

DRIE **Dehydration Recognition in our Elders** new care home research

Who is funding the research?

The research will be funded by the National Institute for Health Research (NIHR). The funding is as part of a Career Development Fellowship to Lee Hooper, the researcher.

Who has assessed the ethical implications of the research?

The research has been checked and accepted by the *National Research Ethics Service Committee, London-East (11/LO/1997)*.

Will the information gathered be confidential?

Yes, the only information that will be available to others is the blood and urine test results, heart rate, blood pressure and temperature, which will be reported back to your care home manager and GP. All other data will remain confidential and will be kept separate from your name and identifying details. Research publications and publicity will not allow identification of individuals or care homes.

Would you like to participate?

If you are resident in a care home and would like to participate you will receive a letter telling you about a meeting where you, and your relatives if they would like to attend, will be able to ask questions.

If you have any questions please contact the lead researcher: Dr. Lee Hooper, Norwich Medical School, University of East Anglia Norwich NR4 7TJ, Norfolk, UK
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If anything goes wrong, or you have any worries or complaints about the conduct of the research please contact Lee, or Sue Steel, the study sponsor, on 01603 591486 or email sue.steel@uea.ac.uk

Your care home will be hosting research that will develop a method to identify dehydration in older people. This leaflet will tell you a little about the research, and what it will mean for you.

Dehydration—what is the problem?

Dehydration, when we don't drink enough for our needs, is bad for all of us. In older people severe dehydration increases confusion and falls, and makes sudden hospital admission more likely. We don't have a good method of recognising dehydration early, before it becomes severe. Being able to identify dehydration early would allow measures, such as extra encouragement with drinking, to prevent severe dehydration.

What will the research do?

The research will identify an easy method that can signal when someone is in need of drinking more. We will do this by interviewing people living in care homes who are interested in this study. Care home staff will later receive training in how to recognise the early stages of dehydration.

Who will be involved in this research?

We will ask people living in care homes aged 65 years or more, who don't have heart failure or renal failure to join the study.



Within your care home we will ask people whether they would like to be part of the study. We will ask you to make this decision yourself if you can, allowing time for you to talk with friends, relatives and staff. If you cannot make this decision yourself we will ask a relative (the consultee) whether you would have wanted to participate if you were able to make this decision yourself. Overall we will recruit 200 older people.

What will be asked of participants?

If you take part you will be asked to have some simple tests, answer some questions and give a blood sample (together taking up to 75 minutes). This will be followed up by a short interview 1 year later (taking about 10 minutes). Both will be in private room in the care home.

Why is the blood test needed?

The blood test is needed as we will use it to measure serum osmolality. This is the best way of assessing water-loss dehydration. This is the measure that the other tests will be compared to, when we see how well they work in identifying dehydration. The final method that we develop to identify water-loss dehydration will NOT include a blood test.

What else will be assessed?

We will use a series of simple tests. One of the tests is the squeeze test. We will check how quickly your flesh springs back after your hand is lightly squeezed. We will find out if this is a good indicator of dehydration. Other tests include:

- Looking at your tongue for dryness and furrows
- Body temperature
- Fluid loss through the skin
- Change in blood pressure and pulse on standing
- Weight and height and recent weight change
- Feeling thirsty, tired, anxious, headachy or out-of-sorts



- Worries about getting to the toilet in time or getting up in the night
- Dry skin on the face, lips, arms or legs
- Questions about how clearly you are thinking
- Urine colour and another urine test
- We will also watch to see what happens when you are offered a drink or want to go to the toilet

Will any other information be recorded?

We will also gather some information on your previous job and postcode from you or from your care home manager.

We will ask your care home manager to tell us about the medications you take, any recent or current health problems, and your physical ability to carry out tasks like dressing and going to the toilet. We will ask them again after one and two years.

If you agree, we will ask your care home to weigh you weekly for a year. However, you can still be in the study and not be weighed. After the year we will ask to talk to you again for about 10 minutes to ask some final questions on your health and wellbeing.

What are the risks?

The blood test could be painful, and could cause bleeding or bruising, though we will work to minimise this. When we ask you to stand up we will make sure you are safe, supporting you if necessary and will encourage use of a walker or stick if you usually use these.

What will I gain from involvement?

We hope you will enjoy the interview, and we aim to make it pleasant and friendly. You may feel you are contributing to helping other older people as we learn to recognise dehydration. If you participate you will receive a £10 voucher or equivalent gift for the first interview, and again for the second interview. The results of your blood, urine and blood pressure tests, heart rate and body temperature will be given to your care home manager and your GP, helping to improve your health.