

# Learn to Move 0-2 years: Early intervention in children with cerebral palsy

<b>Submission date</b> 09/09/2008	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 19/09/2008	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 11/02/2009	<b>Condition category</b> Nervous System Diseases	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**Protocol serial number**  
60-61300-98-003

## Study information

**Scientific Title**

**Acronym**  
L2M0-2

**Study objectives**

One year of intervention with the new physiotherapeutic programme COPCA (see Interventions) results in a better motor developmental outcome than one year of intervention by means of traditional paediatric physiotherapy in infants at very high risk for cerebral palsy.

### **Ethics approval required**

Old ethics approval format

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

Added 11/02/2009: Medical Ethics Committee of the University Medical Centre Groningen gave approval on the 24th October 2008 (ref: METc2008.176)

### **Study design**

Randomised single-blind controlled trial

### **Primary study design**

Interventional

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

Treatment

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

Cerebral palsy

### **Interventions**

COPCA = "COPing with and CARing for infants with neurological dysfunction" programme: The COPCA programme is a home based programme, and will be delivered by specially trained paediatric physiotherapists. The COPCA programme has motor and educational goals.

The motor goals:

- a. To increase the infant's motor repertoire
- b. To improve the ability to select a specific strategy fit for function in a specific daily life situation

Educational goals:

- a. Promotion/restoration of intuitive parenting capacities, which in general are seriously affected in caregivers of infants with neurological disability
- b. Coaching family members in such a way that they are able to cope well with life, including the developmental problems of the child

Schedule of the COPCA programme: 1 hour/session, 2 sessions per week for the first 6 months, and then 1 session every 2 weeks for the next 6 months (total duration of the programme: 1 year)

Description of the COPCA programme can be found at: <http://www.ncbi.nlm.nih.gov/pubmed/17555816>

The participants in the control group will receive traditional paediatric physiotherapy for 1 year.

### **Intervention Type**

Other

**Phase**

Not Applicable

**Primary outcome(s)**

Score on the Infant Motor Profile (IMP) at baseline, after 3, 6 and 12 months after start of intervention.

**Key secondary outcome(s)**

1. Neurological condition, assessed at 3, 6 and 12 months
2. Alberta Infant Motor Scale (AIMS), assessed at 3, 6 and 12 months
3. Gross Motor Function Measure (GMFM), assessed at 3, 6 and 12 months
4. Bayley Scales of Infant Development (BSID), assessed at 3, 6 and 12 months
5. Vineland Adaptive Behavior Scales (VABS), assessed at 6 and 12 months
6. Pediatric Evaluation of Disability Inventory (PEDI), assessed at 12 months
7. Nijmeegse Ouderlijke Stress Index (NOSI-K), assessed at 12 months
8. Utrecht Coping List (UCL), assessed at 12 months
9. Family Empowerment Scale (FES), assessed at 6 and 12 months
10. Measure of Processes Of Care (MPOC), assessed at 12 months

**Completion date**

31/12/2012

**Eligibility****Key inclusion criteria**

1. Both males and females, corrected age at enrolment 3 to 9 months
2. At very high risk for cerebral palsy (CP), based on the presence of one of the following:
  - a. Cystic periventricular leukomalacia (PVL), diagnosed on serial ultrasound assessment of the brain
  - b. Uni- or bilateral parenchymal lesion of the brain
  - c. Term/near term asphyxia resulting in Sarnat 2 or 3 with brain lesions on magnetic resonance imaging (MRI) and/or neurological dysfunction during infancy suggesting the development of CP
  - d. Neurological dysfunction suggestive of development of CP

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Child

**Lower age limit**

3 months

**Upper age limit**

9 months

**Sex**

All

**Key exclusion criteria**

1. Caregivers have insufficient understanding of the Dutch language
2. Infants who have an additional severe congenital disorder, such as a serious congenital heart disorder

**Date of first enrolment**

01/01/2009

**Date of final enrolment**

31/12/2012

**Locations****Countries of recruitment**

Netherlands

**Study participating centre**

PO Box 30001

Groningen

Netherlands

9713 GZ

**Sponsor information****Organisation**

The Netherlands Organisation for Health Research and Development (ZonMw) (Netherlands)

**ROR**

<https://ror.org/01yaj9a77>

**Funder(s)****Funder type**

Research organisation

**Funder Name**

The Netherlands Organisation for Health Research and Development (ZonMw) (Netherlands)  
(ref: 60-61300-98-003, thema II [kinderen])

# Results and Publications

## 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?
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes