Prism adaptation as a two-week treatment.

No registrations found.

Ethical review	Not applicable
Status	Pending
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON29297

Source
NTR

Brief title
PAiR

Health condition

Hemispatial neglect

Sponsors and support

Primary sponsor: Dr. Tanja CW Nijboer
Revalidatiecentrum De Hoogstraat
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Source(s) of monetary or material Support: NWO 451-10-013

Intervention

Outcome measures

Primary outcome

1. Star cancellation;

2. Letter cancellation;

3. Line bisection;

4. Landmark test;

5. Copying;

6. Symmetrical photos;

7. Mental representations.

Secondary outcome

1. Balance board;

2. Mobility Assessment Course;

3. Postural Assessment Scale for Stroke Patients;

4. Subjective Neglect Questionnaire;

5. Catherine Bergego Scale.

Study description

Background summary

Unilateral spatial neglect occurs frequently following a brain lesion in especially the right hemisphere (25-30% of all stroke patients, Appleros et al, 2002), resulting in a failure to report or respond to stimulation in contralesional hemispace. Prism adaptation is the most widely studied method to alleviate the symptoms of neglect. Effects of a single session of prism adaptation have been reported across clinical measures, but also in more daily situations, such as wheelchair navigation (Rossetti et al, 1999) and postural control (Tilikete et al, 2001). The current study will focus on the effects of an intensive programme of exposure to prism adaptation (i.e. daily exposure during two weeks) and whether more permanent changes in spatial awareness can be objectified. To assess the effects of prism adaptation in the proposed study, patients will receive either prism adaptation or sham adaptation. We expect longer-lasting, more general beneficial effects after prism adaptation compared to sham adaptation.

Study objective

The current study will focus on the effects of an intensive programme of exposure to prism

adaptation (i.e. daily exposure during two weeks) and whether more permanent changes in spatial awareness can be objectified. To assess the effects of prism adaptation in the proposed study, patients will receive either prism adaptation or sham adaptation. We expect longer-lasting, more general beneficial effects after prism adaptation compared to sham adaptation.

Study design

1. Baseline (T0);

2. After 1 week of PA (T1);

3. After 2 weeks of PA (T2);

4. 1 week after ending PA (T3);

5. 2 weeks after ending PA (T4);

6. 4 weeks after ending PA (T5);

7. 12 weeks after ending PA (T6).

Intervention

The prism adaptation procedure will be similar to that employed by Rossetti et al (1998), with the exception that it will be repeated on a daily basis for 2 weeks. Prism adaptation will be performed with a pair of goggles fitted with wide-field point-to-point prismatic lenses, inducing a rightward optical shift of 10°.

Sham adaptation will be performed with a pair of goggles fitted with plain lenses (i.e. no optical shift).

Contacts

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Eligibility criteria

Inclusion criteria

1. Patients with hemispatial neglect;

2. 18-85 years of age;

3. No history of psychiatric disorders and/or substance abuse.

Exclusion criteria

1. < 18 years of age, >85 years of age;

2. History of psychiatric disorders and/or substance abuse;

3. Unable to perform neuropsychological screening and/or tests.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Placebo

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	01-01-2013
Enrollment:	60
Type:	Anticipated

Ethics review

Not applicable

Application type:	Not applicable

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

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

No registrations found.

In other registers

Register	ID
NTR-new	NL2956
NTR-old	NTR3278
Other	:
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Study results

Summary results

N/A