

# A randomised prospective controlled study to assess the effects of a respiratory case management model on hospital readmission rates in patients with moderate to severe chronic obstructive pulmonary disease

<b>Submission date</b> 13/09/2005	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 27/09/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 14/06/2016	<b>Condition category</b> Respiratory	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**Protocol serial number**  
N/A

# Study information

## Scientific Title

A randomised prospective controlled study to assess the effects of a respiratory case management model on hospital readmission rates in patients with moderate to severe chronic obstructive pulmonary disease

## Acronym

EXHALE (Exercise, Home support and Lung Education)

## Study objectives

Whether intensive education, support and individualised exercise programme can reduce hospital admissions in patients with moderate to severe Chronic Obstructive Pulmonary Disease (COPD).

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Sefton Research and Ethics Committee, September 2004. Ref: 04/Q1501/75

## Study design

Randomised controlled trial

## Primary study design

Interventional

## Study type(s)

Prevention

## Health condition(s) or problem(s) studied

Chronic Obstructive Pulmonary Disease

## Interventions

Case management model of care: weekly home visits and small group exercise sessions for eight weeks. Monthly visits thereafter, with weekly, then fortnightly phone calls. Dedicated telephone support seven days a week for 12 months.

Control group have usual care.

## Intervention Type

Other

## Phase

Not Specified

## Primary outcome(s)

Number of hospital admissions for COPD at 12 months

## Key secondary outcome(s)

1. Quality of life/health status
2. Exercise capacity, lung function, and treatment over a one year period
3. Total number and length of hospital admissions for any cause
4. Number of General Practitioner visits, accident and emergency department visits over the 12 month follow up

**Completion date**

30/09/2006

## Eligibility

**Key inclusion criteria**

1. Patients with moderate to severe COPD confirmed on spirometry
2. Aged 40 years or more who have had one or more admission to hospital in last 12 months
3. Must be current or ex-smokers
4. Must have home telephone

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Sex**

All

**Key exclusion criteria**

1. Patients with previous diagnosis of asthma
2. Significant/unstable cardiac dysfunction
3. Underlying malignancy, dementia or major psychiatric illness
4. Participation in pulmonary rehabilitation in last 12 months

**Date of first enrolment**

01/10/2004

**Date of final enrolment**

30/09/2006

## Locations

**Countries of recruitment**

United Kingdom

England

**Study participating centre**  
**University Hospital Aintree**  
Liverpool  
United Kingdom  
L9 7AL

## **Sponsor information**

**Organisation**  
University Hospital Aintree (UK)

**ROR**  
<https://ror.org/008j59125>

## **Funder(s)**

**Funder type**  
Government

**Funder Name**  
South Sefton Primary Care Trust (in collaboration with Liverpool and Knowsley Primary Care Trusts) (UK)

## **Results and Publications**

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**  
Not provided at time of registration