

Measuring conscious motor processing and movement self- consciousness in stroke patients using a Dutch version of the Movement Specific Reinvestment Scale.

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Main question: What is the value of the propensity for reinvestment (measured by the Movement Specific Reinvestment Scale) in predicting the functional mobility (measured with the Rivermead Mobility Index) of stroke patients after 15 weeks of...

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

Samenvatting

ID

NL-OMON23295

Bron

NTR

Verkorte titel

MSRS in stroke

Aandoening

stroke, reinvestment, functional mobility, CVA, herinvestering, functionele mobiliteit, MSRS, Movement Specific Reinvestment Scale

Ondersteuning

Primaire sponsor: De hogeschool Zuyd gevestigd in Heerlen heeft opdracht gegeven voor het onderzoek en neemt de primaire verantwoordelijkheid voor het design van de studie=2C de voortgang en rapportering

Overige ondersteuning: De hogeschool Zuyd gevestigd in Heerlen heeft opdracht gegeven

voor het onderzoek en neemt de primaire verantwoordelijkheid voor het design van de studie=2C de voortgang en rapportering

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

1. Conscious motor processing and movement self- consciousness measured by the Movement Specific Reinvestment Scale;

2. The locomotion measured by the Rivermead Mobility Index.

Toelichting onderzoek

Achtergrond van het onderzoek

Rationale:

Movement disruption and reinvestment have been investigated in athletes and in the healthy population. It has been shown that the 'Reinvestment Scale' (RS) may predict whether someone will fail when performing movements under (psychological) pressure.

The adapted version of the RS, the 'Movement Specific Reinvestment Scale' (MSRS) has been developed for the use in rehabilitation and has recently been used in two exploratory studies in patients with Parkinson's disease and Stroke. This scale has been translated into Dutch according to the guidelines for cross cultural adaptation processes.

Objective:

The aim of this study is to investigate the predictive validity of the MSRS for functional mobility in patients after stroke 15 weeks after onset.

Study design:

Observational longitudinal design.

Study population:

Adult stroke patients in the acute and subacute phase will be recruited from the neurological ward of the Orbis Medical Centre located in Sittard.

Main study parameters/endpoints:

Measurement dates are at entry (baseline- T0) and after 15 weeks (T1). The following patient characteristics will be collected: age, gender, brain lesion site, co-morbidities or complications. The primary outcome is the 'Movement Specific Reinvestment Scale'. As additional measurements on functional outcome are used: the Rivermead Mobility Index (and the Barthel Index. To build the prediction model the following possible predictors will be measured: random motion activity (measured with the Motricity Index) and the level of fear and depression (measured with the Hospital Anxiety Depression Scale).

Doel van het onderzoek

Main question:

What is the value of the propensity for reinvestment (measured by the Movement Specific Reinvestment Scale) in predicting the functional mobility (measured with the Rivermead Mobility Index) of stroke patients after 15 weeks of rehabilitation?

The hypothesis is that a high propensity for reinvestment has a negative influence on the motor learning process and will thus affect the level of mobility negatively.

Subquestion:

Does the degree of reinvestment of stroke patients (measured by the Movement Specific Reinvestment Scale = MSRS) change during the rehabilitation period of fifteen weeks?

The expectation is that the stroke patients will score high on the MSRS scale at baseline because of their high degree of awareness of their movements immediately after the stroke. the expectation is that the scores will be lower at the end of the rehabilitation period caused by a better body image and a higher self-esteem of the patient.

Onderzoeksopzet

1. Baseline measurement on the moment of intake in the rehabilitation clinic;
2. The second measurement is fifteen weeks after the baseline measurement.

Onderzoeksproduct en/of interventie

No intervention given. The stroke patients only received care as usual.

Contactpersonen

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Adult;
2. Clinically diagnosed stroke;
3. Patients <6 weeks after stroke.

Belangrijkste redenen om niet deel te kunnen nemen

(Exclusiecriteria)

Severe additional impairments prior to stroke.

Onderzoeksopzet

Opzet

Type:	Observationeel onderzoek, zonder invasieve metingen
Onderzoeksmodel:	Parallel
Toewijzing:	N.v.t. / één studie arm
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	12-12-2011
Aantal proefpersonen:	53
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies	
Datum:	05-12-2011
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	NL3027
NTR-old	NTR3175
Ander register	METC HsZuyd/Orbis : 11-N-92
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten

N/A