

The influence of physiotherapy on the shoulder function of children with Obstetric Brachial Plexus Injury (OBPL).

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The expectation is that children with OBPL who received more physiotherapy have a better shoulder function than children with OBPL with less received physiotherapy.

Ethische beoordeling	Positief advies
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Observationeel onderzoek, zonder invasieve metingen

Samenvatting

ID

NL-OMON23122

Bron

Nationaal Trial Register

Verkorte titel

OBPL, Erb's palsy

Aandoening

Shoulder function children OBPL, obstetric brachial plexus injury, Erb's palsy
Schouderfunctie kinderen OBPL, obstetrisch plexus brachialis letsel, Ebse parese

Ondersteuning

Primaire sponsor: Atrium Medical Centre Heerlen

Overige ondersteuning: Stichting ter Behartiging der Belangen van het Gebrekkige Kind, Valkenburg

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Results on functional level of the shoulder:

1. Mallet Score (active shoulder function): 5 items (scores: II-IV);

2. Range of Motion (ROM, passive shoulder function): 7 items (degrees).

Results on activity level of the shoulder:

1. ABILHAND-children: 21 items (scores: impossible, difficult, easy).

Toelichting onderzoek

Achtergrond van het onderzoek

A cross-sectional study will be executed by which a group children with OBPL who received frequently physiotherapy will be compared with a group of children with OBPL who received less frequent physiotherapy.

The results of both groups will be compared on shoulder mobility, arm-hand function and arm-hand ability.

The frequency and duration of the physiotherapy, the executed sports and measured Mallet scores in the past will be collected by retrospective research.

Both Belgium and Dutch children with OBPL are invited. Belgium children receive in general more often physiotherapy than Dutch children. For reaching sufficient participants in both classification groups it is important to have participants with much and less physiotherapy.

Doel van het onderzoek

The expectation is that children with OBPL who received more physiotherapy have a better shoulder function than children with OBPL with less received physiotherapy.

Onderzoeksopzet

One measure moment at present for the Mallet score, the ROM and the ABILHAND-Kids.

Previously measured ROM and Mallet scores.

Onderzoeksproduct en/of interventie

Classification of two groups:

1. High frequent physiotherapy group:

Children with OBPL who received weekly ≥60 minutes of physiotherapy during their life;

2. Low frequent physiotherapie group:

Children with OBPL who received weekly <60 minutes of phsyiotherapy during their life.

Contactpersonen

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Children with OBPL who have C5-6 or C5-C6-C7 lesions;

2. Age group: 1994-2006;

3. Children which received this lesion at birth;

4. Children with OBPL from the Netherlands and Belgium.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Children with OBPL which also have C8 and/or Th1 lesions besides above mentioned lesions;

2. Low level of development. The child should be able to understand and execute the instructions;
3. The parents of the children younger than 12 years old have to understand the Dutch language.

Onderzoeksopzet

Opzet

Type:	Observationeel onderzoek, zonder invasieve metingen
Onderzoeksmodel:	Parallel
Toewijzing:	Niet-gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-05-2011
Aantal proefpersonen:	100
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies	
Datum:	04-05-2011
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	NL2746
NTR-old	NTR2884
Ander register	METC Heerlen : 11-N-18
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten

N/A