The Lymphoma InterVEntion: personalized feedback and a self-management intervention to improve patient reported outcomes

Gepubliceerd: 14-07-2016 Laatst bijgewerkt: 19-03-2025

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

Samenvatting

ID

NL-OMON27749

Bron
Nationaal Trial Register

Verkorte titel
Lymphoma InterVEntion [LIVE]

Aandoening

lymphoma; self-management; web-based intervention; personalized feedback; education; patient reported outcomes

Ondersteuning

Primaire sponsor: Netherlands Comprehensive Cancer Organisation (IKNL)
Overige ondersteuning: Jonker-Driessen Stichting, Oestgeest, the Netherlands

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Self-management skills (heiQ; Osborne, 2007), Satisfaction with information provision (ISQ; Thomas, 2004) , and psychological distress (HADS; Zigmond, 1983).

1. Osborne RH, Elsworth GR, Whitfield K. The Health Education Impact Questionnaire (heiQ): an outcomes and evaluation measure for patient education and self-management interventions for people with chronic conditions. Patient education and counseling. 2007;66(2):192-201.
2. Thomas R, Kaminski E, Stanton E, Williams M. Measuring information strategies in oncology - developing an information satisfaction questionnaire. Eur J Cancer Care. 2004;13(1):65-70.
3. Zigmond AS, Snaith RP. The hospital anxiety and depression scale. Acta psychiatrica Scandinavica. 1983;67(6):361-70.

Toelichting onderzoek

Achtergrond van het onderzoek

Patients with lymphoma are at risk of experiencing adverse problems, with up to a quarter reporting psychological distress. Greater resources for coping with the cancer experience can reduce the risk for poor psychological health. Personalized feedback and a web-based self-management intervention provide patients with knowledge and skills, which might improve empowerment and increase active participation to self-manage their symptoms, since time spent with a health care professional is limited.

Doel van het onderzoek

The purpose of this study is to develop an intervention for patients with lymphoma to reduce the impact of psychological problems that arise after diagnosis. The research question is whether personalized feedback and/or a self-management intervention compared with usual care is effective in reducing psychological distress and/or improving self-management skills and information provision.

Onderzoeksopzet

Baseline (6 to 12 months after lymphoma diagnosis) and 16 weeks, 12 months and 24 months after baseline

Onderzoeksproduct en/of interventie

The Lymphoma InterVEntion [LIVE] trial consists of two components: (1) the provision of personalized feedback to patients about their self-reported symptoms and quality of life in comparison with other age and sex-matched lymphoma patients and/or a norm population, and (2) a web-based self-management intervention Living with lymphoma directed at improving self-management skills and information provision, while reducing psychological distress. The provision of personalized feedback on PROs facilitates monitoring one’s own symptoms and functioning. The second component, Living with lymphoma, is an adaptation from BREAst cancer e-healTH (BREATH) for patients with breast cancer survivors and is based on cognitive behavioural therapy (CBT) components, such as psychoeducation and cognitive reframing and is directed to lymphoma patients.

The control group receives usual care.

Contactpersonen

Publiek

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Diagnosed 6 to 12 months before inclusion with Hodgkin lymphoma or non-Hodgkin lymphoma, including chronic lymphocytic leukaemia as defined by the International Classification of diseases for Oncology-3 codes (ICD-O-3)

2. Diagnosed in one of the participating hospitals

3. Aged 18 years or older at time of diagnosis

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Problems with the Dutch language

2. Severe psychopathology or dementia

3. Patients in transition to terminal care

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blindering:	Open / niet geblindeerd
Controle:	Actieve controle groep

Deelname

Nederland

Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-09-2016
Aantal proefpersonen:	222
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies

Datum:	14-07-2016
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 42473
Bron: ToetsingOnline
Titel:

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL5790
NTR-old	NTR5953
CCMO	NL54096.028.15
OMON	NL-OMON42473

Resultaten