

# ‘Vocational Rehabilitation for employees with hearing impairment: A cost-effectiveness study’.

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The hypothesis is that the Vocational Enablement Protocol (VEP) is effective and cost-effective compared with usual care from a societal perspective.

<b>Ethische beoordeling</b>	Positief advies
<b>Status</b>	Werving gestart
<b>Type aandoening</b>	-
<b>Onderzoekstype</b>	Interventie onderzoek

## Samenvatting

### ID

NL-OMON25626

### Bron

NTR

### Verkorte titel

VEP

### Aandoening

slechthorendheid, gehoorverlies, hearing impairment, hearingloss

### Ondersteuning

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**Overige ondersteuning:** ZonMw

## **Onderzoeksproduct en/of interventie**

### **Uitkomstmaten**

#### **Primaire uitkomstmaten**

Need for recovery after work (NFR) scale comprised 11 dichotomized items assessing the short term effects of fatigue caused by work activities (Meijman en Van Veldhoven, 1994).

## **Toelichting onderzoek**

### **Achtergrond van het onderzoek**

A randomized controlled trial will be performed with 80 participants in the control (care as usual) and 80 participants in the treatment group (VEP). KLM, Corus and VU university have confirmed their participation in this study. Also patients of the ENT doctors and occupational physician will recruited in the study. All participants give their informed consent. Outcomes will be measured at baseline and after 3, 6, 9 and 12 months en consist of questionnaires. The participants in the intervention group have to visit the Audiological center of the VUmc.

Country of recruitment: The Netherlands.

### **Doel van het onderzoek**

The hypothesis is that the Vocational Enablement Protocol (VEP) is effective and cost-effective compared with usual care from a societal perspective.

### **Onderzoeksopzet**

Baseline measurement and after 3, 6, 9 and 12 months after randomization.

### **Onderzoeksproduct en/of interventie**

People in the intervention group get the VEP. The VEP comprise a half-day assessment of complex problems at the Audiological Center conducted by a team of professionals from different disciplines: E.N.T. physician, audiologist, occupational physician, social worker, psychologist, speech therapist. The patient's hearing status is assessed using an extensive battery of audiotry tests, including pure-tone and speech audiometry, various Speech-Reception-Threshold (SRT) tests (in quiet, in steady state noise and in fluctuating noise) and -if

indicated- a test for localization. To examine aided hearing, a free-field version of the SRT in noise test is also performed.

Furthermore, a semi-structured interview is conducted by the psychologist evaluating the psychosocial history of the person, their specific needs, attitude and expectations and an evaluation of the problems at work from the patient's perspective. Referral information is taken into account. The interview is attended by the occupational physician of the team to specifically evaluate the work-related problems and to discuss the patient's view on possible solutions and legal issues.

If indicated, the workplace itself is visited and is acoustically examined by conducting a Speech-Transmission-Index (STI) measurement. The STI provides an assessment of the intelligibility of speech in the workplace and verifies whether speech is intelligible for the employee, given the hearing impairment and the acousical conditions. The STI measures the combined effects of background noise and reverberation.

At the end of the session, all test results are examined and considered by the psychologist, specialized occupational physician, and the audiologist and explained to the patient. Here, we identify the (mis)match between the audiotry capacities of the employee and the auditory demands at the workplace. Possibilities of technical, speech-therapeutic and/or psychosocial interventions are then discussed. We argue that a patient-centered approach (i.e. involving the patient in the problem solving process) is crucial.

People in the control group get the usual care of the general practitioner, Ear-, Nose and Throat doctor or the occupational physician.

## Contactpersonen

### Publiek

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### Wetenschappelijk

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## Deelname eisen

### Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Diagnosis with hearing impairment (i.e. mean pure-tone hearing loss at 1, 2 and 4 kHz in best ear >25 dB HL) or a score of 'insufficient' or 'poor' on the National Hearing Test;
2. Age above 18 years;
3. Able to complete questionnaires written in Dutch language and capable of giving informed consent;
4. Working for at least 8 hours a week;
5. Available for the study for the following 12 months.

### Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Not willing or unable to comply with the study protocol;
2. Those who have already been referred to or passed a VEP in the last year;
3. Those for whom tinnitus is the primary condition affecting the individual;
4. Those who were pregnant.

## Onderzoeksopzet

### Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd

Blindering:	Enkelblind
Controle:	Geneesmiddel

## Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	01-05-2011
Aantal proefpersonen:	160
Type:	Verwachte startdatum

## Ethische beoordeling

Positief advies	
Datum:	28-02-2011
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	NL2654
NTR-old	NTR2782
Ander register	ZonMw / VUmc : 50-51415-98-015 / 2011/054;
ISRCTN	ISRCTN wordt niet meer aangevraagd.

# Resultaten

## Samenvatting resultaten

N/A