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Bridging the transition from hospital to home: Effects of the VITAL Telehealth Program on recovery for CABG patients and their caregivers

Submission date 06/09/2005	**Recruitment status** No longer recruiting	[_] Prospectively registered [_] Protocol [_] Statistical analysis plan [_] Results [_] Individual participant data [_] Record updated in last year
Registration date 13/09/2005	**Overall study status** Completed	
Last Edited 04/08/2011	**Condition category** Surgery	

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers
AØ6-B22-04A

Study information

Scientific Title

Study objectives
1. CABG patients who participate in the VITAL program will have a significantly greater decrease in anxiety between entry into the program and at 2 weeks after program completion as compared to CABG patients who receive usual care.
2. Caregivers of CABG patients who participate in the VITAL program will have a significantly greater decrease in anxiety between entry into the program and at 2 weeks after program completion as compared to caregivers of CABG patients who receive usual care.

Ethics approval required
Old ethics approval format

Ethics approval(s)
McGill University, Montreal QC and Atlantic Health Sciences Corporation, Saint John NB

Study design
Randomised controlled trial

Primary study design
Interventional

Secondary study design
Randomised controlled trial

Study setting(s)
Not specified

Study type(s)
Not Specified

Participant information sheet

Health condition(s) or problem(s) studied
Recovery from coronary artery bypass graft surgery

Interventions
Participants are randomly assigned to receive usual follow-up care or follow-up care with telehealth equipment. Patients and their caregivers in both groups receive all the usual cardiac teaching that is available during hospitalization. This consists of cardiac instruction from a multidisciplinary health care team on the day of admission to hospital, and on the second, third and fourth post-operative days. Patients are advised to follow-up with their family physician one week after discharge and then to return for a 6 week appointment with the cardiac surgeon. Caregivers of patients who are assigned to receive follow-up with the telehealth equipment are also provided with two instructional sessions post-operatively and this then enables them to take the equipment home for one week. Having the telehealth equipment at home allows for daily audio-video visits between a patients home and the hospital. These daily sessions last approximately 30 minutes each.

Intervention Type

Procedure/Surgery

Phase
Not Specified

Primary outcome measure
The 20-item State Anxiety Inventory (S-STAI) administered by telephone pre-operatively at baseline and at 5 days and 3 weeks after discharge

Secondary outcome measures
1. Center for Epidemiologic Studies Depression Scale -10 (CESD-10) administered pre-operatively at baseline and at 5 days and 3 weeks after discharge
2. Health Care Utilization data collected at 5 days and 3 weeks after discharge

Overall study start date
03/01/2005

Completion date
30/04/2007

Eligibility

Key inclusion criteria
1. The patient is undergoing first-time CABG surgery
2. The patient is hospitalized and waiting for CABG surgery, or is admitted to hospital for surgery after being on the cardiac wait list
3. There is a caregiver available and present on admission and/or during the patients hospitalization
4. There is a telephone in the home
5. There is a grounded electrical outlet, or three-prong plug outlet, in the home
6. The patient and caregiver speak and understand English and are cognitively able to participate in the interviews
7. Both the patient and caregiver will be likely to be able to adhere with the VITAL program
8. The patient and caregiver both consent to participate

Participant type(s)
Patient

Age group
Not Specified

Sex
Not Specified

Target number of participants
174

Key exclusion criteria

1. Patient is scheduled for valve replacement surgery
2. An attending physician believes it is necessary for a patient to have the VITAL program upon discharge.

Date of first enrolment
03/01/2005

Date of final enrolment
30/04/2007

Locations

Countries of recruitment
Canada

Study participating centre
54 Clipper Passage
Saint John, New Brunswick
Canada
E2K0A9

Sponsor information

Organisation
McGill University (Canada)

Sponsor details
3506 University Street
School of Nursing
Montreal QC
Canada
H3A2A7

Sponsor type
University/education

Website
http://www.nursing.mcgill.ca/

ROR
https://ror.org/01pxwe438

Funder(s)

Funder type
University/education

Funder Name
Heart & Stroke Foundation of Canada Fellowship

Funder Name
McGill University

Funder Name
Groupe de recherche interuniversitaire

Funder Name
en soins infirmiers de Montréal (GRISIM) Fellowship

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