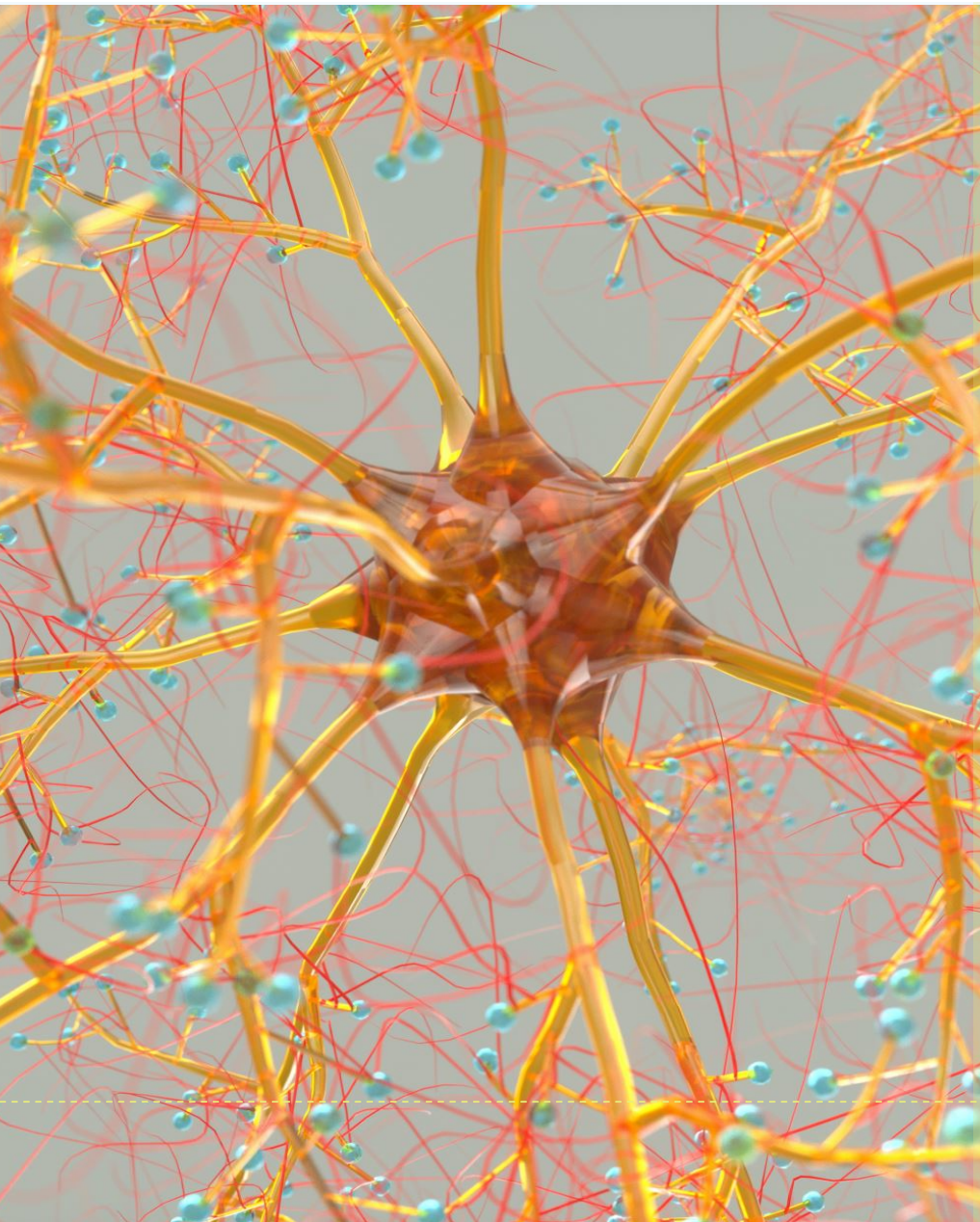




EHES case studies in Europe

- *Netherlands* -

4 february 2021

The health system in the Netherlands

- ◆ The Dutch health system is funded 50% through the taxes payed by the employers to a fund controlled by the Health Reglementation Authority, where the Government also contributes with 5%.
- ◆ The rest of 45% of the health expenses are covered by the employees, directly to the insurance companies.
- ◆ Among the strong points to the Dutch system:
 - ◆ access to necessary medication
 - ◆ professional health care
 - ◆ relatively short waiting time

