

# **“MEDITRACK” RANDOMIZED CONTROL STUDY**

**Role of the recommendations to improve patient compliance in using compression stockings**

**J.F Uhl, J.P Benigni, M. Chahim, F. Delinotte**



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**ICC**  
International Compression Club

 UNIVERSITÉ  
PARIS DESCARTES  
Unité de Recherche **URDIA EA 4465**

# Conflict of interest:

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This study was sponsored  
by **MEDI Bayreuth**

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# BACKGROUND

Patient **compliance** is the cornerstone of compression therapy success.

However, there was no mean to assess it other than **patient self-report**, which is not reliable.

## BACKGROUND (2)

- Several studies\* have reported patient's compliance as low as 30 to 50% after 3 months of compression stocking use.
- Patient's lack of education<sup>#</sup> seems to be at the root of this noncompliance.
- To our knowledge no one has objectively assessed the true (or real) compliance.

\* Raju et al. *Ann Vasc Surg.* 2007 ; 21(6):790-5.

\*# Ziaja et al. *Phlebology.* 2011;26:353-360

# OBJECTIVES

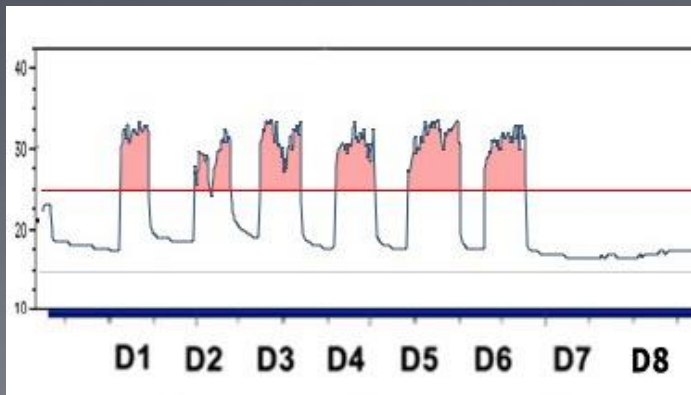
- To accurately measure the **real compliance** in using compression stockings by using a thermal probe ( Thermotrack device\* )
- To assess the **role of the recommendations** to improve the patient compliance.

# METHODS : the thermotrack « spy » device

Thermal probe included in the compression stockings



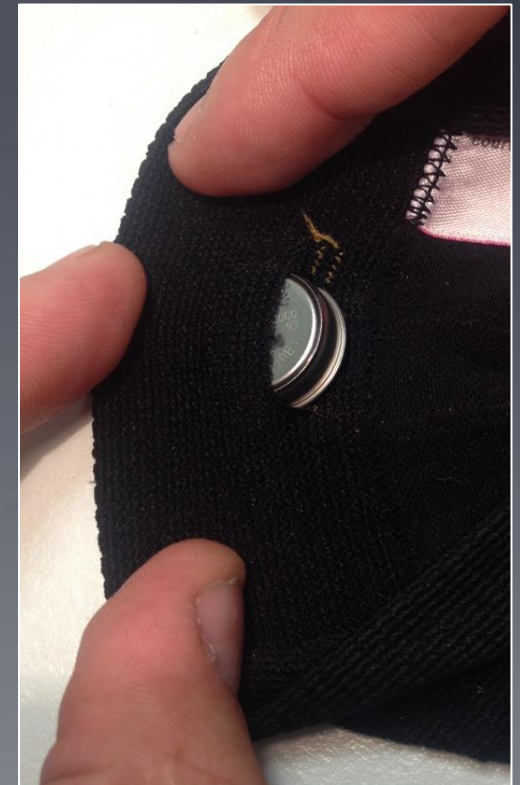
It is a small disk recording the temperature every 20 minutes during 4 weeks I.E 4096 measurements readable on a PC (accuracy  $1^{\circ}\text{C}$ )



