PROJECT INFORMATION

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Testing Whether a Referral to a Telehealth Program Helps African-American and Hispanic Adults with COPD Transition from Hospital to Home

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Organization

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What was the research about?

Chronic obstructive pulmonary disease, or COPD, is a lung disease that makes it hard to breathe. It is a common reason for hospital stays. Pulmonary rehabilitation, or rehab, may help patients avoid future hospital stays for COPD. But some patients, including many African-American and Hispanic patients with COPD, have a hard time getting to a clinic for rehab.

In this study, the research team wanted to learn if referral to a telehealth rehab program called TelePR helped patients avoid going back to the hospital. Telehealth provides care to patients remotely using phones, videos, or other devices. The team compared patients referred to TelePR with those referred to in-person rehab at a clinic, or usual care.

What were the results?

Only 85 of the 209 patients in the study completed one or more rehab sessions.

After six months, the study found no difference between patients referred to TelePR and those referred to usual care in

- Going back to the hospital or dying
- Quality of life
- Ability to walk, COPD symptoms, or ease of breathing

- Knowledge about COPD or ability to manage COPD
- Social support, depression, or anxiety

Of patients who completed one or more sessions, patients who took part in TelePR had less fatigue than those in usual care after two months.

Who was in the study?

The study included 209 patients with COPD. Of these, 57 percent were African American, and 43 percent were Hispanic. The average age was 66, and 59 percent were women. All had a hospital stay for COPD at one of nine hospitals in the New York City area.

What did the research team do?

The research team assigned patients by chance to receive a referral to TelePR or in-person care. The referral was for 16 guided rehab sessions with respiratory therapists over eight weeks.

For TelePR, patients received a bike fitted with a Wi-Fi modem, a tablet, and equipment to monitor blood pressure and vital signs during exercise sessions. This equipment allowed therapists to monitor up to three patients at the same time using online technology. Patients could complete the 90-minute rehab sessions remotely at home or at a community center. Patients referred to in-person care completed sessions at one of three clinics. During the sessions, patients in both

groups watched videos on topics like oxygen therapy and breathing techniques.

Patients took surveys at the start of the study and again 2, 6, and 12 months later.

Patients, caregivers, and healthcare providers gave input on the study.

What were the limits of the study?

Fewer patients completed rehab sessions than expected. Some patients didn't take part in sessions because of illness; some had problems getting their

doctor's approval to exercise. Results may differ if more patients took part in sessions.

Future studies could look at how to get more patients to take part in sessions.

How can people use the results?

Doctors can use these results when considering ways to help patients with COPD avoid hospital stays.

To learn more about this project, visit www.pcori.org/Hajizadeh367.