Randomized controlled trial in adult women with urinary incontinence comparing treatment delivered through a mobile application versus standard care.

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A treatment program for urinary incontinence (UI) in adult women delivered through a mobile application is not inferior to the standard way of treating patients, in primary care regarding its effects, it is less expensive and more cost-effective.

Ethische beoordeling Positief advies **Status** Werving gestart

Type aandoening -

Onderzoekstype Interventie onderzoek

Samenvatting

ID

NL-OMON25754

Bron

Nationaal Trial Register

Verkorte titel

URinControl

Aandoening

Urinary incontinence, Stress-incontinence, Urge-incontinence

Ondersteuning

Primaire sponsor: Department of General practice

University Medical Centre Groningen

University of Groningen

Overige ondersteuning: ZonMw: The Netherlands Organization for Health Research

Development

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

The change in symptoms score, measured with the International consultation on Incontinence Questionnaire on UI Short Form (ICIQ-UI-SF), 4 months after randomization

Toelichting onderzoek

Achtergrond van het onderzoek

BACKGROUND Urinary incontinence (UI) is a highly prevalent disorder in women. Despite available treatment options only 30% of women seek help for the problem. The availability of an easy-to-use, evidence based App for the treatment of UI may reduce the necessity of face-to-face contacts and increase continence rates and quality of life. Especially, the possibility to receive frequent reminders would enable patients to perform the necessary training, as forgetting is the most important reason why adherence can be lacking. This will help women with UI to have a better quality of life and it will considerably reduce health care costs.

OBJECTIVE To study the effects and cost-effectiveness of a App-based treatment program for women with urinary incontinence (UI) compared to standard care delivered by the general practitioner.

STUDY DESIGN AND POPULATION: Randomized controlled trial with non-inferiority design with non-pregnant women aged 18 years or older, who visit their general practitioner (GP) for symptoms of UI are eligible. They will be recruited from general practices in the northern part of the Netherlands.

INTERVENTION: The intervention consists of a treatment program on a mobile application for tablet or smartphone without face-to-face contact (App URinControl). The active control treatment is the standard care delivered by the GP

OUTCOME MEASURES: The primary outcome is the score on the International consultation on

2 - Randomized controlled trial in adult women with urinary incontinence comparing t ... 1-06-2025

Incontinence Questionnaire on UI Short Form (ICIQ-UI-SF), which measures symptoms and impact of the UI on daily life. Secondary outcomes are the perception of improvement by the patient, number of UI episodes, condition- specific and generic health related quality of life sexual functioning and costs. Also, a process

evaluation will take place.

Doel van het onderzoek

A treatment program for urinary incontinence (UI) in adult women delivered through a mobile application is not inferior to the standard way of treating patients, in primary care regarding its effects, it is less expensive and more cost-effective.

Onderzoeksopzet

Three assessments will be performed, at baseline, after 4 months and after 12 months.

Onderzoeksproduct en/of interventie

Intervention group: Mobile application (App)
After randomization patients will receive access to the
URinControl-App. In the App, basic information is provided in
a video fragment. Next, participants will learn how to use
their pelvic floor. Then the participants will start with a
training program tailored to their type of incontinence.
Women with stress (predominant) UI will start with pelvic
floor muscle training (PFMT); women with urgency
(predominant) UI will start with bladder training and PFMT
will be added later in the program. All exercises will be
supported by animations. All information will be available
through a bibliography within the app.

During the program patients are asked to fill out the number of incontinence episodes, as well as the intensity with which they performed the exercises. Treatment will be reinforced by regularly sending 'push' notifications to stimulate treatment adherence.

The content of the app is a translation of the recommendations of the guidelines on the treatment of UI of women in primary care. In the letter with instructions which will be advised to contact their general practitioner (GP) if the progress of the treatment is unsatisfactory.

Control group: Standard Care
Patients in the standard care group will be diagnosed and
treated according to NHG-guideline on UI (PFMT in case of
stress UI, bladder training and PFMT for urgency UI). GP's
can instruct patients themselves, or refer them to a practice

nurse or a specialized pelvic physiotherapist. In case of urgency incontinence, they can also choose to prescribe medication.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Subject must meet all of the following criteria:

- Women, 18 years or older;
- Access to mobile Apps (iOS or Android);
- Urinary incontinence (UI), defined as any involuntary loss of urine according to the definition of the international Consultation on Incontinence (ICI), regardless of subtype (stress-,
 - 4 Randomized controlled trial in adult women with urinary incontinence comparing t ... 1-06-2025

urgency- or mixed type UI). Incontinence episodes should be twice a week or more;

- Wish to be treated;
- Written informed consent.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Potential participant who meets any of the following criteria will be excluded from study:

- Indwelling urinary catheter;
- Urogenital malignancy;
- Previous urethral surgery for incontinence or prolapse;
- Being treated for UI in the previous year (pharmacologically or non-pharmacologically);
- Terminally or seriously ill;
- Cognitive impairment or psychiatric disorder;
- Urinary tract infection;
- Overflow or continuous UI;
- Pregnancy or recent childbirth (< 6 months ago);
- Inability to complete a questionnaire in Dutch.
- Prolapse POPQ ≥ stage IIb

Onderzoeksopzet

Opzet

Type: Interventie onderzoek

Onderzoeksmodel: Parallel

Toewijzing: Gerandomiseerd

Blindering: Open / niet geblindeerd

5 - Randomized controlled trial in adult women with urinary incontinence comparing t ... 1-06-2025

Controle: Actieve controle groep

Deelname

Nederland

Status: Werving gestart

(Verwachte) startdatum: 01-12-2014

Aantal proefpersonen: 240

Type: Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nog niet bepaald

Ethische beoordeling

Positief advies

Datum: 22-01-2015

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 NL4948 NTR-old NTR5052

Ander register -: Protocol ID 837001508

Resultaten

Samenvatting resultaten

Loohuis AMM, Wessels NJ, Jellema P, Vermeulen KM, Slieker-Ten Hove MC, van Gemert-Pijnen JEWC, Berger MY, Dekker JH, Blanker MH. The impact of a mobile application-based treatment for urinary incontinence in adult women: Design of a mixed-methods randomized controlled trial in a primary care setting. Neurourol Urodyn. 2018 Sep;37(7):2167-2176. doi: 10.1002/nau.23507. PMID: 29392749 https://doi.org/10.1002/nau.23507
Van der Worp H, Loohuis AMM, Flohil I, Kollen BJ, Wessels NJ, Blanker MH. Recruitment through media and general practitioners resulted in comparable samples in an RCT on incontinence. Journal of Clinical Epidemiology (online first: https://doi.org/10.1016/j.jclinepi.2019.12.001)