

INPLASY PROTOCOL

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None declared.

Impact of telecare interventions on quality of life in older adults: A systematic review protocol

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Review question / Objective: The objective of this study was to review impact of telecare interventions on quality of life in older adults.

Condition being studied: Recently, an increase in the older adult population, their chronic diseases, and functional disabilities have resulted in the need for more healthcare services. Telecare is one of the solutions for caring these people and can improve their quality of life. However, examining the impact of telecare interventions, especially in terms of quality of life in older adults, can help to improve current systems and design better telecare technologies for a wider population in the future.

Information sources: Searching articles was conducted in PubMed, Web of Science, Scopus, the Cochrane Library, Embase, IEEEExplore, and ProQuest databases, and Google Scholar. If the full text of an article was not available, the corresponding author would be contacted.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 09 July 2022 and was last updated on 09 July 2022 (registration number INPLASY202270051).

INTRODUCTION

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improve their quality of life. However, examining the impact of telecare interventions, especially in terms of quality of life in older adults, can help to improve current systems and design better telecare technologies for a wider population in the future.

METHODS

Participant or population: Older adults (aged 65 years old and over).

Intervention: Telecare interventions.

Comparator: Traditional health care services.

Study designs to be included: Interventional- Quantitative studies.

Eligibility criteria: In this study, articles which were published in English and their full texts were available were selected for conducting the review. Other inclusion criteria were related to reporting a telecare intervention for older adults (aged 65 years and over) and examining their quality of life after the intervention by using questionnaires. As a result, review articles, systematic reviews, letters to the editor, and protocols as well as those articles that their full texts were not available were excluded from the current study. Moreover, if quality of life in older adults was not measured or reported after the telecare intervention, the related article was not included in the current systematic review.

Information sources: Searching articles was conducted in PubMed, Web of Science, Scopus, the Cochrane Library, Embase, IEEExplore, and ProQuest databases, and Google Scholar. If the full text of an article was not available, the corresponding author would be contacted.

Main outcome(s): Searching articles was conducted until the end of 2020. A data collection form was used to extract necessary data including the name of the authors, year of study, country of study, research objective, research methods,

quality of life criteria, type of telecare technology, and a summary of results.

Quality assessment / Risk of bias analysis: Quality assessment was performed by both researchers (MEJ and HA) independently. As different research methodologies were used in the reviewed articles, the National Institutes of Health (NIH) quality assessment tools were used for the interventional studies (randomized controlled trials and before-after studies (pre-post) with no control group). The quality of each study was rated as either good (7-9), fair (4-6), or poor (<3). Any disagreement between the reviewers was resolved by discussion. If the criteria were irrelevant to the study, they were labelled 'cannot determine' or 'not applicable', and if the needed information was not available in the study, it was labelled as 'not reported'. As mixed-methods methodology was used in one study, its quality was assessed using the Mixed Methods Appraisal Tool (MMAT). It consists of 5 questions with "yes", "no" and "can't tell" as the response options. Using this tool, quality of the articles can be assessed as zero, 25%, 50%, 75% and 100% (Zero (no criterion met), 25%, 50%, 75% and 100% (all criteria met)). A higher score indicates higher quality.

Strategy of data synthesis: After searching databases, the articles were entered into the EndNote, and duplicates were removed. Articles were also screened in terms of title, abstract and full text consistency with the aim of the research using the PRISMA checklist. Both researchers reviewed the retrieved articles independently. Any disagreements were resolved through discussion between the two researchers. Finally, the findings of the study were reported and synthesized narratively.

Subgroup analysis: No subgroup analysis.

Sensitivity analysis: No sensitivity analysis.

Country(ies) involved: Iran.

Keywords: Older adult; Quality of life; Telecare.

Contributions of each author:

Author 1 - Maryam Eslami Jahromi - MEJ conceptualized and conducted the research. She also drafted the manuscript.

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