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Developing stroke care for adults in the community: rehabilitation through conductive education

Submission date 12/05/2010	**Recruitment status** No longer recruiting	[_] Prospectively registered [_] Protocol [_] Statistical analysis plan [X] Results [_] Individual participant data
Registration date 04/03/2011	**Overall study status** Completed	
Last Edited 09/11/2017	**Condition category** Circulatory System	

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
N/A

Study information

Scientific Title

Conductive education as a method of post-stroke rehabilitation: a randomised controlled trial

Study objectives
Conductive Education (CE) is a specialised rehabilitation system developed in Hungary in the late 1940s by András Petö. The CE approach is used with adults and children with motor disorders subsequent to neurological damage. CE aims to help stroke survivors to maintain and/or increase range and control of movement, teaching components of everyday skills and strategies that each individual can apply to their daily activities. Functional tasks are broken down into a series of components that are repeatedly and rhythmically practiced with verbal reinforcement ('rhythmical intention'). Task series are designed to allow participants to develop an increased awareness of their own movement and to learn the basic rules of movement solutions which can then be applied through regular daily activity.

Previous research has shown some improvements in stroke survivor's activities of daily living and well-being (Brittle et al., 2008), as well as a reduction in carer burden (Laver & Brown, 1995) following CE intervention. However, no previous study has examined CE outcomes for stroke participants in comparison with a control group. We are therefore examining a broad range of quality of life outcomes across physical, cognitive and psychological domains using a randomised design. We are also measuring carer well-being in relation to CE.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Birmingham City Council Research Governance Advisory Committee, 02/02/2010

Study design
Single-centre interventional randomised waiting list controlled cross-over trial

Primary study design
Interventional

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Stroke rehabilitation

Interventions
The conductive education intervention will be administered as a 1.5 hour session once per week for 10 weeks. Intervention takes place in a small group setting (maximum of 5 participants) led by two conductors. Control (waiting list) participants will attend two introductory sessions during the wait period in which they will receive standard written and visual materials.

All participants will be followed up 3 months after completion of the conductive education programme.

Participants in the waiting list group will be offered intervention after 3 months.

Intervention Type
Other

Phase
Not Applicable

Primary outcome(s)
1. Mobility will be assessed using a timed up and go test and a 10 metre walking test:
The timed up and go test requires participants to stand from a chair, walk forward 3 metres, turn around, return to the chair and sit down. Completion time (in seconds) is recorded. The 10 metre walking test requires the participant to walk forwards 10m at their normal pace, and completion time (seconds) is recorded.
2. Activities of daily living will be measured using the Barthel Index:
A 10 item questionnaire examining activities such as walking and dressing. Higher scores represent greater functional independence.
3. Quality of life will be measured using the Stroke Impact Scale:
A 59-item stroke-specific questionnaire covering 8 domains of well-being. Higher scores indicate better well-being.
4. Participants are also asked to complete the EQ-5D quality of life scale for use in an economic evaluation linked to the study

All measures are taken at baseline (before commencing the intervention/wait period), after 3 months (on completion of the intervention/waiting list period) and at follow up 3 months after intervention. Waiting list participants are also assessed on completion of the CE course.

Key secondary outcome(s))
1. Cognitive performance will be measured using the following:
1.1. Test of Everyday Attention, which tests selective, sustained and divided attention
2. Wisconsin Card Sorting Test (WCST-64 version), a measure of planning, problem solving and cognitive flexibility.
2. Anxiety and depression will be measured using the Hospital Anxiety and Depression Scale (HADS):
A 14-item questionnaire. Higher scores indicate higher levels of anxiety and depression.
3. Carers will be asked to complete the following at each assessment point:
3.1. SF-36, a general health-related quality of life measure
3.2. HADS

All measures are taken at baseline (before commencing the intervention/wait period), after 3 months (on completion of the intervention/waiting list period) and at follow up 3 months after intervention. Waiting list participants are also assessed on completion of the CE course.

Completion date
31/07/2012

Eligibility

Key inclusion criteria
1. Individuals who have suffered a stroke and are in the post-acute stage of recovery
2. Participants should be medically well enough to follow the programme and be capable of giving informed consent.
3. Male or female, age ≥ 18 years

Participant type(s)

Patient

Healthy volunteers allowed
No

Age group
Adult

Lower age limit
18 years

Sex
All

Key exclusion criteria
1. Individuals who are medically unfit to participate or unable to give informed consent
2. Participants must not be receiving regular physiotherapy input

Date of first enrolment
01/04/2010

Date of final enrolment
31/07/2012

Locations

Countries of recruitment
United Kingdom

England

Study participating centre
National Institute of Conductive Education
Birmingham
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Sponsor information

Organisation
Birmingham City Council (UK) - Adults and Communities

ROR
https://ror.org/04dm6ed68

Funder(s)

Funder type
Government

Funder Name
Birmingham City Council (UK) - Department of Health Stroke Care Grant (May 2009)

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?
Results article	results	01/02/2016		Yes	No