







Disability prevention in the older population: use of information technology for health risk appraisal and prevention of functional decline

Submission date 14/07/2005	Recruitment status No longer recruiting	 Retrospectively registered
		 Protocol not yet added
Registration date 19/08/2005	Overall study status Completed	 SAP not yet added
		 Results added
Last Edited 21/10/2015	Condition category Signs and Symptoms	 Raw data not yet added
		 Study completed

Plain English Summary

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

Prof Andreas Stuck

Contact details

University Department of Geriatrics
Spital Bern - Ziegler
Morillonstrasse 75-91
Berne
Switzerland
CH-3001
+41 (0)31 970 73 29
andreas.stuck@spitalbern.ch

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Protocol/serial number

QLK6-CT-1999-02205

Study information**Scientific Title**

Disability prevention in the older population: use of information technology for health risk appraisal and prevention of functional decline

Acronym

PRO-AGE (PRevention in Older People - Assessment in GEneralists' practices)

Study hypothesis

The goal of the project is to change health risk behaviours in older persons with the longer-term aim of preventing disability and minimising unnecessary service utilisation. This is achieved by the development of a new intervention that could be integrated into primary care at relatively low costs and that could be used as a cross-national database for comparative evaluation on determinants of healthy ageing.

We hypothesise that at each site the intervention will:

1. Result in favourable changes in health behaviour:
 - 1.1. Higher level of physical activity
 - 1.2. Reduced fat intake
 - 1.3. Higher fruit/fibre intake
 - 1.4. Reduction of hazardous alcohol use
 - 1.5. Increase in seat belt use
 - 1.6. Reduction of smoking
2. Result in a higher uptake of preventive care:
 - 2.1. Colon cancer screening
 - 2.2. Breast cancer screening
 - 2.3. Influenza vaccination
 - 2.4. Pneumococcal vaccination
 - 2.5. Blood pressure measurement
 - 2.6. Glucose measurement
 - 2.7. Cholesterol measurement
 - 2.8. Vision screening
 - 2.9. Hearing screening
 - 2.10. Dentist visits
3. Improve older persons self efficacy in patient-physician interaction and taking care of ones own health

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

GP practice

Study type(s)

Prevention

Participant information sheet

Condition

The Ageing Population and Disability/Epidemiology

Interventions

We conducted three randomised controlled studies (three sites: Hamburg, London, Bern). The intervention consisted of the administration of the health risk appraisal for older persons (HRA-O), and of a site specific reinforcement. In Hamburg, the reinforcement consisted of small group sessions or of home visits, in London of computer-based support and a computer-assisted reminder system, and in Bern of home visits.

Control: no intervention

Intervention Type

Other

Phase

Not Specified

Primary outcome measure

1. Self-reported use of preventive care at one-year follow-up
2. Self-reported health behaviour at one-year follow-up

Secondary outcome measures

1. Self-reported health and functional parameters at one-year follow-up
2. Self-efficacy in patient-physician interaction

Overall study start date

01/02/2000

Overall study end date

31/01/2003

Eligibility

Participant inclusion criteria

In each site about 20 - 30 general physician practices (three in London) generate lists of all persons aged 65 and older (Germany: 60 and older) in their practices.

Participant type(s)

Patient

Age group

Senior

Sex

Both

Target number of participants

10,000

Participant exclusion criteria

1. Cognitive impairment
2. Dependent in basic activities of daily living (BADL) or living in nursing home
3. Terminal disease
4. Did not speak national language

Recruitment start date

01/02/2000

Recruitment end date

31/01/2003

Locations**Countries of recruitment**

Germany

Switzerland

United Kingdom

Study participating centre

University Department of Geriatrics

Berne

Switzerland

CH-3001

Sponsor information**Organisation**

University of Berne (Switzerland)

Sponsor details

Department of Geriatrics
Spital Berne - Ziegler
Morillonstrasse 75-91
Berne
Switzerland
CH-3001
+41 (0)31 970 73 29
andreas.stuck@spitalbern.ch

Sponsor type
University/education

ROR
<https://ror.org/02k7v4d05>

Funder(s)

Funder type
Government

Funder Name
European Union (Belgium) (ref: QLK6-CT-1999-02205)

Funder Name
Federal Office of Education and Science (Switzerland) (ref: BBW 990311.1)

Funder Name
The German Federal Ministry for Family, Senior Citizens, Women and Youth (Bundesministerium für Familie, Senioren, Frauen und Jugend) (Germany)

Funder Name
Max und Ingeburg Herz Foundation (Max und Ingeburg Herz Stiftung) (Germany)

Funder Name
Robert Bosch Foundation (Robert Bosch Stiftung) (Germany)

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Other publications		27/02/2002		Yes	No
Other publications		01/11/2002		Yes	No
Other publications		01/08/2006		Yes	No
Other publications		01/12/2007		Yes	No
Other publications		01/09/2008		Yes	No
Results article	results	19/10/2015		Yes	No