

Decision for reconstructive interventions of the upper extremities in tetraplegia: the effect of treatment characteristics.

Gepubliceerd: 06-09-2005 Laatste bijgewerkt: 13-12-2022

None; study was a survey.

Ethische beoordeling	Positief advies
Status	Werving gestopt
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON22006

Bron

Nationaal Trial Register

Verkorte titel

N/A

Aandoening

Spinal cord injury.

Ondersteuning

Overige ondersteuning: The study is part of the research project "The upper extremity in spinal cord injury: natural course and preferences for restorative treatment" and belongs to the research programme "Physical strain, work capacity, and mechanisms of restoration of mobility in the rehabilitation of individuals with a spinal cord injury". For the research project and the research programme grants (nos. 014-32-026 and 96-06-004) were received from the Dutch Health Research and Development Council.

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Importance and the relative weight of 7 treatment characteristics on the decision to undergo reconstructive surgery.

Toelichting onderzoek

Achtergrond van het onderzoek

Objective:

To assess the effect of treatment characteristics on the decisions made by subjects with tetraplegia concerning reconstructive interventions for the upper extremities.

Design:

Survey.

Setting:

Seven specialized spinal cord injury centres in the Netherlands.

Patients:

A sample of 49 individuals with tetraplegia in a stable condition.

Interventions:

Not applicable.

Main outcome measure:

Importance and the relative weight of 7 treatment characteristics on the decision to undergo reconstructive surgery determined by means of Conjoint Analysis.

Results:

All 7 characteristics contributed to the decision to undergo surgery ($p < 0.01$). The relative weights were: for type of intervention 0.14 (95% confidence interval (CI) 0.05-0.23), for number of operations 0.15 (95% CI: 0.05-0.25), for inpatient rehabilitation period 0.22 (95% CI: 0.10-0.32), for outpatient rehabilitation period 0.08 (95% CI: 0.02-0.14), for risk of complications 0.16 (95% CI: 0.06-0.26), for results of elbow function 0.1 (95% CI: 0.02-0.18), and for results of hand function 0.15 (95% CI: 0.05-0.25). In 40.8% of the subjects one characteristic had a relative weight of 0.30 or more.

Conclusions:

Non-health outcome factors related to the intensity of treatment are as important or even more important than the potential outcome of hand or elbow function in the decision to undergo reconstructive therapy. Inpatient rehabilitation period was the most important factor, and a substantial number of subjects focus on only one characteristic in their decision-making process.

Doel van het onderzoek

None; study was a survey.

Onderzoeksopzet

N/A

Onderzoeksproduct en/of interventie

None.

Contactpersonen

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

The inclusion criteria were a motor complete C5, C6 or C7 SCI, according to the guidelines of the American Spinal Injury Association (ASIA) , with at least one arm classified as motor group 1 to 4 according to the International Classification for Surgery of the Upper Limb in Tetraplegia. Subjects had to be medically and neurologically stable, at least one year after the initial injury, and possible candidates for surgical reconstruction of elbow extension and palmar and/or lateral grasp function.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Subjects were excluded if they had previously undergone surgery to improve UE function, or if they had been extensively informed about these interventions and had declined treatment in the past 5 years.

Onderzoeksopzet

Opzet

Type: Interventie onderzoek

Onderzoeksmodel: Anders

Controle: N.v.t. / onbekend

Deelname

Nederland

Status: Werving gestopt

(Verwachte) startdatum: 05-09-2002

Aantal proefpersonen: 53

Type: Werkelijke startdatum

Ethische beoordeling

Positief advies

Datum: 06-09-2005

Soort: Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL422

Register

NTR-old

Ander register

ISRCTN

ID

NTR462

: nos. 014-32-026 and 96-06-004

ISRCTN93725261

Resultaten

Samenvatting resultaten

Spinal Cord. 2008 Mar;46(3):228-33. Epub 2007 Aug 7.