# Pilot randomised controlled trial of deep brain stimulation in Tourette syndrome

Recruitment status No longer recruiting	[X] Prospectively registered		
	∐ Protocol		
Overall study status Completed	Statistical analysis plan		
	[X] Results		
Condition category  Mental and Behavioural Disorders	Individual participant data		
	No longer recruiting  Overall study status  Completed		

## Plain English summary of protocol

Not provided at time of registration

# Contact information

## Type(s)

Scientific

### Contact name

Dr Hugh Rickards

## Contact details

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# Additional identifiers

**EudraCT/CTIS** number

IRAS number

ClinicalTrials.gov number NCT01647269

Secondary identifying numbers

V 1.0

# Study information

### Scientific Title

Pilot randomised controlled trial of deep brain stimulation in Tourette syndrome

## **Study objectives**

Current hypothesis as of 05/12/2007:

That bilateral deep brain stimulation applied to the globus pallidus internum will improve symptoms of Tourette syndrome, as measured by the Yale Global Tic Severity scale, when compared to sham stimulation.

## Previous hypothesis:

That deep brain stimulation applied to the globus pallidus internum bilaterally will reduce tic scores significantly over one year compared to sham stimulation in Tourette syndrome.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Ethics approval applied for via:

- 1. COREC on 06/06/2007
- 2. NRES in December 2007

## Study design

Randomised placebo-controlled crossover study

## Primary study design

Interventional

## Secondary study design

Randomised cross over trial

## Study setting(s)

Hospital

## Study type(s)

Treatment

## Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

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

Tourette syndrome

#### **Interventions**

Current interventions as of 05/12/2007:

Group 1:

Group 1 will have deep brain stimulation electrodes placed in the globus palludus internum.

After 6 weeks, the electrodes will be switched on and adjusted maximally. After 3 months, electrodes will be switched off and the patient followed up after a further 3 months.

## Group 2:

Group 2 will have deep brain stimulation electrodes placed in the globus pallidus internum. After 6 weeks, the participant will have a "sham" switching on of electrodes. After 3 months, the electrodes will be switched on and adjusted maximally. The patient will be followed up and assessed after a further 3 months.

#### Previous interventions:

Intervention group:

Intervention group will have deep brain stimulation electrodes placed in globus pallidus externum. After 6 weeks, the electrodes will be switched on and further adjusted at 12 and 18 weeks. Follow-up assessments will then happen at 6 months, 9 months and 12 months.

## Control group:

Control group will also have severe Tourette syndrome. They will also have electrodes implanted in the same way as the patients. After 6 weeks they will have a "sham switch on" proceedure. Follow-ups will be done in the same way as the intervention group.

After one year of treatment, the code will be broken and data analysed. Participants in the intervention and control group will then be invited to participate in a further year of open-label extension study with all stimulators switched on. Data will then be gathered at 18 and 24 months.

## Intervention Type

Procedure/Surgery

## Primary outcome measure

Yale Global Tic severity scale.

## Secondary outcome measures

- 1. Yale-Brown Obsessive Compulsive Scale
- 2. Hospital Anxiety and Depression Scale
- 3. Total Subjective Quality Of Life (TS-QOL)

## Overall study start date

01/04/2008

## Completion date

01/04/2010

# **Eligibility**

## Key inclusion criteria

Adults with medically intractable Tourette syndrome for whom surgery and post-operative care is not contraindicated.

## Participant type(s)

Patient

## Age group

Adult

## Sex

Both

## Target number of participants

20

## Key exclusion criteria

- 1. Tics for other neurological reasons
- 2. High risk for surgery or post-op care

## Date of first enrolment

01/04/2008

## Date of final enrolment

01/04/2010

# Locations

## Countries of recruitment

England

**United Kingdom** 

## Study participating centre Queen Elizabeth Psychiatric Hospital

Birmingham United Kingdom B15 2QZ

# Sponsor information

# Organisation

University Hospital Birmingham NHS Foundation Trust (UK)

## Sponsor details

Research and Development Department 3rd Floor Nuffield House, University Hospital Edgbaston Birmingham United Kingdom B15 +44 (0)121 4721311 chris.counsell@uhb.nhs.uk

## Sponsor type

Hospital/treatment centre

## Website

http://www2.uhb.nhs.uk/Homepage.aspx

### ROR

https://ror.org/014ja3n03

# Funder(s)

## Funder type

Charity

## **Funder Name**

Tourette Syndrome Association (UK) - applied for funding

# **Results and Publications**

# Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not provided at time of registration

# **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/06/2015		Yes	No