

Improving the prognosis of older dizzy patients in general practice

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A risk-factor guided approach is more effective than usual care when treating dizziness in older patients in general practice.

Ethische beoordeling	Positief advies
Status	Werving gestopt
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON24505

Bron

NTR

Verkorte titel

The Reduction Of Dizziness in older pEOple (RODEO)

Aandoening

ENGLISH: dizziness - older patients - impairment - general practice - prognosis

DUTCH: duizeligheid - ouderen - beperking - huisartsgeneeskunde - prognose

Ondersteuning

Primaire sponsor: VU University Medical Center, The Netherlands

Overige ondersteuning: ZonMw/SBOH, The Netherlands

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Dizziness-related impairment, as measured by the Dizziness Handicap Inventory (DHI).

Health related quality of life, as measured by the SF-36.
Incidence of falls, as measured with a fall calendar.

Toelichting onderzoek

Achtergrond van het onderzoek

N/A

Doel van het onderzoek

A risk-factor guided approach is more effective than usual care when treating dizziness in older patients in general practice.

Onderzoeksopzet

Baseline: questionnaires previously sent by mail and standardized baseline assessment during home visits.

3-months/6-months/9-months/12-months: questionnaire sent by mail.

Onderzoeksproduct en/of interventie

The patients assigned to the intervention group will receive – in addition to usual care as described below – a targeted intervention, consisting of a standardized intervention protocol for the risk factors 'FRID (fall-risk-increasing drugs)', 'anxiety and/or depression', and 'impaired functional mobility'.

Contactpersonen

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Patients of 65 years or older are eligible if they have consulted their GP for a new episode of dizziness, defined as recurrent dizziness, including a giddy or rotational sensation, loss of balance, faint feeling, light-headedness, instability, or tendency to fall.

Selected patients will be invited by their GP to participate in the study after confirming the following eligibility criteria:

- a. Suspected current dizziness-related impairment.
- b. The ability to speak, read and write Dutch.
- c. No severe cognitive impairment.
- d. No serious comorbid condition that precludes participation in an exercise programme.
- e. No current enrolment in another – interfering – study.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

See above.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Geneesmiddel

Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	01-01-2015
Aantal proefpersonen:	200
Type:	Werkelijke startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Ja

Toelichting

Dataset deposited with Data Archiving and Networked Services (DANS).

Ethische beoordeling

Positief advies	
Datum:	15-12-2013
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	NL4195
NTR-old	NTR4346
Ander register	839110001 : ZonMw/HGOG
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten

Stam H, van Vugt VA, Twisk JWR, Finne-Soveri H, Garms-Homolová V, Declercq A, Jónsson PV, Onder G, van der Roest HG, van Hout H, Maarsingh OR. The Prevalence and Persistence of Dizziness in Older European Home Care Recipients: A Prospective Cohort Study. *J Am Med Dir Assoc*. 2019 Oct 28. pii:S1525-8610(19)30666-8. doi: 10.1016/j.jamda.2019.09.008.

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4: Stam H, Wisse M, Mulder B, van der Wouden JC, Maarsingh OR, van der Horst HE. Dizziness in older people: at risk of shared therapeutic nihilism between patient and physician. A qualitative study. *BMC Fam Pract*. 2016 Jul 16;17:74. doi:10.1186/s12875-016-0474-3.

5: Stam H, Harting T, Sluijs Mv, van Marum R, Horst Hv, Wouden JC, Maarsingh OR. Usual care and management of fall risk increasing drugs in older dizzy patients in Dutch general practice. *Scand J Prim Health Care*. 2016 Jun;34(2):165-71. doi:10.3109/02813432.2016.1160634.

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7: Maarsingh OR, Stam H, van der Horst HE. A Different Approach of Dizziness in Older Patients: Away from the Diagnostic Dance between Patient and Physician. *Front Med (Lausanne)*. 2014 Dec 1;1:50. doi: 10.3389/fmed.2014.00050.

8: Stam H, van der Horst HE, Smalbrugge M, Maarsingh OR. [Chronic dizziness in older people: apply a multifactorial approach]. *Ned Tijdschr Geneeskd*. 2014;159:A8301. Review. Dutch.

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