THERMAL CURVE



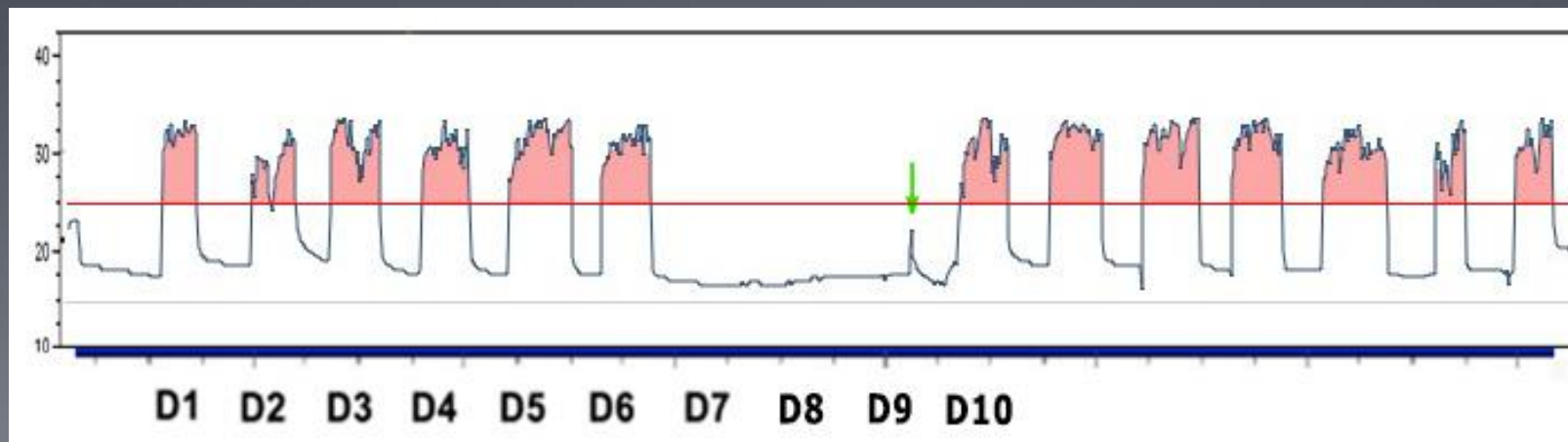
USB probe reader





## METHODS (2)

- MEDI Stockings / socks were used including the probe and providing a pressure of 15-20 mmHg at the ankle (B1 point).
- **TEMPERATURE RECORDING** through the thermotrack probe every 20 minutes during 4 weeks. The accurate wearing time was computed\* with excel® from the daily temperature curve.



\* A validation study has been achieved before, and presented at the AVF and ICC

# INCLUSION CRITERIA

- Active Females between 20 and 65Y
- with a primary CVD classified C2S
- Venous symptoms imputability score  $> 2$
- Free personnal choice for stockings or socks
- Cellular phone + written consent to participate

The patients were told to participate to a study for the quality of the stockings, not for their compliance +++



# MATERIAL & METHODS (3)

Monocentric study

40\* selected women were randomized into

2 groups of 20 :

- **Group 1**: receiving minimal recommendations about stockings use by their physician at the office.
- **Group 2**: receiving detailed explanations reinforced by SMS or smartphone recommendations repeated weekly.

\* 44 women were selected but 4 were excluded and replaced

## 4 patients were discarded and replaced

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- In 2 cases the bouton was not readable (5%)
  - In 1 case the curve was too difficult to analyse
  - 1 patient of group 2 was eliminated (not reachable by phone for recommendations)
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# STUDY DESIGN

40 women  
With smartphone  
CEAP: C2 s  
 $\Sigma$  imputability score > 2



Randomization

Monocentric study

4 Patients excluded  
and replaced

Group 1  
N=20

Min.  
Recommand.

Group 2  
N=20

Max.  
Recom. by SMS

# EVALUATION CRITERIA

At the beginning of the study:

- 1/ Podiatric examination – Djan angle measurement
- 2/ Assessment the “venous” symptoms with a VAS
- 3/ Auto questionnaire QOL (CIVIQ)
- 4/ Venous symptoms imputability score\*
- 5/ Basic CEAP (Computerized venous registry\*\*)
- 6/ Color Duplex

At the end of the study: Auto-questionnaire QOL (CIVIQ)

TEMPERATURE CURVE

\* Carpentier PH et al. JVS 2007;46:991-6.)

\*\* Uhl J.F et al. Int. Angiology 2005; 21 N° 3 supp 2 p7

# Patients characteristics

CEAP C <sub>2</sub> S	Group 1 Minimal recom Average (sd)	Group 2 Max recom. Average (sd)	t of Student test
AGE (years)	53 (14)	53,5 (16)	NS
Body Mass Index	23,9 (4,2)	23 (2,9)	NS
Imputability score (0-5)	3,8 (1,5)	3,9 (1,2)	NS
Pain score (VAS 0-10)	3,6 (1,4)	4,1 (1,2)	NS
Heavy legs (VAS 0-10)	1,4 (0,5)	1,3 (0,8)	NS
			Chi <sup>2</sup>
Socks / Stockings %	65/35	56/44	NS

# RESULTS:

Real wearing time compared in the 2 groups

	Group 1 R -	Group 2 R+SMS	increase	t test of Student
Hours / day	5,6 (3.7)	8 (3.6)	+33%	p= 0.02
Days / week	3.4 (2)	4.9 (1.7)	+33%	p= 0.01

Recommendations increase wearing time by 33%



# RESULTS:

## compared real wearing time in the 2 groups

	Group 1 R -	Group 2 R + SMS	increase	t test of Student
Hours / day	5,6 ( 3.7)	8 ( 3.6)	+33%	p= 0.02
Hours / wearing day	11,1 (3)	11,6 (1.7)	+4%	NS
Days / week	3.4 (2)	4.9 (1.7)	+33%	p= 0.01

Recommandations increase wearing time by 33%

# Discussion

We propose to assess the compliance only by the **wearing days** according to our results. Why?

Because if worn, the average H/day is the same in the 2 groups

For example: 3 days/week makes a compliance of  $3/7 = 43\%$

## Discussion (2)

- Good comfort
- Reliability of the device ( 7% issues )
- Computation of wearing time can be automatized.  
by an excel formula using the sparkling curves  
(average cut-off  $26^{\circ}$  C)
- Main limitation: an external temperature  $> 28^{\circ}$  C  
makes it difficult to use +++

# Conclusion

- This is the first study assessing the **REAL compliance** for the wear of compression stockings +++
- Average observance is **high (60%)** due to the confidence for the practitioner and inclusion in a RCT.

## Conclusion (2)

Recommendations given by the practitioner are an important factor of good observance of the wear of compression stockings/socks:

in fact, weekly recommendations by SMS were found to improve observance by 33% .

Another study on 3-6 months should confirm the results of this small study.

Thank you for your attention !

