

Collaborative dementia care, Strengthening and evaluation of early transitions: On the road to integrated care

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1. To evaluate the clinical and cost effectiveness of 4 models of case management for persons with dementia and their main informal caregiver. 2. To evaluate the effectiveness of the 'dementiewjizer', an internet application that enables...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Dementia and amnestic conditions
Study type	Observational non invasive

Summary

ID

NL-OMON36338

Source

ToetsingOnline

Brief title

COMPAS

Condition

- Dementia and amnestic conditions

Synonym

alzheimer's disease, dementia

Research involving

Human

Sponsors and support

Primary sponsor: Vrije Universiteit Medisch Centrum

Source(s) of monetary or material Support: Subsidie in het kader van Nationaal Programma Ouderen van ZonMW

Intervention

Keyword: - casemanagement/integrative care, - dementia, - evaluation, - usual care

Outcome measures

Primary outcome

- Frequency and severity of behavioural problems of patients (NPI-Q symptoms)

and the stress this causes to informal carers (NPI-Q distress)- --

Psychopathology (GHQ12) in the caregiver

Secondary outcome

- Quality of life (pt: QoL-AD en EQ-5D+c, carer: EQ-5D), and functioning

(Katz-ADL)

- Care load of informal carers (CarerQoL)

- Met and unmet care needs of informal carers (CANE)

- (Cost of) care usage

Study description

Background summary

Dementia care is currently undergoing a transition in which better integrated (collaborative) care is implemented, or is being developed, in a number of regions. Improvement of dementia care is a highly important priority for elderly persons in the networks of AMC and VUmc. Dementia is a chronically devastating condition that has great consequences for the people suffering from it, and for their families and society. As a result of the ageing population, the number of people with dementia will almost double and dementia is already the most costly condition for society in

health care. The current reactive and fragmented dementia care is insufficiently utilising the available opportunities to improve the well-being and quality of life of people suffering from dementia. Maybe casemanagement and integrated care are the best fitting answer. There is still insufficient knowlegde about the clinical- and cost effectiveness of these interventions. In addition, it is unknown which model of casemanagement works best and against what costs.

Study objective

1. To evaluete the clinical and cost effectiveness of 4 models of case management for persons with dementia and their main informal caregiver.
2. To evaluete the effectiveness of the 'dementiewjizer', an internet application that enables informal caregivers to find appropriate care services and thereby increase their own functioning.

Study design

(observational) multi cohort study.

Study burden and risks

Compared to it's potential benefits the burden of participation in these evaluation is limited. There are no risks associated with participation.

Contacts

Public

Vrije Universiteit Medisch Centrum

van der Boechorststraat 7
1081 BT Amsterdam
NL

Scientific

Vrije Universiteit Medisch Centrum

van der Boechorststraat 7
1081 BT Amsterdam
NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

Informal caregivers (healthy persons):

1. Taking main responsibility for informal care
2. Good command of Dutch

Patients:

1. Diagnosed by a GP or medical specialist.
2. Informal care provided
3. Good command of Dutch

Exclusion criteria

Informal caregiver:

1. bedridden or terminal illness;

Patients:

1. terminal illness
2. long term admission to a nursing or elderly home expected within a period of 6 months
3. case management is not permitted in usual care regions

Study design

Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial

Masking: Open (masking not used)

Primary purpose: Health services research

Recruitment

NL
Recruitment status: Recruitment stopped
Start date (anticipated): 01-03-2011
Enrollment: 620
Type: Actual

Ethics review

Approved WMO
Date: 18-11-2010
Application type: First submission
Review commission: METC Amsterdam UMC
Approved WMO
Date: 26-09-2011
Application type: Amendment
Review commission: METC Amsterdam UMC

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
CCMO	NL32949.029.10