Multifactorial Approach Training for Anterior Shoulder Instability in patients undergoing arthrosopic bankart repair, a randomized controlled trial

Gepubliceerd: 05-07-2021 Laatst bijgewerkt: 18-08-2022

Multifactorial approach of aftercare, focussing on fear reduction for (recurrent) dislocation, is more effective than the current standard of aftercare for patients who underwent arthroscopic bankart repair without significant bone loss

Ethische beoordeling	Niet van toepassing
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON24933

Bron
NTR

Verkorte titel
MATASI

Aandoening

Anterior Shoulder Instability

Ondersteuning

Primaire sponsor: OLVG
Overige ondersteuning: OLVG

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

To determine if multifactorial approach of aftercare is more effective in fear reduction than the current standard of aftercare, in patients who underwent arthroscopic Bankart repair (ABR) without significant bone loss

Toelichting onderzoek

Achtergrond van het onderzoek

Shoulder instability is a frequently seen problem by surgeons, general practitioners, sport physicians and emergency doctors. Most often, the glenoid labrum is torn by traumatic injury causing the anterior shoulder instability. Recurrence is often used as important clinical outcome by treating physicians. However, recent literature showed that fear for (recurrent) dislocation is something that largely determines patient satisfaction and quality of life. Little is known about therapies that include treating the subsequent kinesiofobia that is caused by the shoulder instability. This produces a lack of standard multifactorial aftercare of shoulder instability surgery that includes the psychological side of the problem, such as cross-education and shoulder 'reafferentation'. This study will compare the standard aftercare after surgical treatment of shoulder instability with a newly drawn up consensus protocol by orthopaedic shoulder surgeons and shoulder physiotherapists, focussing on fear reduction.

Doel van het onderzoek

Multifactorial approach of aftercare, focussing on fear reduction for (recurrent) dislocation, is more effective than the current standard of aftercare for patients who underwent arthroscopic bankart repair without significant bone loss

Onderzoeksopzet

Preoperative (1), Preoperative (2), 12wk Post-op (3), 24wk Post-op (4), 48wk Post-op (5) --> at all of these 5 time-points, patients will get a questionnaire containing questions about clinical and patient reported outcomes

Onderzoeksproduct en/of interventie

One group receives a ‘standard’ postoperative physiotherapy treatment and the other group receives a ‘tailor-maid’ postoperative multifactorial physiotherapy scheme, which has been designed to reduce fear for (recurrent) dislocation

Contactpersonen

Publiek

OLVG
Ted van Iersel

0614564784

Wetenschappelijk

OLVG
Ted van Iersel

0614564784

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Patients between the age of 18 and 67, undergoing arthroscopic bankart repair (ABR) without significant bone loss at OLVG Amsterdam, Amstelland Ziekehuis Amstelveen and/or Spaarne Gasthuis Hoofddorp/Haarlem

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Patients are excluded when they are aged under 18 or above 67 years old. Furthermore, patients undergoing other types of shoulder surgery other than arthroscopic Bankart repair will be excluded. Also patients with: absence of sulcus sign at physical examination, presence of rotator cuff rupture, bilateral component (active subluxations on contralateral side), history of soft tissue repair or bone block procedure on one of both shoulder, connective tissue disorders (e.g. Ehler-Danlos) or hyperlaxity (Beighton score >5) and/or (Current) anxiety disorders or use of anxiety supressing drugs (e.g. anti-psychotics) will be excluded.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd

Controle: Geneesmiddel

Deelname

Nederland

Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-11-2021
Aantal proefpersonen:	100
Type:	Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nog niet bepaald

Ethische beoordeling

Niet van toepassing

Soort:	Niet van toepassing

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	NL9598
Ander register	METC UMCU : TBA

Resultaten