primary studies - published, non RCT

Self-administration of drugs for cystic fibrosis.

Code: PM10095691 **Year:** 1998 **Date:** 1998 **Author:** Trapp M

Study design (if review, criteria of inclusion for studies)

Parallel CCT of 2 interventions with a convenience control group sample assessed prior to commencement of the other 2 interventions. Aim: To see whether self-administration of drugs leads to greater knowledge about medications.

Participants

Admitted to the ward for at least 5 days. Attrition included 2 deaths, 4 too ill, 5 discharged early and 1 had a change of consultant. Population of interest N = 50. Convenience control sample n = 15. Number randomised n = 30. 15 in each group. Over 18 years, mean age 28 years.

Interventions

Phase 1: assessment 1.Control group (n = 15). Drug information based on current teaching practice. 2. Teaching group (n = 14). Additional teaching and participant friendly drug leaflets. 3. Administration group (n = 9). Phase 2: (24 hours) leaflets and prescription. Phase 3: (12 to 17 day) supply of medication for self-administration. Phase 4: Knowledge questionnaire prior to discharge. Phase 5: 6-week follow up medication questionnaire at clinic or by telephone. Additional teaching, leaflets and self-administration of own drugs.

Outcome measures

Participant knowledge - assessed with a verbal questionnaire on admission, at discharge and at 6 weeks after discharge. Based on questionnaire designed by Proos 1992.

Main results

Self-administration studies found in the nursing literature must be interpreted cautiously because of the lack of true experimental trials.

http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/186/CN-00161186/frame.html

See also

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Keywords

Adult; non pharmacological intervention - psyco-soc-edu-org; Self-Management; information; Psychoeducation; Behavioural interventions;