maarten Voorhaar

0615040299

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Confirmed COPD diagnosis, according to the Dutch guidelines for primary care in COPD patients (NHG)

Patients > 40 years with dyspnea and/ or cough, and history of smoking and airway obstruction after standardized bronchus dilation (FEV1/FVC-ratio < 5e percentile)

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- Participation in previous studies on the ABC tool
- Patients who cannot understand the Dutch language

Onderzoeksopzet

Opzet

Type: Observationeel onderzoek, zonder invasieve metingen

Onderzoeksmodel:	Anders
Toewijzing:	N.v.t. / één studie arm
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	28-02-2019
Aantal proefpersonen:	55
Type:	Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nee

Ethische beoordeling

Positief advies	
Datum:	28-02-2019
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL7580

Register

Ander register

ID

METC Zuyderland : 17N91

Resultaten