

Implementation of a decision aid for the treatment of localized prostate cancer

Gepubliceerd: 27-02-2017 Laatste bijgewerkt: 18-08-2022

The implementation rate of the decision aid in daily care is expected to depend on barriers perceived by care providers and/or patients. Use of the decision aid is expected to decrease decisional conflict and increase knowledge in patients.

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

Samenvatting

ID

NL-OMON26465

Bron

Nationaal Trial Register

Verkorte titel

JIPPA

Aandoening

Decision aid for Localised Prostate cancer
Prostaatkanker keuzehulp

Ondersteuning

Primaire sponsor: Radboud University Medical Center
Nijmegen, the Netherlands

Overige ondersteuning: CZ Fonds

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Toelichting onderzoek

Achtergrond van het onderzoek

To address the limited use of decision support in oncology daily practice, the implementation of a decision aids (DA) is studied in patients with localized prostate cancer who had more than one treatment option (surgery, external radiotherapy, brachytherapy and/or active surveillance). This study focusses primarily on the barriers and facilitators for DA use.

Both care providers and patients fill out questionnaires on decision making and on the use of the DA. The implementation rate was calculated as the portion of eligible patients that received a DA, using national cancer registry data on the number of eligible patients per hospital.

In addition, the effect of the DA is studied by comparing the intervention group (receiving usual care plus DA) with a control group (receiving usual care without DA).

Doel van het onderzoek

The implementation rate of the decision aid in daily care is expected to depend on barriers perceived by care providers and/or patients.

Use of the decision aid is expected to decrease decisional conflict and increase knowledge in patients.

Onderzoeksopzet

Patient questionnaires were filled out after the treatment choice was made but before the treatment was carried out.

Care provider questionnaires were filled out after about nine months of using the decision aid

Onderzoeksproduct en/of interventie

Care providers present a decision aid to their patients with prostate cancer to involve them in the choice of their treatment.

Care providers and patients fill out questionnaires.

A control group of patients receive usual care without decision aid. They also fill out questionnaires.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Men with localized prostate cancer

Eligible for two or more treatment options

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Insufficient knowledge of the Dutch language

Onderzoeksopzet

Opzet

Type: Interventie onderzoek

Onderzoeksmodel:	Parallel
Toewijzing:	Niet-gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Geneesmiddel

Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	01-02-2013
Aantal proefpersonen:	250
Type:	Werkelijke startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nog niet bepaald

Ethische beoordeling

Positief advies	
Datum:	27-02-2017
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	NL6098

Register

NTR-old

Ander register

ID

NTR6245

Radboudumc : CZ-201300071

Resultaten

Samenvatting resultaten

- * van Tol-Geerdink JJ, van Oort IM, Somford DM, Wijburg CJ, Geboers AD, Stalmeier PFM. Caregivers' and patients' responses to the implementation of a decision aid for prostate cancer treatment. Med Decision Making 36 (3): E107, 2016.
- * van Tol-Geerdink JJ, Cuypers M, Al-Itejawy HHM, van Uden-Kraan CF, de Vries M, Stalmeier PFM. Implementation and effect of three Dutch decision aids for prostate cancer; Results from the JIPPA study. Eur Urol S15 (13), E1580-1581, 2016
- * Cuypers M, Lamers R, Kil P, van Tol-Geerdink J, van Uden-Kraan C, van de Poll-Franse L, de Vries M. Uptake and usage of an online prostate cancer treatment decision aid in Dutch clinical practice: A quantitative analysis from the PCPCC trial. Health Informatics Journal 25(4), 1498-1510, 2019
- * van Tol-Geerdink JJ, Somford DM, van Oort IM, Wijburg CJ, Geboers AD, van Uden C, de Vries M, Stalmeier PFM. Implementation of a decision aid for localized prostate cancer in routine care; A successful implementation strategy. Health Informatics Journal doi: 10.1177/1460458219873528 (epub 2019)