Control of attention by the motor system

No registrations found.

Ethical review	Positive opinion
Status	Pending
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON21965

Source
NTR

Brief title
CAMS

Health condition

neglect
eye movements
oogbewegingen
attention
aandacht
intervention
interventie

Sponsors and support

Primary sponsor: Utrecht University
Source(s) of monetary or material Support: NWO

Intervention

Outcome measures

Primary outcome

Shape cancellation task (T0, T1)

Line bisection task (T0, T1)

Visual discrimination task (T0, T1)

Catherine Bergego Scale (T0, T1)

Secondary outcome

Visual exploration task (T0, T1)

Virtual supermarket (T0, T1)

Eye movement behavior

Study description

Background summary

About 30% of all stroke patients admitted in a rehabilitation centre show unilateral visuospatial neglect. This disorder is characterized by the inability to respond to sensory stimuli in the affected (left) hemispace, due to damage to the right hemisphere. Visual scanning therapy, a training aimed at provoking eye movements to the affected hemifield, is often applied to attenuate neglect. Recent views on the attentional and motor system suggest new approaches to treat neglect. Congruence between different effectors of the motor system may produce a powerful bias in the motor system, which can counteract pathological biases in the attentional system. Therefore, an intervention with congruent eye and hand movements may result in greater attenuation of neglect symptoms compared to an intervention with single eye movements (as applied in visual scanning therapy).

Study objective

Congruence between different effectors of the motor system may produce a powerful bias in the motor system, which can counteract pathological biases in the attentional system. Therefore, an intervention with congruent eye and hand movements may result in greater attenuation of neglect compared to an intervention with single eye movements (as applied in visual scanning therapy).

Study design

T0 = baseline measurement

T1 = measurement after all training sessions

Intervention

15 neglect patients will receive visual scanning therapy

15 neglect patients will receive a visual scanning training combined with congruent hand movements

Outcome measures for each training group will be compared to 15 stroke patients without neglected and 15 age matched healthy controls

Contacts

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Eligibility criteria

Inclusion criteria

• Clinical diagnosed symptomatic stroke (ischemic or intracerebral haemorrhagic lesion), first or
recurrent, if possible verified by Magnetic Resonance Imaging (MRI) and/or Computed Tomography
(CT) data

• Signs of neglect:

o asymmetry between the left and right side of the stimulus field in number of missed items of at
least 2 on a shape cancelation task, and/or

o a bias towards the left or right side of space on a line bisection task, and/or

o Catherine Bergego Scale score higher than 6.

• 18-85 years of age

• Sufficient ability to comprehend and to communicate, as observed during neuropsychological assessment and/or neglect screening

• Sufficient motivation to participate in a daily rehabilitation treatment programme for two weeks.

• Written informed consent

Exclusion criteria

Patients who recovered from neglect between inclusion and start of the training (i.e. no signs of neglect anymore on all baseline measurements) will be excluded

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	01-04-2018
Enrollment:	60
Type:	Anticipated

Ethics review

Positive opinion

Date:	23-01-2018
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

ID: 48849
Bron: ToetsingOnline
Titel:

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL6818
NTR-old	NTR7005
CCMO	NL64626.041.18
OMON	NL-OMON48849

Study results