TEAMS: Training and protEin recommendations for frAil older adultS (Part I: community-dwelling) (Dutch: Training en Eiwit Aanbeveling op Maat voor kwetsbare Senioren - deel I: thuiswonende ouderen)

Gepubliceerd: 20-07-2020 Laatst bijgewerkt: 13-12-2022

This study will find the most effective and optimal resistance exercise training program for frail older adults, and takes into account (in)adequate protein intake and personal characteristics, in order to improve sarcopenia-related outcomes in this...

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

Samenvatting

ID

NL-OMON21140

Bron
NTR

Verkorte titel
TEAMS Part I

Aandoening

Sarcopenia and malnutrition

Ondersteuning

Primaire sponsor: Amsterdam University of Applied Sciences (Dutch: Hogeschool van Amsterdam) / Dutch Taskforce for Applied Research (Dutch: SiA Regie orgaan Praktijkgericht onderzoek (NWO))
Overige ondersteuning: initiator driven with public partnerships and public-private

partnerships

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Muscle strength measured by the 1-RM

Toelichting onderzoek

Achtergrond van het onderzoek

The world population is aging rapidly. As society ages, the incidence of physical limitations and frailty is dramatically increasing, which reduces the quality of life and increases health care expenditures. An important cause of physical limitations and frailty is the age-related loss of skeletal muscle mass, strength and performance, also referred to as sarcopenia. Resistance-type exercise training is the most promising intervention to prevent or treat sarcopenia in older adults. Evidence of resistance exercise is based on well-controlled studies and cannot be easily translated to daily physiotherapy practice. In practice, the execution of the training protocol differs tremendously among older adults and depends on various resistance exercise training variables (e.g. load, repetitions and volume) and personal characteristics such as frailty status, gender, age, co-morbidity, nutritional status and cognitive and mental performance. As such, physiotherapists are limited in using the available training recommendations and are in need for more personalized training protocols that improve sarcopenia outcomes. In addition, dietary protein intake is suggested to be adequate to further improve sarcopenia outcomes during resistance exercise in frail older adults. More research is warranted on the impact of (in)adequate protein intake on training adaptations and sarcopenia outcomes.

Doel van het onderzoek

This study will find the most effective and optimal resistance exercise training program for frail older adults, and takes into account (in)adequate protein intake and personal characteristics, in order to improve sarcopenia-related outcomes in this heterogeneous population.

Onderzoeksopzet

- screening
- week 0: baseline measurements
- week 1: 1-RM (start of intervention)

- week 4: 1-RM
- week 8: 1-RM
- week 12 & week 13: final measurements (End of Study)

Onderzoeksproduct en/of interventie

Resistance exercise training
Blended dietary counseling

Contactpersonen

Publiek

Amsterdam University of Applied Sciences (AUAS) (Dutch: Hogeschool van Amsterdam (HvA))
Mohammed Benali

+31(0)642100294

Wetenschappelijk

Amsterdam University of Applied Sciences (AUAS) (Dutch: Hogeschool van Amsterdam (HvA))
Mohammed Benali

+31(0)642100294

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- Community-dwelling and-or independent living, receiving in-home care services
- Aged 65 or older
- Physical ability and willingness to execute a resistance exercise program
- Ability and willingness to comply with the protocol
- Willingness that general practitioner will be notified on study participation
- Written informed consent
- Consent of the study physician

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- Inability to understand the Dutch language
- Cognitive impairment (MMSE < 15)
- Diagnosed unstable coronary heart disease (CHD), decompensated heart failure, uncontrolled hypertension or uncontrolled arrhythmias (e.g. hart failure NYHA >3)
- Diagnosed degenerative neurocognitive disorders
- COPD GOLD >3
- Use of total parenteral nutrition (TPN)
- Active medical treatment interfering with this intervention (e.g. cancer patients following systemic and immune therapy)
- Physical disabled (walking aids or mild visual impairment are not an exclusion criteria)
- Current enrollment in a fixed rehabilitation program or other intervention studies
- Palliative treatment or a life expectancy of ≤ 3 months

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blindering:	Enkelblind
Controle:	Geneesmiddel

Deelname

Nederland

Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-10-2020
Aantal proefpersonen:	300
Type:	Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Ja

Toelichting
Final procedures will be published in a Data-management plan (DM) and a Data Privacy

Impact Assessment (DPIA). After the study, only metadata of the study will be open. The data itself isn't available because it contains personal/sensitive medical information.

Ethische beoordeling

Positief advies

Datum:	20-07-2020
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	NL8785
Ander register	METC VUmc : 2020.452

Resultaten