Computer therapy versus usual stimulation for people with long standing aphasia

Submission date	Recruitment status	[] Prospectively	
		Protocol	
Registration date 21/05/2010	Overall study status Completed	[X] Results	
Last Edited 27/10/2022	Condition category Signs and Symptoms	[_] Individual par	

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 7203

registered

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ticipant data

Study information

Scientific Title

Evaluating the cost effectiveness of computer therapy compared with usual stimulation for people with long standing aphasia: a feasibility study [Previously known as Computerised Word Finding Therapy for Stroke]

Acronym

CACTUS

Study objectives

Aphasia is a communication disorder often caused by stroke. It can affect the ability to understand what is said, the ability to produce correct words and the ability to read and write. People with aphasia rarely receive treatment from NHS speech and language therapists for more than 3 months. It has been established that people with aphasia can continue to improve their communication with prolonged treatment (beyond 12 months). However this is rarely available. Surveys indicate that people with aphasia and their families often feel abandonned when therapy is discontinued and want to continue making efforts to improve (Stroke Survey 2006).

Step-by-Step is a computer program designed to help people to practise exercises to improve their ability to find the correct words when they are talking. This study aims to evaluate the feasibility of carrying out a large study to compare computer therapy with the usual stimulation provided for people with aphasia in stroke clubs or at home to see if use of computer software with assistance from a carer/volunteer can improve the ability of people with aphasia to talk. People who use the computers for treatment will be interviewed to find out how they found working with computers.

This research will test the methods for a randomised controlled trial to help establish whether people with aphasia can continue to improve their ability to talk after completion of traditional NHS therapy, and whether this can be achieved cost-effectively by offering computer treatment at home and in voluntary sector settings. Potential benefits to patients include the opportunity for continued treatment and thus improved ability to talk. It could also give patients independence and control over their therapy. The NHS would benefit by being able to support a long term aphasia treatment service without increasing demand on therapy resources.

Ethics approval required

Old ethics approval format

Ethics approval(s)

NHS Bradford Research Ethics Committee approved on the 15th April 2009 (ref: 09/H1302/20)

Study design

Multicentre randomised interventional treatment trial

Primary study design Interventional

Secondary study design Randomised controlled 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

Topic: Stroke Research Network; Subtopic: Rehabilitation; Disease: Community study

Interventions

Thirty participants with aphasia will be recruited. Participants will be randomly allocated to computer treatment using Step-by-Step word finding software by Jane Mortley (group 1) or usual care (group 2). Group 1 will carry out computer exercises independent of a speech therapist for 5 months. Support will be provided only by stroke volunteers or carers. Structured interviews about the use of computers will be carried out with participants.

Study entry: single randomisation only

Intervention Type

Other

Phase Phase II

Primary outcome measure

Recruitment rate, measured at baseline, 5 months and 8 months.

Secondary outcome measures

Measured at baseline, 5 months and 8 months:

- 1. Acceptability of using computer based word finding therapy
- 2. Change in participation and wellbeing
- 3. Change in word retrieval
- 4. Estimation of effect size
- 5. Quality adjusted life years
- 6. Resource use data

Overall study start date

30/10/2009

Completion date 30/09/2010

Eligibility

Key inclusion criteria

1. Diagnosis of stroke and aphasia with word finding difficulties as one of the predominant features as assessed by the Comprehensive Aphasia Test (CAT)

2. No longer receiving treatment from a speech and language therapist so that the computer treatment can be better isolated and evaluated

3. First stroke and reported by close relatives/friends to have had no speech or language difficulty pre-stroke to isolate cause

4. Both male and female 18 years or above with no upper age limit

Participant type(s) Patient

Age group Adult

Lower age limit 18 Years

Sex Both

Target number of participants Planned sample size: 30; UK sample size: 30

Total final enrolment 34

Key exclusion criteria

Severe visual or cognitive difficulties reducing ability to use the computer program, tested by the ability to see and perform a simple, non-verbally based computer game.

Date of first enrolment 30/10/2009

Date of final enrolment 30/09/2010

Locations

Countries of recruitment England

United Kingdom

Study participating centre

University of Sheffield Sheffield United Kingdom S1 4DP

Sponsor information

Organisation Sheffield Teaching Hospitals NHS Foundation Trust (UK)

Sponsor details Royal Hallamshire Hospital Glossop Road Sheffield England United Kingdom S10 2.JF

Sponsor type Hospital/treatment centre

Website http://www.sth.nhs.uk/

ROR https://ror.org/018hjpz25

Funder(s)

Funder type Government

Funder Name National Insititute for Health Research (NIHR) (UK) - Research for Patient Benefit (RfPB)

Results and Publications

Publication and dissemination plan Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan Not provided at time of registration

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<u>Results article</u>		01/07/2012		Yes	No