

Integrated telemonitoring and telecare for patients with heart failure.

Gepubliceerd: 23-10-2010 Laatste bijgewerkt: 15-05-2024

The aim of the present study is to examine the effect of integrated telemonitoring and telecare, compared to usual care, on quality of life and hospitalization in patients with heart failure in primary care.

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

Samenvatting

ID

NL-OMON26293

Bron

NTR

Verkorte titel

INTEL-HF

Aandoening

Heart failure

Ondersteuning

Primaire sponsor: University of Tilburg and PoZoB

Overige ondersteuning: European Commission

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

The primary outcome measure will be assessed by questionnaires at baseline, 3 6 and 12 months.

Toelichting onderzoek

Achtergrond van het onderzoek

Background:

Heart failure is a prevalent chronic disease with a poor prognosis and a large negative impact on quality of life. Due to the general rise in life expectancy and improved treatment options for cardiovascular disease, the incidence and prevalence of heart failure are expected to increase. Since heart failure is an important cause for hospitalization, prevention of exacerbation of symptoms is important in order to facilitate timely intervention and preserve quality of life. Telemonitoring of symptoms may be a feasible and effective method for managing the health of heart failure patients.

Methods/Design:

This randomized controlled trial will examine the effects of integrated telecare and telemonitoring of blood pressure and weight in 200 older primary care patients with heart failure compared to usual care. The main outcomes are quality of life and hospitalization. Quality of life will be assessed with questionnaires at baseline and after 3, 6 and 12 months.

Discussion and implications of the research:

This study will show if integrated telemonitoring and telecare is feasible and affects quality of life and hospital admissions of older patients with heart failure in primary care.

Doel van het onderzoek

The aim of the present study is to examine the effect of integrated telemonitoring and telecare, compared to usual care, on quality of life and hospitalization in patients with heart failure in primary care.

Onderzoeksopzet

Baseline, 3, 6 and 12 months.

Onderzoeksproduct en/of interventie

Patients will be randomized to care as usual or integrated telemonitoring and telecare for the duration of one year.

Care as usual consists of regular care by a general practitioner, practice nurse and/or

cardiologist.

The integrated telemonitoring and telecare consists of remote monitoring of blood pressure and weight and a social alarm which will be handled by a case manager on a call center. The integrated telemonitoring and telecare takes place in addition to care as usual.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Patients aged between 65-85 years with diagnosed heart failure according to the most recent guidelines, who live at home.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Patients with a history of severe psychiatric illness other than mood or anxiety disorders, with cognitive impairments (e.g. dementia) determined by the GP, with a terminal illness, with insufficient mastery of the Dutch language, or those who are illiterate or cannot read due to visual impairments, will be excluded.

Onderzoeksopzet

Opzet

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

Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-12-2010
Aantal proefpersonen:	200
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies	
Datum:	23-10-2010
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 34749
Bron: ToetsingOnline
Titel:

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL2476
NTR-old	NTR2592
CCMO	NL30930.008.10
ISRCTN	ISRCTN wordt niet meer aangevraagd.
OMON	NL-OMON34749

Resultaten

Samenvatting resultaten

N/A