Transcranial Direct Current Stimulation to enhance treatment effects in aphasia

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to investigate (1) the additional effect of tDCS on language and communication, when administered during aphasia therapy in the sub-acute phase post stroke (2) its cost-effectiveness, (3) its effect on neural reorganisation of language, and (4) the...

Ethical review	Approved WMO
Status	Recruiting
Health condition type	Central nervous system vascular disorders
Study type	Interventional

Summary

ID

NL-OMON56678

Source ToetsingOnline

Brief title tDCS to treat aphasia

Condition

• Central nervous system vascular disorders

Synonym

Aphasia. Language disorder after stroke

Research involving Human

Sponsors and support

Primary sponsor: Erasmus MC, Universitair Medisch Centrum Rotterdam **Source(s) of monetary or material Support:** Ministerie van OC&W

Intervention

Keyword: aphasia, rehabilitation, stroke, transcranial stimulation

Outcome measures

Primary outcome

Boston Naming Test (BNT)

Secondary outcome

Amsterdam Nijmegen Test voor Alledaagse Taalvaardigheden (ANTAT)

EuroQOL-5D; Stroke and Aphasia Quality of Life Scale (SAQOL)

Werk en Zorg vragenlijst

Size and location of the lesion

fMRI: Laterality index (only for participants from the Rijndam rehabilitation

center)

Study description

Background summary

Recent studies have shown that transcranial Direct Current Stimulation may enhance the effect of aphasia treatment in people with post-stroke aphasia. tDCS is promising as a clinical tool, because it is inexpensive and easy to apply. So far, beneficial effects have been reported in small scale studies, mostly of people with chronic aphasia (> 1 year post onset). It is important to investigate the potential benefits of tDCS in people with sub-acute aphasia as well, as the larger proportion of language treatment for stroke patients is provided in the sub-acute phase, during the first weeks and months post stroke.

Study objective

to investigate (1) the additional effect of tDCS on language and communication, when administered during aphasia therapy in the sub-acute phase post stroke (2) its cost-effectiveness, (3) its effect on neural reorganisation of language, and (4) the side effects and drop out rates.

Study design: double-blind, randomized sham-controlled intervention study with

6 months follow-up.

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Intervention

The experimental group receives language training + tDCS (transcranial Direct Current Stimulation; 20 min, 1mA: 2x 5 therapy sessions). The control group receives language training + StDCS (Sham transcranial Direct Current Stimulation, i.e. inactive stimulation; 20 min, 1mA: 2x 5 therapy sessions)

Study burden and risks

All participants are enrolled in Rijndam*s regular stroke rehabilitation programme/Libra's regular stroke rehabilitation/Revant's regular stroke rehabilitation/De Hoogstraat's regular stroke rehabilitation programme. The application of tDCS during language training, is an additional treatment, which is expected to enhance the effect of their language training. tDCS is reported to be safe; side-effects are mild. For this study, extra test sessions are scheduled, constituting an extra burden for the participant. All formal tests are aphasia tests that are validated for this population and commonly used in regular practice. In addition, participants will get several questionnaires. In addition, 2 fMRI scans are performed during the study (only for participants from the Rijndam rehabilitation center).

Contacts

Public

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

Aphasia after stroke Time post onset < 3 months Age 18-80 years Right handed Physical health sufficient to participate in intensive aphasia therapy

Exclusion criteria

Subarachnoïd Haemorrhage (SAH) Prior stroke resulting in aphasia Brain surgery in the past Epileptic activity in the past 12 months Excessive use of alcohol or drugs Insufficient level of Dutch premorbidly Premorbid (suspected) dementia Premorbid psychiatric disease affecting communication Severe nonlinguistic cognitive disturbances impeding language therapy

Study design

Design

Study phase:

3

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

Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	17-03-2014
Enrollment:	58
Туре:	Actual

Medical products/devices used

Generic name:	Direct Current Stimulator
Registration:	Yes - CE intended use

Ethics review

Approved WMO	
Date:	04-06-2013
Application type:	First submission
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO	
Date:	12-11-2014
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO	
Date:	01-12-2014
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

Approved WMO

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Date:	11-08-2015
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO	
Date:	15-09-2015
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

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 CCMO **ID** NL44115.078.13