REHABCOVID - Organisation of respiratory rehabilitation in post-COVID-19 patients with sequelae. Evaluation and therapeutic indication for remote rehabilitation vs. conventional rehabilitation.

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Général

Identification

Nom détaillé	Organisation of respiratory rehabilitation in post-COVID-19 patients with sequelae. Evaluation and therapeutic indication for remote rehabilitation vs. conventional rehabilitation.
Sigle ou acronyme	REHABCOVID

Thématiques générales

Domaine médical	Pneumology
Etude en lien avec la Covid-19	Yes

Responsable(s) scientifique(s)

Nom du responsable	Vallier
Prénom	Jean-Marc

Collaborations

Financements

Gouvernance de la base de données

Organisation(s) responsable(s) ou promoteur	Toulon Intermunicipal Hospital - La Seyne sur Mer
Statut de l'organisation	Secteur Public

Contact(s) supplémentaire(s)

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Caractéristiques

Type de base de données

Type de base de données	Others
Objectif de la base de données	
Objectif principal	Compare the efficacy of two respiratory rehabilitation methods on patient physical capacity: a 4-week remote respiratory rehabilitation (RRR) programme vs. a conventional respiratory rehabilitation (RR) programme, for reducing sequelae present in post-COVID-19 patients.
Critères d'inclusion	1. Subjects aged over 18 years. 2. Subjects having contracted COVID-19 determined by a positive RT-PCR test and/or presence of antibodies. 3. Subjects having received a medical prescription for respiratory rehabilitation. 4. Subjects equipped with the necessary computer equipment and network coverage for videoconferencing. 5. Subjects with at least one of the following post-COVID-19 sequelae: - Dyspnoea at rest or on exertion measured using the mMRC (modified Medical Research Council) scale, with a score greater than or equal to 2. (Vestbo et al., 2013) - Hyperventilation measured using the Nijmegen questionnaire, with a score greater than or equal to 23/64 (Van Dixhoorn and Duivenvoorden, 1985; Sauty and Prosper, 2008) - Exercise intolerance measured using the 1 min-STS (1-minute sit-to-stand test) according to the standards based on age and gender, established by Strassmann et al. (2013). - Abnormal fatigue measured using the MFI-20 (Multidimensional Fatigue Inventory), French-language version validated by Gentile et al. (2003) according to the standards based on age and gender, established by Schwarz et al. (2003). - Anxiety and depression status measured using the HADS (Hospital Anxiety and Depression scale), French-language version validated by Roberge et al. (2013) according to the standards based on age and gender, established by Bocéréan and Ducret (2014) 6. Registered with or a beneficiary of a social security scheme.
Type de population	
Age	Adulthood (19 to 24 years) Adulthood (25 to 44 years) Adulthood (45 to 64 years)

	Elderly (65 to 79 years) Great age (80 years and more)
Population concernée	Sick population
Pathologie	X - Diseases of the respiratory system
Sexe	Male Woman
Champ géographique	Regional
Régions concernées par la base de données	Provence - Alpes - Côte d'Azur
Collecte	
Dates	
Taille de la base de données	
Taille de la base de données (en nombre d'individus)	< 500 individuals
Détail du nombre d'individus	118 subjects (59 patients in the RR group and 59 patients in the RRR group)
Données	
Type de données recueillies	Clinical data Declarative data Paraclinical data
Modalités	
Pathologie suivies	
Valorisation et accès	
Valorisation et accès	
Accès	