

# The effect of the implantable two-channel peroneal nerve stimulator as a treatment in stroke patients with a drop foot in comparison with the conventional treatment

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<b>Registration date</b> 27/01/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 04/07/2019	<b>Condition category</b> Circulatory System	<input type="checkbox"/> Individual participant data

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

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
001; NTR494

# Study information

## Scientific Title

The effect of the implantable two-channel peroneal nerve stimulator as a treatment in stroke patients with a drop foot in comparison with the conventional treatment

## Acronym

RCT PNS (peroneal nerve stimulation)

## Study objectives

The functional electrical stimulation (FES) group will show in comparison with the conventional therapy group:

1. Increased gait speed (primary outcome)
2. Increased endurance
3. Improved gait kinematics
4. Increased muscle activity level
5. Reduced spasticity
6. Positive effect on passive range of movement (ROM)
7. Reduced disability

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Received from the local medical ethics committee

## Study design

Randomised, active controlled, parallel group trial

## Primary study design

Interventional

## Secondary study design

Randomised controlled trial

## Study setting(s)

Hospital

## Study type(s)

Treatment

## Participant information sheet

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

Dropfoot, stroke

## Interventions

The conventional management of dropped foot has been to use a rigid orthosis to maintain the ankle in a neutral position. This has major limitations as a treatment, being both uncomfortable and awkward to use and hence is often rejected by patients and therapists.

Currently, functional electrical stimulation (FES) systems for the treatment of dropped foot are in clinical use in significant numbers. FES is the artificial stimulation of muscles with the purpose of evoking a motor response. Compared with the use of orthosis, electrical stimulation has a number of advantages: it prevents muscle atrophy, the blood flow remains normal or even improves and it is cosmetically better accepted.

An implantable system was developed that stimulates the two branches of the peroneal nerve separately. Results from previous studies indicate that the system is safe to use, well liked by the patients, provides selectivity over moments at the ankle joint and increases both walking speed and endurance. In the present study the additional value of the two-channel implantable peroneal nerve stimulator in comparison with the conventional treatment will be examined by measuring different parameters.

### **Intervention Type**

Other

### **Phase**

Not Specified

### **Primary outcome measure**

Walking speed

### **Secondary outcome measures**

1. Endurance
2. Spasticity
3. EMG
4. 3D-kinematics
5. Quality of life questionnaires
6. Activity monitoring
7. Carry-over effect

### **Overall study start date**

01/09/2002

### **Completion date**

31/12/2005

## **Eligibility**

### **Key inclusion criteria**

1. Dropped foot identified by an inability to achieve a normal heel strike during walking
2. First hemiplegia of at least 6 months as a result of a cerebrovascular accident (CVA) with a stable neurology
3. Successful functional recovery after surface stimulation of the common peroneal nerve
4. Subject is an outdoor walker
5. Able to give informed consent

### **Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Both

**Target number of participants**

29

**Total final enrolment**

29

**Key exclusion criteria**

1. Aged less than 18 years
2. Passive dorsiflexion of the ankle less than 5° with knee in extension
3. Medical conditions limiting the function of walking other than CVA, i.e. neurological, rheumatic, cardio-vascular or systemic disorders (including Diabetes Mellitus)
4. Injury of N. peroneus or N. ischiadicus
5. Not be able to don and doff the equipment
6. Pregnancy

**Date of first enrolment**

01/09/2002

**Date of final enrolment**

31/12/2005

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

Netherlands

**Study participating centre**

Roessingh Research and Development

Enschede

Netherlands

7500 AH

**Sponsor information****Organisation**

Roessingh Research and Development B.V. (The Netherlands)

**Sponsor details**

P.O. Box 310  
Enschede  
Netherlands  
7500 AH

**Sponsor type**

Research organisation

**Website**

<http://www.rrd.nl>

**ROR**

<https://ror.org/01dmjt679>

## Funder(s)

**Funder type**

Government

**Funder Name**

SETER - A branch of the Dutch Ministry of Economic Affairs (The Netherlands)

## 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?
<a href="#">Results article</a>	results	01/08/2007	04/07/2019	Yes	No