

The Computer Automated Pause Software (CAPS) study, randomised controlled trial in the effectiveness of pause software in VDU workers.

Gepubliceerd: 24-06-2005 Laatst bijgewerkt: 18-08-2022

N/A

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

Samenvatting

ID

NL-OMON25225

Bron

NTR

Verkorte titel

CAPS study

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Main outcomes are prevalence and incidence of RSI risk factors and complaints. A worker will be defined as a RSI case in case symptoms are present on at least 4 days during at least 1 week in the last 12 months. Symptoms have to be present in one or more of the upper extremity body regions: neck, upper back, shoulder, elbow, forearm, wrist and/or hand (SALTSA definition). Duration of computer use will be registered with WorkPace registration software. Complaints will be measured with the QuickDASH questionnaire. Pain and complaints in the previous 24 hours will be measured with a Visual Analogue Scale. The average pain intensity in will be evaluated by the worker on an 11-pointnumerical scale ranging from 0 (no pain) to 10 (as much as can be imagined).

Toelichting onderzoek

Achtergrond van het onderzoek

Aim of this study is twofold:

on the one hand to investigate whether use of break software reduces risk factors in VDU work and on the other hand whether RSI complaints are prevented and reduced.

Research questions:

1. Does the use of break software lead to a reduction of RSI risk factors in VDU workers, compared to not using break software?
2. Does efficient use of break software lead to prevention of RSI complaints in VDU workers compared VDU workers that do not have break software to their disposal?
3. Does efficient use of break software lead to a reduction of existing RSI complaints in VDU workers compared VDU workers that do not have break software to their disposal?

Doeleind van het onderzoek

N/A

Onderzoeksopzet

N/A

Onderzoeksproduct en/of interventie

The intervention group will have break software at their disposal in an active way: they will know how to set up and use the software and will have background information on the possible benefits of the break software.

The control group will not have break software at their disposal.

Contactpersonen

Publiek

Academic Medical Center (AMC), Coronel Institute for occupational and Environmental Health,

P.O. Box 22660
Eline M. Meijer
Meibergdreef 9
Amsterdam 1100 DD
The Netherlands
+31 (0)20 5662799

Wetenschappelijk

Academic Medical Center (AMC), Coronel Institute for occupational and Environmental Health,
P.O. Box 22660
Eline M. Meijer
Meibergdreef 9
Amsterdam 1100 DD
The Netherlands
+31 (0)20 5662799

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Workers with at least 4 hours of VDU work per day. In light of the prevalence of complaints, a maximum of 40% of the included workers will have (or will have had) RSI complaints.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

All other than the inclusion criteria.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Enkelblind

Controle: Geneesmiddel

Deelname

Nederland
Status: Werving gestopt
(Verwachte) startdatum: 22-08-2005
Aantal proefpersonen: 600
Type: Werkelijke startdatum

Ethische beoordeling

Positief advies
Datum: 24-06-2005
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	NL23
NTR-old	NTR44
Ander register	: N/A
ISRCTN	ISRCTN13222474

Resultaten

Samenvatting resultaten

N/A