

# Does rehabilitation officer input improve quality of life in individuals with low vision?

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| <b>Submission date</b><br>27/02/2015   | <b>Recruitment status</b><br>No longer recruiting | <input type="checkbox"/> Prospectively registered<br><input checked="" type="checkbox"/> Protocol |
| <b>Registration date</b><br>09/03/2015 | <b>Overall study status</b><br>Completed          | <input type="checkbox"/> Statistical analysis plan<br><input checked="" type="checkbox"/> Results |
| <b>Last Edited</b><br>20/12/2016       | <b>Condition category</b><br>Eye Diseases         | <input type="checkbox"/> Individual participant data  |

## Plain English summary of protocol

### Background and study aims

There are many causes of low vision including age-related macular degeneration, diabetic retinopathy and glaucoma. People with low vision can suffer from depression, reduced quality of life and reduced mobility. When people lose some or all of their sight, they may be offered the services of a Rehabilitation Officer for the Vision Impaired. This person can look at things that are more difficult for someone with low vision – such as using magnifiers, or using lights to enhance remaining vision or finding aids that make everyday tasks safer. The Rehabilitation Officer works with you in your own home or office to help you come to terms with your sight loss. There is some evidence of improved quality of life following visual rehabilitation, but there is a need for high-quality evidence regarding the effectiveness of low vision rehabilitation services. This study will consider whether support from a Rehabilitation Officer for the Vision Impaired makes a difference on the quality of life of individuals experiencing vision loss.

### Who can participate?

People aged over 18 in the Cardiff area with low vision who have a requirement for low vision rehabilitation

### What does the study involve?

There is one visit to the Cardiff School of Optometry which involves answering some general questions about your health and measuring your vision using a letter chart. After that, an appointment will be made for a telephone interview. This involves going through some questionnaires, which include questions about how well you are able to do vision-related activities such as reading and driving, and questions about your health and how you are feeling. You would then be randomly allocated to either receive immediate support from a Rehabilitation Officer for the Vision Impaired, or to the Sight Cymru waiting list to receive rehabilitation support. Six months after the initial telephone interview there is a second phone appointment going through the same questions.

### What are the possible benefits and risks of participating?

If you agree to take part in the study you will receive support from a Rehabilitation Officer for the Vision Impaired within 6 months. The results of the study will help identify the impact of rehabilitation work and will influence the support for this work in future. There are no direct

risks of participating. One of the questionnaires that is being used in the study may identify depressive symptoms, which may result in being referred to the GP.

Where is the study run from?

This study is being organised by Cardiff University in collaboration with Sight Cymru. Low vision rehabilitation consists of home visits by a Rehabilitation Officer for the Vision Impaired.

When is the study starting and how long is it expected to run for?

October 2014 to October 2015

Who is funding the study?

Cardiff Council and Sight Cymru (UK)

Who is the main contact?

Dr Jennifer Acton

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## Contact information

**Type(s)**

Scientific

**Contact name**

Dr Jennifer Acton

**ORCID ID**

<https://orcid.org/0000-0002-0347-7651>

**Contact details**

Cardiff Centre for Vision Sciences  
College of Biomedical and Life Sciences  
Cardiff University  
Maindy Road  
Cardiff  
United Kingdom  
CF24 4HQ

## Additional identifiers

**Protocol serial number**

1377

## Study information

**Scientific Title**

Does rehabilitation officer input improve quality of life in individuals with low vision? A pilot study

**Study objectives**

The principal question is to determine whether a low vision rehabilitation officer has an impact on quality of life outcome in individuals with low vision.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

School of Optometry and Vision Sciences Research Ethics Audit Committee, Cardiff University, 01/10/2014, ref: 1377

### **Study design**

Exploratory single-masked randomised controlled trial

### **Primary study design**

Interventional

### **Study type(s)**

Quality of life

### **Health condition(s) or problem(s) studied**

Low vision

### **Interventions**

The intervention is input from a low vision rehabilitation officer. Low vision rehabilitation is defined as an amelioration of the lives of individuals with sight loss by improving functional ability, and other general aspects, e.g. quality of life and psychosocial status.

There will be two arms:

1. Intervention arm: individuals with low vision who receive low vision rehabilitation
2. Control arm: individuals with low vision who are on a waiting list to receive low vision rehabilitation i.e. they have not yet received low vision rehabilitation

### **Intervention Type**

Other

### **Primary outcome(s)**

Questionnaire outcomes will be recorded at baseline and after 6 months by telephone interview:

1. 48-item Veterans Affairs Low Vision Visual Functioning Questionnaire (VA LV VFQ-48)

### **Key secondary outcome(s)**

Questionnaire outcomes will be recorded at baseline and after 6 months by telephone interview:

1. Patient Health Questionnaire (PHQ9)
2. The Warwick-Edinburgh Mental Well-being Scale (WEMWBS)
3. Adjustment to age-related visual loss scale (AVL-12)
4. Standardised health-related quality of life questionnaire (EQ-5D)
5. UCLA loneliness scale

### **Completion date**

01/10/2016

# Eligibility

## Key inclusion criteria

1. A requirement for low vision rehabilitation
2. Distance visual acuity of 6/12 or worse; and/or near acuity of N6 or worse; or significant contraction of the visual field
3. Age 18 years or over

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Adult

## Lower age limit

18 years

## Sex

All

## Key exclusion criteria

1. Live in area outside catchment of rehab officer
2. Ineligible for rehab officer
3. Those with significant need (fast track waiting list)
4. A score of <27/30 on the MMSE
5. Unable to use telephone e.g. caused by very poor hearing
6. Unable to understand English
7. Unable to take part in 6-month study
8. Unable to provide informed consent
9. Previous recipient of low vision rehabilitation via a rehabilitation officer within the last 12 months and no relevant change in circumstances

## Date of first enrolment

16/10/2014

## Date of final enrolment

16/10/2015

# Locations

## Countries of recruitment

United Kingdom

Wales

**Study participating centre**  
**Cardiff Centre for Vision Sciences**  
College of Biomedical and Life Sciences  
Cardiff University  
Maindy Road  
Cardiff  
United Kingdom  
CF24 4HQ

## Sponsor information

**Organisation**  
Cardiff University

**ROR**  
<https://ror.org/03kk7td41>

## Funder(s)

**Funder type**  
Government

**Funder Name**  
Sight Cymru

**Funder Name**  
Cardiff Council

**Funder Name**  
Welsh Government

## Results and Publications

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**  
Available on request

## Study outputs

| Output type                      | Details  | Date created | Date added | Peer reviewed? | Patient-facing? |
|----------------------------------|----------|--------------|------------|----------------|-----------------|
| <a href="#">Results article</a>  | results  | 01/12/2016   |            | Yes            | No              |
| <a href="#">Protocol article</a> | protocol | 24/02/2016   |            | Yes            | No              |