

The effects of structured follow-up from primary care for patients during their cancer journey. A randomized controlled trial.

Gepubliceerd: 21-06-2016 Laatste bijgewerkt: 18-08-2022

Structured follow-up from primary care will effect patients' satisfaction with care and health care utilisation.

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

Samenvatting

ID

NL-OMON28691

Bron

NTR

Verkorte titel

GRIP study

Aandoening

Cancer

Ondersteuning

Primaire sponsor: Universitair Medisch Centrum Utrecht (UMCU)

Overige ondersteuning: Danone Ecosystem Fund

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

- 1) Patient satisfaction with care

- 2) Health care utilisation

Toelichting onderzoek

Achtergrond van het onderzoek

Health care professionals and patients advocate transfer of care and follow-up from secondary to primary care in the Netherlands, due to the increase in the number of chronic cancer patients, cancer incidence and improving outcomes of cancer therapy and expanding possibilities for personalized cancer care. However, the effectiveness of structured patient follow-up from primary care during the cancer journey has not been studied yet. Therefore, the GRIP study, a multicenter randomized controlled two-arm trial, evaluates the effects of structured follow-up care from diagnosis, for cancer patients provided from primary care on healthcare utilization and patient satisfaction with care.

Country of recruitment: The Netherlands

Doel van het onderzoek

Structured follow-up from primary care will effect patients' satisfaction with care and health care utilisation.

Onderzoeksopzet

- 1) Time Out consultation with the GP after diagnosis and before final treatment decision.
- 2) Contact with HON during and after treatment, at least 3 contacts.
- 3) Questionnaires will be send at the moment of consensus for participation (T0), two weeks after inclusion (T1), three months after inclusion (T2), six months after inclusion (T3), nine months after inclusion (T4) and twelve months after inclusion (T5).

Timing of T3-T5 depends on duration of therapy. T5 will always be send 3 months after end of therapy.

Onderzoeksproduct en/of interventie

- 1) Time out consultation with general practitioner
- 2) Home visits by Homecare Oncology Nurse

Contactpersonen

Publiek

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- 1) Newly diagnosed with the following types of cancer: breast cancer, colorectal cancer, gynaecologic cancer, lung cancer or melanoma.
- 2) Cancer therapy is to be initiated with curative intent.
- 3) Patients' general practitioner participates in the GRIP study.
- 4) Patient is 18 years old or older.
- 5) Inclusion within two weeks after diagnosis.

Belangrijkste redenen om niet deel te kunnen nemen

(Exclusiecriteria)

- 1) Major psychiatric disease and personality disorders.
- 2) Unable to fill in questionnaires.

Onderzoeksopzet

Opzet

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

Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	01-03-2015
Aantal proefpersonen:	150
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies	
Datum:	21-06-2016
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	NL5672
NTR-old	NTR5909
Ander register	METC : 15-075/C

Resultaten