A pilot assessor-blinded randomised controlled trial of Lee Silverman Voice Treatment versus standard NHS Speech and Language Therapy in Parkinson's Disease

Submission date	Recruitment status No longer recruiting	[X] Prospectively registered	
22/03/2012		[X] Protocol	
Registration date	Overall study status	Statistical analysis plan	
22/03/2012	Completed	[X] Results	
Last Edited	Condition category	☐ Individual participant data	
30/01/2018	Mental and Behavioural Disorders		

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

11652

Study information

Scientific Title

A pilot assessor-blinded randomised controlled trial of Lee Silverman Voice Treatment versus standard NHS Speech and Language Therapy in Parkinson's Disease

Acronym

PD COMM Pilot

Study objectives

Parkinsons disease (PD) is a common movement disorder, affecting approximately 120,000 people in the UK. Over two thirds of people with PD report having speech-related problems which has a great impact on their lives, leading to increased physical and mental demands during conversation, reduced independence and social withdrawal. Speech and language therapy (SLT) is advocated for people with PD but current provision is low, with a recent Parkinsons UK survey reporting that just 37% of the patients included had received SLT. This may be attributed, in part, to the limited scientific evidence of a benefit of SLT for people with PD. Currently 2 different types of SLT are available in the UK: standard NHS SLT, typically consisting of 1 hour per week for 6 - 8 weeks and Lee Silverman Voice Training (LSVT), a more intensive therapy comprising of 4 sessions per week for 4 weeks. From the literature it is unclear if one or both of these treatments is effective or acceptable to people with PD, and if there is a benefit whether it continues once the treatments have stopped.

We propose a pilot study in which LSVT, traditional NHS SLT and a no intervention control will be compared in people with PD. People with PD will be randomly assigned to one of the 3 groups and their communication effectiveness and quality of life will be compared before and after treatment, and 6 and 12 (Participant forms only) months later to see if any benefit remains. This pilot trial will be used to assess the feasibility of running a larger trial with enough participants to determine if either or both treatments are effective. The pilot will test recruitment, compliance, outcome measures and effect size. In light of the findings, the design of the study may be refined for the large scale trial.

Ethics approval required

Old ethics approval format

Ethics approval(s)

First MREC 22/11/2011, ref: 11/WM/0343

Study design

Randomised interventional treatment

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Parkinson's disease

Interventions

Patient will be randomised between Standard NHS SLT versus Lee Silverman Voice Training versus no treatment.

Patients who recieve therapy should do so within one month of randomisation and have their course finished by three months. Followed up at 12 months.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

VHI - Voice Handicap Index measured at baseline, 3 months, 6 months & 12 months.

Key secondary outcome(s))

- 1. AIDS Assessment of Intelligibility of Dysarthic Speech measured at baseline, 3 months, 6 months
- 2. Comprehension Assessment measured at baseline, 3 months, 6 months
- 3. EQ-5D Eurogol measured at baseline, 3 months, 6 months & 12 months
- 4. ICECAP-O measured at baseline, 3 months, 6 months & 12 months
- 5. LwD Living with Dysarthia questionnaire measured at baseline, 3 months, 6 months & 12 months
- 7. Parkinson's Disease Carers' Questionnaire Quality of Life Assessment measured at baseline, 3 months, 6 months & 12 months
- 8. PDQ-39 Parkinsons Disease Questionnaire 39 measured at baseline, 3 months, 6 months & 12 months
- 9. Resource Usage measured at 3 months, 6 months & 12 months
- 10. Vocal Loudness measured at baseline, 3 months, 6 months
- 11. V-RQoL Voice related Quality of Life Scale measured at baseline, 3 months, 6 months & 12 months.

Completion date

31/10/2013

Eligibility

Key inclusion criteria

1. Idiopathic Parkinsons disease defined by the UK PDS Brain Bank Criteria.

These criteria are in standard use throughout the NHS in the UK and were supported by the NICE guidelines.

- 2. PD patients who have self or carer-reported problems when asked:
- "Do you have any problems with your speech or voice?" by their physician or PD nurse specialist
- 3. Male and female participants

Participant type(s)

Patient

Healthy volunteers allowed

Age group

Adult

Sex

Αll

Key exclusion criteria

- 1. Dementia as usually defined clinically by the patients physician. From our experience in PD MED, some patients with moderate to severe dementia have difficulty in completing self-assessment forms
- 2. Evidence of laryngeal pathology including vocal nodules or a history of vocal strain or previous laryngeal surgery within their medical records or from discussions with client, as LSVT is not appropriate for this group
- 3. Received SLT in the last 2 year
- 4. The investigator is certain the person will need SLT within 6 months

Date of first enrolment

01/04/2012

Date of final enrolment

31/10/2013

Locations

Countries of recruitment

United Kingdom

England

Study participating centre University of Birmingham Birmingham United Kingdom B15 2TT

Sponsor information

Organisation

University of Birmingham (UK)

ROR

https://ror.org/03angcq70

Funder(s)

Funder type

Charity

Funder Name

Dunhill Medical Trust

Alternative Name(s)

The Dunhill Medical Trust, Dunhill Medical Trust, DunhillMedical, DMT

Funding Body Type

Private sector organisation

Funding Body Subtype

Trusts, charities, foundations (both public and private)

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Study outputs

Output type	Details	Date created Date added	Peer reviewed?	Patient-facing?
Results article	results	10/01/2018	Yes	No
Protocol article	protocol	07/06/2014	Yes	No
Participant information sheet	Participant information sheet	11/11/2025 11/11/2025	No	Yes