

The use of audit and feedback to improve patient care and reduce practice variation in paediatric tonsil surgery

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We hypothesize that providing feedback to hospitals will reduce practice variation

Ethische beoordeling	Positief advies
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON20894

Bron

Nationaal Trial Register

Verkorte titel

TBA

Aandoening

Tonsillitis, OSAS, Upper respiratory tract infections

Ondersteuning

Primaire sponsor: Citrienfonds

Overige ondersteuning: Citrienfonds (doen of laten)

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Highest surgical rate (hospital)/Lowest surgical rate (hospital)

Toelichting onderzoek

Achtergrond van het onderzoek

Rationale: In international guidelines, it is recommended to only perform a tonsillectomy for recurrent throat infection if there have been more than seven episodes in the past year, more than five episodes per year in the past two years, or more than three episodes per year in the past three years. Additionally, it is recommended to perform a watchful waiting strategy instead of adenoidectomy in case of upper respiratory tract infections only. Despite these recommendations, practice variation remains problematic. It is thought that awareness can reduce practice variation. Therefore, this study aims to reduce practice variation in tonsillectomies and adenoidectomies by using audit and feedback to otolaryngologists and general practitioners (GPs). The study consists of 2 phases: 1. Development and evaluation of an implementation strategy to reduce practice variation in tonsillectomy and adenoidectomy using data from the LOGEX Benchmark Database. We will perform a randomized controlled trial on the effect of the implementation strategy. Fifteen randomly selected hospitals from the LOGEX Benchmark Database will receive an invitation to participate in our study. We will compare clinical practice before and after the intervention in the participating hospitals, and we will compare the intervention hospitals with the control group, which consists all other hospitals from the LOGEX Benchmark Database, 2. Analysis of practice variation in GPs referral pattern using data from the ELAN Datawarehouse (Den Haag). We will present the outcomes to the GP practices included in the analysis. We will evaluate the effectiveness of audit and feedback on practice variation, process variation, outcomes and costs in the treatment of tonsillitis and upper respiratory infections in children to otolaryngologists and GPs.

Main study parameters/endpoints: Main outcome is practice variation in tonsillectomy and adenoidectomy treatment for children with upper respiratory tract infections before and after giving audit and feedback to otolaryngologists. Also, changes in clinical practice (both treatment choices and treatment processes) will be analysed using difference-in-difference analysis comparing intervention hospitals with the control group. Hospital characteristics will be compared with the opinion of physicians on the topic. Furthermore, we will evaluate practice variation in GP practices concerning the treatment of children with upper respiratory tract infections.

Doel van het onderzoek

We hypothesize that providing feedback to hospitals will reduce practice variation

Onderzoeksopzet

We measure ongoing (per months) from 6 months before until 6 months after the last feedback cycle

Onderzoeksproduct en/of interventie

Audit and feedback, 4 times, during 1 year

Contactpersonen

Publiek

LUMC
Juliëtte van Munster

+31631345127

Wetenschappelijk

LUMC
Juliëtte van Munster

+31631345127

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

LOGEX Benchmark hospitals

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

University Hospitals

Onderzoeksopzet

Opzet

Type: Interventie onderzoek

Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Actieve controle groep

Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	07-07-2020
Aantal proefpersonen:	5
Type:	Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nee

Toelichting

n.a.

Ethische beoordeling

Positief advies	
Datum:	07-07-2020
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	NL9676
Ander register	METC Leiden Den Haag Delft : N20.001

Resultaten