The EHES study

- ♦ 2009-2010 – pilot EHES project, a partnership between the Ministry of Public Health, the National Institute of Public Health and environment (RIVM) and the University Medical Centre in Utrecht (UMCU), Julius Clinical Research BV
- ♦ The team consisted of a team leader (the principal investigator for the study), a medical doctor to supervise the daily study, a logistics manager, a data manager and scientific body where important national experts were invited, responsible for monitoring, public health, statistics, obesity and other topics in the study

The EHES study (II)

- ◆ Before the field work, the study was advertised in the local press
 - ◆ articles in the local newspapers
 - ◆ informing medical general practitioners (GPs) about the study
 - ◆ posters in the waiting lounges of the GPs, pharmacies and local hospital
- ◆ The participants were rewarded with an amount of 50 euro (initially 10 euro, however this raise managed to raise the participation rate as well)

Measurements and indicators

- ♦ The measurement instrument from the research questionnaire were drafted according to the EHES protocol
- ♦ Biological risk factors
 - ♦ anthropometric factors (weight, height, waist)
 - ♦ blood pressure (systolic and diastolic, treatment information)
 - ♦ seric cholesterol level (total and HDL, treatment information)
 - ♦ seric glucose levels (preferably, post)
 - ♦ triglyceride plasmatic concentrations (when obtained in food ingest pause).
- ♦ Informations regarding the life style
 - ♦ smoking
 - ♦ physical activity
 - ♦ diet

Methodology

- ◆ Permanent residents
- ◆ Number of respondents: ~10.000* (700 per locality)
 - *taking into account the study challenges and the large non-response rates, they chose a sample three times larger
- ◆ Men and women between 18 and 70 years
- ◆ Selection from the national registry, to ensure a probabilistic sampling, with an equal probability of selection for all citizens

Methodology / Sample

- ♦ Selection stages:
 - ♦ first selecting a region
 - ♦ selecting localities in that region => 15 cities (3 per region: small, large and medium)
 - ♦ in the small and medium cities
 - ♦ 18-20 years: 180 respondents
 - ♦ 20-39 years: 550 respondents
 - ♦ the rest of the age groups (10 years intervals): 350 respondents
 - ♦ in big cities: sample size increased with 10%, due to the administrative errors in the databases and migration

EHES questionnaire

- Questions and items split into:
 - general questions (historic / anamneses: health, diseases, family history)
 - current life style (smoking, weight and connected questions)
 - physical activity
 - general welfare
- The questionnaires were completed at the respondents living households and later brought to the research centre
- At the research centre the questionnaires were verified, and if some information was found to be missing, the respondent is asked if available for further inquiry; if situations where the respondent did not understand what to fill in, the researcher can bring further explanations.
 - The research assistant in the centre adds the new responses with a pen having a different colour, signing the note regarding the date of these modification / additions

EHES implementation (I)

- The respondents have received:
 - a letter of invitation
 - a letter of recommendation on behalf of the Local Municipal Health Service
 - a brochure explaining the goal and the context of the EHES study
 - response card

*when no reaction for two consecutive weeks, the respondents are paid a visit at their households by a field worker

EHES implementation (II)

- Function of reaction and responses, the next step:
 - respondents send back their response card indicating they do not want to proceed further : no other measures
 - respondents send back their response card indicating they do want to participate: they receive a letter with the date and time they are expected at the research centre. The date and time is matched as close as possible to the one indicated by the respondents;
 - if no other reaction for the next two weeks, households visits (max 6 attempts);
 - in case of no show: the respondents are contacted by phone to establish a new meeting
 - after the second no show, a third meeting is attempted by phone