Telerehabilitation in patients with recent hospitalization due to Acute Decompensated Heart Failure.

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We hypothesize that comprehensive home-based rehabilitation with remote guidance (cardiac telerehabilitation, CTR) tailored to individual disabilities has beneficial effects on the functional capacity in patients after hospital admission due to...

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

Samenvatting

ID

NL-OMON27821

Bron
NTR

Verkorte titel
Tele-ADHF

Aandoening

Congestive heart failure

Ondersteuning

Primaire sponsor: Máxima Medisch Centrum, Dominee Theodor Fliednerstraat 1, 5631 BM Eindhoven, The Netherlands
Overige ondersteuning: Internal funding

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

The primary endpoint is physical functional capacity described using the Short Physical Performance Battery (SPPB) score, which is assessed at week 0, week 18 and week 26.

Toelichting onderzoek

Achtergrond van het onderzoek

Cardiac rehabilitation (CR) has favourable effects in chronic heart failure (CHF) patients on exercise capacity, the risk at hospital (re-)admission and quality of life. Although CR is generally recommended, it is still under-utilized in daily clinical practice mainly due to patient related factors (e.g. dependence on others for transportation, high level of disability). We hypothesize that comprehensive home-based rehabilitation with remote guidance (cardiac telerehabilitation, CTR) tailored to individual disabilities has beneficial effects on the functional capacity in patients after hospital admission due to acute decompensated heart failure.

Doel van het onderzoek

We hypothesize that comprehensive home-based rehabilitation with remote guidance (cardiac telerehabilitation, CTR) tailored to individual disabilities has beneficial effects on the functional capacity in patients after hospital admission due to acute decompensated heart failure.

Onderzoeksopzet

Inclusion: during admission to the hospital primarily due to acute decompensated heart failure (ADHF).
Pre-intervention: uptitration of heart failure medication, follow-up with Remote Patient Monitoring (RPM).
Randomization: after stabilization and first outcome measurement (T0) the participants will be randomized to control or intervention group.
Intervention: 18 weeks telerehabilitation program vs. no rehabilitation.
T1: 18 weeks after start intervention.
T2: 26 weeks (6 months) after starting the intervention.

Onderzoeksproduct en/of interventie

An 18-weeks multidisciplinary telerehabilitation program with exercise training by physical and occupational therapist, supported by a (remote) technology-assisted dietary intervention and mental health guiding by a physiologist. The training program starts with three centre-based and two home-based video exercise training sessions followed by video coaching sessions. The mental health and dietary program are executed using individual and group video sessions.

Contactpersonen

Publiek

Máxima Medisch Centrum
Mayke van Leunen

+31408888200

Wetenschappelijk

Máxima Medisch Centrum
Mayke van Leunen

+31408888200

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- Age 18 years and above
- Diagnosed with congestive heart failure
- Hospitalization primarily for acute decompensated heart failure (ADHF) at the time of inclusion
- Sufficient digital capacity or caretaker with digital capacity
- Able to speak and read the Dutch language

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- Unable to understand the purpose and procedures of the study
- Unable to mobilize (e.g. due to orthopaedic limitations)
- Recent CR program followed (latest 12 months)
- No internet connection
- Untreated life-threatening cardiac arrhythmias
- Early phase after acute coronary syndrome (latest 3 months)
- Uncontrolled hypertension
- Advanced atrioventricular block
- Symptomatic aortic stenosis

- Up-coming (cardiac) surgery in 6 months

Onderzoeksopzet

Opzet

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

Deelname

Nederland

Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-09-2021
Aantal proefpersonen:	64
Type:	Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nog niet bepaald

Ethische beoordeling

Niet van toepassing

Soort:	Niet van toepassing

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 56416
Bron: ToetsingOnline
Titel:

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL9619
CCMO	NL78154.015.21
OMON	NL-OMON56416

Resultaten