A computer-based intervention to help COPD patients improve their lifestyle.

Gepubliceerd: 08-09-2009 Laatst bijgewerkt: 18-08-2022

Does computer tailored feedback improve the lifestyle of COPD patient?

Ethische beoordeling	Niet van toepassing
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON27254

Bron
NTR

Verkorte titel
DIS

Aandoening

disease management; electronic patient record; patient self management; lifestyle intervention. ketenzorg; elektronisch patiënten dossier; leefstijl interventie.

Ondersteuning

Primaire sponsor: performer = Maastricht University
financer = ZonMw
Overige ondersteuning: ZonMW

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

The main outcome measures are:
1. The observed levels of self management and use of information technology at 1 year;

2. The percieved benefits for care, self-management, and organization at 1 year;
3. The estimated costs and benefits of a full implementation at 1 year.

Toelichting onderzoek

Achtergrond van het onderzoek

The goal of this project is to improve the self management of COPD patients with the help of information
technology as part of a disease-management approach. We will integrate two existing evidence-based methods to realize this goal. The first method is a disease-management approach with EPR support that has been validated for diabetes care. The second method is a computer-tailored feedback approach for patient self management that has been validated for smoking and physical activity. Both methods have been developed at University Maastricht.

In the Maastricht region a Diagnosis-Treatment Combination (DBC) reimbursement system for COPD
will be implemented in 2008. This DBC is based on our validated disease-management approach. In this proposal we will enrich this program by an intervention in which we provide the COPD-patient with computer-tailored feedback between consultations.

We will assess the feasibility of this intervention by conducting a pilot study in which we examine the effects on (1) patient self management and (2) the organization of care; (3) the use and appreciation of the information technology; (4) the costs and benefits of a full implementation. The study has a pre-post design with process measurement during the intervention. We recruit 48 COPD-patients equally divided over 4 general practitioners. Main outcome measures are (1) the observed levels of self management and use of information technology; (2) the perceived benefits for care, self-management, and organization; (3) the estimated costs and benefits of a full implementation. Data sampling takes place by a web-based questionnaire, physician consultation, information-system logging, in-depth interviews, and focus groups. Within the pilot we conduct a small experiment to compare different frequencies to remind the patient to revisit the computer-tailoring system. For this experiment we use a balanced-block design with three blocks of four patients per general practitioner. At the end of the project the results are commented by an expert panel and recommendations are given about the optimization of the EPR infrastructure.

Doel van het onderzoek

Does computer tailored feedback improve the lifestyle of COPD patient?

Onderzoeksopzet

1 year.

Onderzoeksproduct en/of interventie

The self help manager is a computer program that provides the patient with feedback. The patient will fill in a questionnaire and the responses to the questions will yield a specific advice.

Contactpersonen

Publiek

P. Debyeplein 1
H. Tange
P. Debyeplein 1
Maastricht 6229 HA
The Netherlands
+31 (0)43-3882230

Wetenschappelijk

P. Debyeplein 1
H. Tange
P. Debyeplein 1
Maastricht 6229 HA
The Netherlands
+31 (0)43-3882230

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

COPD patients, who are treated by a general practitioner, according to the DBC protocol for COPD.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. COPD patients, who are treated by the medical specialist;

2. Receive care by public health nurses;

3. Patients who have an insufficient command of the Dutch language.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Niet-gerandomiseerd

Controle: N.v.t. / onbekend

Deelname

Nederland

Status:	Werving nog niet gestart
(Verwachte) startdatum:	15-02-2010
Aantal proefpersonen:	48
Type:	Verwachte startdatum

Ethische beoordeling

Niet van toepassing

Soort:	Niet van toepassing

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	NL1879
NTR-old	NTR1993
Ander register	Zonmw : 80-82605-98-058
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten
N/A