

Development of the Nijmegen Decision Tool for chronic low back pain to guide patient triage and treatment.

No registrations found.

Ethical review	Not applicable
Status	Recruiting
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON27306

Source

NTR

Brief title

NDT-CLBP

Health condition

low back pain; lumbar spine; degenerative spine disorders; decision model; shared decision making; patient reported outcome measures

lage rugklachten; degeneratieve wervelkolomaandoeningen; beslismodel; vragenlijst

Sponsors and support

Primary sponsor: Sint Maartenskliniek, Nijmegen, The Netherlands

VU medical center, Amsterdam, The Netherlands

VU EMGO, Amsterdam, The Netherlands

Source(s) of monetary or material Support: = sponsor, and Innvatiefonds

Zorgverzekeraars

Intervention

Outcome measures

Primary outcome

Functional ability

Secondary outcome

Pain; Quality of Life; Satisfaction

Measures of efficiency, relevance, usability for patients and professionals

Study description

Background summary

Low back pain (LBP) is responsible for the greatest burden of all diseases. Chronic Low Back Pain (CLBP) is among the most common reasons why patients visit a spine surgeon. As the CLBP population is heterogeneous, it remains a challenge to address etiology and to suggest treatment options. (Inter-)National guidelines recommend to develop a decision tool to triage towards either surgical or nonsurgical interventions.

The Nijmegen decision tool, consisting of a web-based screening questionnaire, a systematic follow up of outcomes (i.e. outcome monitoring) built in the patient-based system of the SweSpine outcomes Registry, is developed to support patient-triage and is based on evidence and professional (Delphi) consensus. Since April 2012 all new patients complete the questionnaire as a part of usual care, consisting of several indicators potentially predicting successful treatment outcome or persistence of pain complaints, and are systematically followed over time.

In this study pre-intervention patient profiles have been determined and a decision tool ('proof-of-principle') will be developed, based on indicators predicting successful or non-response at one-year follow-up outcome of spine surgery, of a non-surgical, multidisciplinary Combined Physical and Psychological (CPP) program and of counseling (including physical therapy in primary care). After pilot testing, the tool will be implemented in other spine clinics and externally validated.

Study objective

The NDT-CLBP is a valid tool to guide treatment based on patient profiles for secondary spine care professionals

Study design

Follows usual care pathways - systematic outcome monitoring:

pre-treatment; (6 months follow up); 12 and 24 months follow up

Intervention

NDT-CLBP;p decision for treatment and treatment as usual

Contacts

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Eligibility criteria

Inclusion criteria

Patients referred with chronic low back pain:

- adults, aged 18 years and older
- duration of low back pain complaints for 3 months or more

Exclusion criteria

- acute low back pain complaints

Study design

Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Control:	N/A , unknown

Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	01-01-2015
Enrollment:	1000
Type:	Anticipated

Ethics review

Not applicable	
Application type:	Not applicable

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL5350
NTR-old	NTR5946
Other	Innovatiefonds Zorgverzekeraars : 2921

Study results

Summary results

several publications planned for 2016 and further